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**Policy Review Report:
Early Childhood Care and Education
In Kenya**

**The Section for Early Childhood and Inclusive Education,
Division of Basic Education
UNESCO Education Sector**

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**Policy Review Report:
Early Childhood Care and Education in Kenya**

Presented by

*The Section for Early Childhood and Inclusive Education
Division of Basic Education, Education Sector
UNESCO, Paris*

February 2005

Approved by

*The Ministry of Education, Science and Technology
Government of Kenya*

March 2005

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Glossary

| | |
|----------|--|
| CBO | Community-Based Organisation |
| CICECE | City Centre for Early Childhood Education |
| DICECE | District Centre for Early Childhood Education |
| ECD | Early Childhood Development |
| EFA | Education for All |
| ESSP | Education Sector Strategic Plan |
| FPE | Free Primary Education |
| GER | Gross Enrolment Ratio |
| GOK | Government of Kenya |
| HIV/AIDS | Human Immunodeficiency Virus / Acquired Immune Deficiency Syndrome |
| KIE | Kenya Institute of Education |
| KSh | Kenya Shilling |
| MICS | Multiple Indicators Cluster Survey (of UNICEF) |
| MOEST | Ministry of Education, Science and Technology (of Kenya) |
| MUCECE | Municipal Centre for Early Childhood Education |
| NACECE | National Centre for Early Childhood Education |
| NER | Net Enrolment Ratio |
| NGO | Non-Governmental Organisation |
| OECD | Organisation for Economic Cooperation and Development |
| TSC | Teachers Service Commission |
| UNESCO | United Nations Educational, Scientific, and Cultural Organisation |
| UNICEF | United Nations Children's Fund |

Technical Notes

| | |
|-------------------------------------|--|
| Age | Children's ages are expressed as follows: Children up to their first birthday are referred to as 0 ⁺ -year-olds; after their first birthday and before their second birthday they are 1 ⁺ -year-olds. Thus, 3 ⁺ -year-olds have had their third birthday, and so on. |
| Early childhood development | Early Childhood Development (ECD) is the term used in Kenya to refer to the area of discipline that concerns the care, development and learning of young children of ages 0 ⁺ -5 ⁺ years. ECD is under the responsibility of the Ministry of Education, Science and Technology, and consists of the following major services: Nursery School, Pre-Unit Class (see below), Kindergarten, Day Nursery, Playgroup, Madrassa and Home-Based Care Centre. |
| Early childhood development centres | Early Childhood Development (ECD) Centre is a generic term for various early childhood services provided under the framework of ECD, including those mentioned above. |
| Early childhood services | In this report, the term early childhood services refers to all types of formal, non-formal and informal early childhood care and/or education services catering for children from 0 ⁺ to 5 ⁺ years old and/or their parents. |
| Kenya Shilling (KSh) | According to the exchange rate of January 2005, US\$1 is equal to KSh 80.72. |
| Pre-Unit class | Pre-Unit Class refers to the senior level of ECD catering for 5 ⁺ -year-olds in Kenya. With the aim to provide a head start for primary schooling, it offers highly formal learning with emphasis on reading, writing and arithmetics. Pre-Unit Classes are found attached to primary schools located in certain urban areas. They are also found in ECD Centres alongside classes receiving children aged 3 ⁺ and 4 ⁺ . The term is used interchangeably with "Preschool Unit Class" and "Pre-Unit". |
| Draft Sessional Paper No. 1 of 2005 | <i>Sessional Paper No. 1 of 2005 on a Policy Framework for Education, Training and Research: Meeting the Challenges of Education, Training and Research in Kenya in the 21st Century</i> outlines the Government policy on education and training, developed mainly on the basis of the recommendations put forward at the National Conference on Education and Training of November 2004. As of March 2005, the paper is to be presented to the Parliament shortly. It is referred to as "Draft Sessional Paper No. 1 of 2005" throughout this Report. |

EXECUTIVE SUMMARY

The vision of early childhood development (ECD)

The MOEST's mandate has been expanded to cater for the early care, development and education needs of young children. Awareness has been raised with regard to the importance of an integrated approach to the holistic development of the child. Yet gaps appear in practice. Services for children under three are not well developed, and the activities of ECD Centres focus heavily on teaching young children basic learning skills. Many stakeholders still view ECD as "early schooling". Parenting education could be a good strategy for enhancing the care and education of younger children, and training is needed for ECD teachers.

ECD and Free Primary Education policy

Since the introduction of the Free Primary Education (FPE) policy, poor parents have tended to keep their children at home until they reach the entitlement age for FPE. Consequently, ECD teachers, whose salaries are mostly dependent on parental contributions, are leaving their jobs, and ECD is reportedly on the verge of collapse. A proposal to provide one year of free ECD services for five-year-olds should be viewed with caution, as this could trigger a similar collapse of services for younger children within ECD. The problem of unprepared Standard One pupils should be handled and resolved within the framework of FPE, and ECD should be reserved as a place and time for the child's holistic development. The service structure for the care and education of younger children must be developed and reinforced in order to save the ECD system.

Participation

A major decline in enrolment occurred before the FPE policy was implemented, suggesting that FPE may not be the only reason for this decline. Access to ECD Centres is inequitable, with poor children from semi-arid, arid and urban slum areas less likely to enrol in them. A relatively large gap between gross and net enrolment ratios implies the presence of over-age and under-age children in ECD Centres. The presence of over-age children explains, in part, the heavy focus on pre-primary education. The presence of under-age children points to the difficulty of delivering quality ECD services. Equity should be a key policy objective.

Workforce and resources

The World Bank investment in training ECD teachers is at risk of being wasted as trained ECD teachers leave their jobs complaining of poor and irregular pay. Integrating ECD teachers in the Government pay scale determined by the Teachers Service Commission, though desirable, seems to be a financially difficult option. A minimum salary guarantee from the Government, supplemented by parental contributions, would be more feasible. In-service ECD training for primary teachers needs further support. Parental pressure for pre-primary education prevents ECD teachers from delivering pedagogically correct services; but there are innovative pilot initiatives that work and that can be implemented elsewhere.

Data gap

Data gaps are particularly pronounced in relation to the provision of non-formal and informal services, especially those focused on care and development. Financing, inequity and impact are three policy issues requiring the most urgent data development, which must, however, be preceded by the conceptual clarification of various services. While research is needed on financing issues, the more urgent objectives are to make use of research findings in policymaking and to link the research community with policymakers.

Recommendations

ECD principles have been accepted, but action plans and strategies to implement the principles in the particular context of Kenya need further elaboration. A solid policy framework based on prioritisation and phasing strategies is urgently needed. To develop a policy framework, some conceptual and terminological clarifications are needed. Most important, a clearer and rational provision structure needs to be put in place for the training of teachers, caregivers and parents as well as for inspection and monitoring before any efforts are launched to develop training, inspection, monitoring and evaluation systems. As for the provision of one year free pre-primary education, emphasis must be placed on the consolidation of service structures for younger children. Providing ECD teachers with minimum

government support would be essential to mobilise supplementary resources from parents and prevent the collapse of ECD Centres. Finally, efforts must be focused on the drafting of relevant legislation in order to ensure policy implementation.

1. INTRODUCTION

1.1. About the Project

1.1.1. **Context:** The world community that assembled in Dakar, Senegal, in 2000 for the 10th anniversary of Education for All (EFA) reaffirmed its commitment to early childhood care and education, whose development was set as the first of the six Dakar EFA goals. Yet, in most developing countries, early childhood care and education has not been part of public policy, and governments have limited capacity for developing policies and systems for it. Particularly lacking is knowledge on policy options and strategies for promoting the child's holistic development with limited resources.

1.1.2. In this context, UNESCO's 2004-2005 planning included the launch of the *UNESCO/OECD Early Childhood Policy Review Project* (the Project, hereafter). The purpose is to provide selected countries with an opportunity to review their early childhood policies and identify concrete options and strategies for improvement. Four countries were selected on the basis of their expressed interest – Brazil, Indonesia, Kazakhstan and Kenya. The present review was conducted as part of Kenya's participation in the Project, which is being implemented in collaboration with the Organization for Economic Development and Cooperation (OECD).

1.1.3. **Activity:** Each country review involves the preparation of a Background Report containing baseline information on the country's situation in early childhood care and education, a Review Visit conducted by a Review Team, and a Review Report containing specific policy recommendations. The Review Report is to be presented to national authorities and stakeholders for discussion and follow-up. The concerned UNESCO Field Office organises satellite activities for capacity building or for wider dissemination of the review results. At the global level, the results of the four countries' review processes will be published as a Synthesis Report and an Executive Summary, which will serve as policy reference materials for early childhood education planning in other countries.

1.1.4. **Implementation structure:** The overall planning and coordination of the Project is the responsibility of the Project Secretariat set up at the UNESCO Headquarters. For implementation at the national level, a Country Task Force was set up with the education ministry. The Country Task Force, joined and assisted by the concerned UNESCO Field Office, is responsible for preparing the Background Report, and is the national authority to which the Review Report is submitted.¹

1.1.5. **Review framework:** The Project addresses five major policy issues: access, quality, resources, government coordination and data/research development. But assuming that these policy issues manifest themselves differently in individual countries, consideration is also given to country-specific issues; highlights of the review vary depending on the country's specific situation and needs. Formal, non-formal and informal early childhood services catering for children from birth to the age of entry into primary school are reviewed. Services for parents are also included.

1.2. Review Visit in Kenya

1.2.1. **Preparation:** Prior to the Review Visit to Kenya, the Background Report of Kenya² was prepared by the Country Task Force set up in the Ministry of Education, Science and Technology (MOEST) and submitted to UNESCO. In selecting the visit sites, differences in socio-economic strata, agro-ecological conditions, regional balance, age groups, ethnicity/religion and policy implications were taken into account.

¹ For details, see the *Implementation Guidelines for the UNESCO/OECD Early Childhood Policy Review Project*, of which a copy may be obtained from UNESCO Headquarters (sh.choi@unesco.org).

² The full title of the Background Report prepared for the review in Kenya is *Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project (2005)*, and will be referred to as "Background Report of Kenya" throughout this Report. A copy of the Background Report of Kenya may be obtained from the National Centre for Early Childhood Education of Kenya Institute of Education, the Ministry of Education, Science and Technology, at nacece@insightkenya.com

1.2.2. **Schedule:** The Review Visit took place on September 20-28, 2004, in Nairobi, Eastern Province (Machakos District), North Eastern Province (Garissa District), Rift Valley Province (Nakuru District) and Central Province (Thika District). Sites included Early Childhood Development (ECD) Centres attached to public and private primary schools, community-run ECD Centres, private employer-run ECD Centres, Duksi,³ Children's Homes, Home-Based Care Centres and Public Health Centres.⁴

1.2.3. The Review Team participated in meetings with various government authorities responsible for the planning and implementation of early childhood policies in Kenya (e.g., officials from the MOEST, the Ministry of Planning, and district/municipal/city government authorities) as well as other national stakeholders (e.g., preschool and primary school teachers, head teachers, parents, NGOs). On the final day of the Review Visit, a national consultation was held in order to share and discuss the preliminary findings of the Review Visit with a broad range of early childhood stakeholders. A total of 86 participants attended the consultation.⁵

1.2.4. **Review Team:** The Review Team consisted of one national and four international experts from different areas of expertise:⁶ Henry Manani (National Centre for Early Childhood Education, Kenya Institute of Education, MOEST, Nairobi), Roy Carr-Hill (Professor, London and York Universities, U.K.), Susan Nkinyangi (UNESCO, Nairobi), José Pessoa (UNESCO Institute of Statistics, Montreal) and Soo-Hyang Choi (UNESCO, Paris). The team was accompanied and assisted by Country Task Force personnel and Yoshie Kaga (UNESCO, Paris).

1.3. The Review Report

1.3.1. **Preparation:** The Review Report was prepared on the basis of observation notes submitted by the members of the Review Team and the information provided in the Background Report of Kenya. This Report does not repeat information from the Background Report of Kenya. Rather, it seeks to highlight **only key issues** that deserve the government's immediate attention. To review all the pending issues, readers are encouraged to consult the Background Report of Kenya. Detailed analyses were attempted for some critical issues, but only those on which relevant data were obtained. Some technical suggestions are provided in the Review Results section. The final Recommendations section covers overall policy and specifies key tasks that need to be undertaken with priority.

1.3.2. **Guiding assumptions:** The following assumptions guided the review process and the formulation of the recommendations. First, the ultimate purpose of early childhood care and education is the child's holistic development. The child's preparation for formal schooling is viewed as an integral part of holistic development, not as an isolated objective. Second, government policy on early childhood should be affirmatively pro-poor, addressing the issue of inequity as a priority. Third, early childhood care and education lays the foundation for lifelong learning; and the transition from home to early childhood services, and thence to school, must be smooth.

1.3.3. **Limitations:** The main limitation of this Report is its bias toward the MOEST and insufficient coverage of activities undertaken by other ministries and sectors. The Review Visit was too short to cover comprehensively the existing range of early childhood services, especially those related to young children under three. Furthermore, the issue of sectoral coordination could not be explored in great detail.

³ Duksi is a Koranic school that exclusively provides Koranic instruction to children of a broad age range including preschool-aged children. Attendance in Duksi takes place before and after school, and on Saturdays and Sundays. Madrassa is another type of Koranic school that exists in Kenya but provides a broader range of learning including the Holy Koran.

⁴ See Annex 1 for details.

⁵ The proceedings of the consultation meeting are available. Contact: Ms. Susan Nkinyangi at susan.nkinyangi@unesco.unon.org

⁶ See Annex 2 for details.

2. COUNTRY PROFILE⁷

2.1. Socio-Economic Profile

2.1.1. Demography: Kenya is one of the most populous countries of the African continent with about 31 million people. Eighty percent of the population is concentrated in the 17% of land area comprising high, medium and low potential regions; the remaining 20% is sparsely scattered in the semi-arid or arid regions that make up 83% of the territory.⁸ The under-14 age group accounts for about 43% of the total population, higher than the average 37% for low-income countries. The overall demographic profile, however, is not expanding at a particularly alarming pace. Population growth has slowed, with a 1.4% growth rate projected for 2002-2015. The fertility rate has declined almost by half since 1980, though it was still high at 4.2 in 2002. Life expectancy is declining due to inadequate health services⁹ and the HIV/AIDS epidemic.¹⁰

2.1.2. Economy: Kenya has a PPP gross national income per capita of US\$1,010, which is below the averages for low-income (\$2,110) and sub-Saharan African (\$1,700) countries. Its GDP growth rate, at 1.0% in 2001-2002, is lower than in low-income (4.0%) and sub-Saharan African (2.8%) countries. Services is the largest contributor to GDP. With a GINI index of 44.5 in 1997, Kenya shows a degree of inequality in income distribution. More than half the population, 58.6%, live under the international poverty line of \$2.¹¹

2.1.3. Women and child development: Female labour participation (ages 15-64) was 77% in 2002, and has hardly changed since 1980. However, the figure is higher than the average of low-income countries (54%) or the world average (61%). The education of girls and women does not pose a major challenge, and Kenya's female adult literacy rate has increased steadily over the last two decades, reaching 79% in 2002. Gender equity has been achieved in primary and secondary education. Despite the female population's active participation in education and the labour force, however, Kenya's Gender-related Development Index (GDI) ranks low at 115 out of 144.¹²

2.1.4. Although 76% of pregnant women in Kenya receive prenatal care, skilled health staff attend only 44% of births. This is reflected in Kenya's high maternal mortality rate of 1,000 per 100,000 births. The under-5 mortality rate in Kenya (122) is just above the average for low-income countries (121). The child immunisation rate for measles (78%) is higher than the low-income countries' average (65%) and the world average (72%).¹³

2.1.5. HIV/AIDS Pandemic: Four-fifths of Kenya's orphans are AIDS orphans, who numbered more than 1.1 million in 2001, and the number is projected to increase to 1.2 million in 2005. Eighty to ninety percent of those infected are of childbearing age, between 15⁺ and 49⁺ years old. Meanwhile, 10% of those infected are under age 5.¹⁴

2.2. Educational Profile

2.2.1. Education system: Formal schooling in Kenya consists of eight years of primary education, four years of secondary education and four years of university education, referred to as the 8-4-4 system. Basic education is defined as 12 years of primary and secondary education. According to the draft *Sessional Paper No. 1 of 2005 on a Policy Framework for Education, Training and Research: Meeting the Challenges of Education, Training and Research in Kenya in the 21st Century* (hereafter

⁷ See Annex 3 for a more detailed profile in comparison with other countries.

⁸ Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project (2005). MOEST, Government of Kenya.

⁹ According to the World Development Indicators (2004), Kenya's public expenditure on health care services was 1.7% of GDP in 2001, lower than Botswana (4.4%), South Africa (3.6%), Uganda (3.4%) and Tanzania (2.0%).

¹⁰ See Table 1 in Annex 3.

¹¹ See Tables 2 and 3 in Annex 3.

¹² See Tables 4 and 5 in Annex 3.

¹³ See Tables 6 and 13 in Annex 3.

¹⁴ Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project (2005). MOEST, Government of Kenya.

referred to as “Draft Sessional Paper No. 1 of 2005”),¹⁵ the Government is trying to include ECD for ages 4⁺ and 5⁺ as part of basic education. Since 2003, primary education has been free but not compulsory. Children are expected to start formal schooling at age 6⁺.

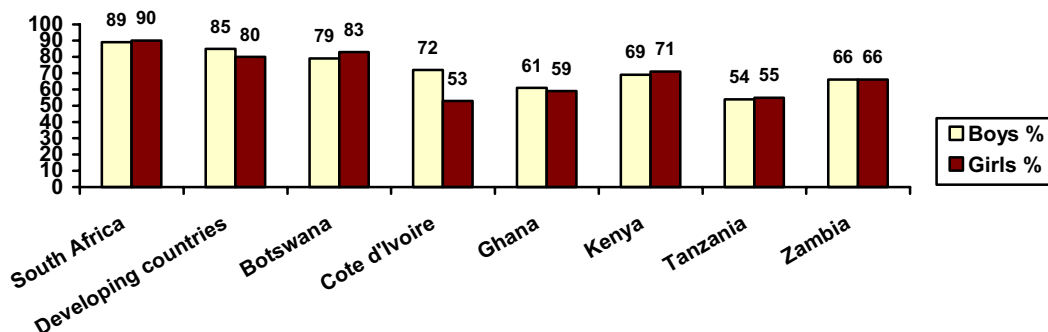
2.2.2. In addition to higher education offering bachelor’s, master’s and doctoral degrees, other types of post-secondary education programmes include technical education and professional training at diploma and certificate levels.¹⁶

2.2.3. Parallel to the formal system are non-formal education programmes catering for disadvantaged populations in arid and semi-arid regions and urban slums. Programmes teaching literacy, vocational and other skills are provided by NGOs, religious organisations and local communities. However, after the introduction of the Free Primary Education (FPE) policy, the MOEST began providing some financial support to non-formal schools offering the national primary education curriculum under the 8-4-4 system.

2.2.4. **Literacy:** Kenya’s adult literacy rate (for ages 15⁺ and over) of 84.5% is slightly higher than the world average of 77.5%. However, there is considerable regional disparity: Central Province has the highest literacy rate of 83.9% compared with 62.8% in Coast Province, the lowest in Kenya in 2000.¹⁷

2.2.5. **Participation in education:** The gross enrolment ratio (GER) in pre-primary education in Kenya was about 40%¹⁸ in 2001, superior to the median of developing (35%) and sub-Saharan African (5.8%) countries. Kenya’s net enrolment ratio (NER) in primary education stood at 70% in 2001, lower than the weighted average of 83% for developing countries (Figure 1). Its NER in secondary education was 24% in 2001, which was below the weighted average of 48.5% for developing countries. Internal efficiency in secondary education is not a major problem, but enrolment is.¹⁹

Figure 1: NERs in primary education in selected African countries and developing countries' weighted average, by sex, 2001



Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing.

2.2.6. Kenya has a relatively low percentage of private enrolment in pre-primary, primary and secondary education. In particular, private enrolment in pre-primary education, at 10.4%, is far inferior to the world median (40.1%) and that of developing countries (55.5%).²⁰

2.2.7. **Educational financing:** Prior to the introduction of FPE, education financing was cost-shared by the government, parents and communities. The Government financed teachers’ and administrators’ salaries as well as some school facilities, while parents and communities paid for

¹⁵ The paper constitutes the Government policy on education and training. See Technical Notes on page 4.

¹⁶ Currently, there are opportunities to undertake advanced levels of study in ECD, e.g. diploma courses in ECD offered by Kenyatta University and University of Nairobi. Reference: Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya.

¹⁷ See Table 8 in Annex 3.

¹⁸ The Education Statistical Booklet 1999-2004. (2004). Nairobi: MOEST, Government of Kenya.

¹⁹ See Table 9 in Annex 3.

²⁰ See Table 11 in Annex 3.

tuition, textbooks, materials, examinations and infrastructure. In 2003, the Government introduced the FPE, making primary education free.²¹

2.2.8. Kenya's level of investment in education is relatively high. Public expenditure on education as a percentage of GDP is 6.3%, higher than the average of high-income countries (5.2%); 22.5% of total government expenditure is on education, more than in high-income countries. However, public expenditure per pupil is highly skewed, with less than 1% of GDP per capita spent on primary education compared with 256.7% on tertiary education.²²

2.3. Early Childhood Profile

2.3.1. **Legislative status:** Early Childhood Development (ECD) in Kenya concerns the holistic development of children between 0⁺ and 5⁺ years old.²³ ECD is under the responsibility of the MOEST. The current Education and Training Act does not include ECD; the only policy framework that directs the MOEST's provision of ECD is the Partnership Policy,²⁴ first stipulated in the Session Paper No. 6 of 1988 and the National Development Plan of 1989/1993. The Children's Act of 2001 safeguards the rights and welfare of children from early childhood to adolescence.

2.3.2. **Service structure:** Seven key early childhood services can be identified in Kenya (Table 1). They are broadly called "ECD Centres". Among them, Nursery School is the most common early childhood service in the country and central to the MOEST's early childhood planning.

Table 1: Profile of key early childhood services

| | Nursery School | Pre-Unit Class ²⁵ | Kindergarten | Day Nursery | Playgroup | Madrassa ²⁶ | Home-Based Care Centre |
|---|--|-------------------------------------|--------------------------------|--------------------------------|--------------------------------|--|--|
| Child age | 3 ⁺ -5 ⁺ | 5 ⁺ | 2 ⁺ -5 ⁺ | 2 ⁺ -5 ⁺ | 2 ⁺ -5 ⁺ | 2 ⁺ -5 ⁺ | 0 ⁺ -3 ⁺ |
| Location | Rural and urban | Primary schools in some urban areas | Rich urban | Nairobi only | Rich urban | Rural and urban | Urban slums, arid or semi-arid areas |
| Focus | Care and education | Education | Care and education | Care and education | Care and education | Care and religious education | Care |
| Opening hours | 4 hours daily | 4 hours daily | 4 hours or 8 hours daily | 4 hours or 8 hours daily | 4 hours daily | Usually in the evening | 8 hours daily |
| Required educational level for teachers | Primary or secondary education depending on the area | Secondary education | Secondary education | Secondary education | None | No formal education required ²⁷ | Primary or secondary education depending on the area |
| Training requirement | 2-year DICECE in-service | 2-year DICECE in-service* | 2-year DICECE in-service* | 2-year DICECE in-service* | 2-year DICECE in-service* | Integrated Islamic Education Programme induction | No requirement |
| Responsible ministry/ authority | MOEST | MOEST | MOEST | MOEST | None | MOEST | None ²⁸ |

²¹ Pupils, however, must still pay for uniforms and food.

²² See Table 7 in Annex 3.

²³ The age group for ECD is defined as 0⁺-5⁺ in official documents such as the Education Sector Strategic Plan and National Action Plan on Education for All (MOEST, 2003). However, the Government initiated a large 7-year ECD project with the World Bank in 1997 for children 0⁺-8, which had various components including improvement of transition from ECD to primary school. Since then, it started referring to ECD as care and education programmes catering to children from birth to 8 years old.

²⁴ The Policy of Partnership aims to enhance the involvement of various partners in the provision of ECD services. Reference: Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya.

²⁵ Pre-Unit Classes cater for 5⁺-year-olds and are found attached to primary schools located in urban areas. However, they can also be found ECD Centres as the senior level of ECD, existing alongside classes for 3⁺ and 4⁺-year-olds. See Technical Notes in page 4.

²⁶ Madrassa is a Koranic school which teaches a broad range of knowledge including the Holy Koran. This differs from Duksi where children learn solely the Koranic teachings.

²⁷ To qualify as a Koranic teacher, one must have attended Madrassa, possess the knowledge of and ability to recite the Koran, and is able to speak the language of the catchment area.

| | | | | | | | |
|------------------------|----------------------|--------------------|---------|--------|---------|--------------------------------------|----------------------|
| Funding and management | Public and community | Public and private | Private | Public | Private | Public/Muslim communities and donors | Public and community |
|------------------------|----------------------|--------------------|---------|--------|---------|--------------------------------------|----------------------|

*Some teachers are trained through one-year pre-service training provided by Kenya Headmistresses Kindergarten Association or Montessori.

2.3.3. **Ministerial auspices:** The MOEST is the major sector responsible for the country's ECD programmes and involves other ministries (e.g., the Ministries of Health, Home Affairs, Gender, Sports, Culture and Social Services, and Local Government) for planning and implementation.

2.3.4. Within the MOEST are three concerned sections at the national level: (1) the ECD Unit of the Directorate of Basic Education in the MOEST Headquarters, responsible for the formulation of policy guidelines, registration of preschools, coordination of data collection, funding, donors and other partners, and provision of trainers; (2) the ECD Unit of the Division of the Directorate of Quality Assurance and Standards, responsible for the inspection of preschools and training institutions, administration of preschool teacher trainee examinations and preschool teacher certificates; and (3) the National Centre for Early Childhood Education (NACECE), housed in the Kenyan Institute of Education (KIE), responsible for preschool curriculum and material development, training of and professional support to District, City and Municipal Centre for Early Childhood Education (DICECE, CICECE, MUCECE) trainers, and coordination of research, monitoring and evaluation.

2.3.5. **Decentralisation:** In 1985, the DICECEs, the district arms of NACECE, were set up with the aim of decentralising the management of ECD programmes to the district level. The cities of Nairobi, Mombasa and Kisumu have CICECEs or MUCECEs. The DICECEs, CICECEs and MUCECEs are responsible for the provision and monitoring of preschool teacher training, inspection of preschools, implementation of parental community awareness and mobilisation programmes, research and coordination with other partners.

2.3.6. **Inter-sectoral coordination mechanism:** The overall management and coordination of ECD programmes at the national level is the responsibility of an intersectoral committee called the Project Management Support Group (PMSG). PMSG is chaired by the Senior Deputy Director of Primary Education of the MOEST and consists of high-level representatives from the MOEST, Teachers Service Commission (TSC), Ministry of Finance, Ministry of Health and Kenyatta University. Its main functions are to formulate policies and to give the Government guidance on ECD-related matters.

2.3.7. **Funding:** The Government, parents, communities and the private sector (e.g., religious organisations, private companies, NGOs and CBOs, individuals) are the main sources of ECD finance and support. The largest source of external assistance in recent years has been the World Bank's ECD loan project of 1996/7-2003/4, targeting disadvantaged children aged 0⁺-8 and their parents.²⁹

2.3.8. **Objectives for early childhood development:** The *Education Sector Strategic Plan and Implementation Matrices 2003-07* (hereafter ESSP), Kenya's key education policy implementation document, states the following objectives for ECD: (1) enhance access and participation in ECD, notably raising the GER to 70% by 2007; (2) improve the quality of ECD services at all levels by 2007; (3) implement ECD alternative complementary approaches (e.g., home-based and employer-provided care, programmes for pastoralist and Islamic communities) by 2005; and (4) enhance ECD management and service delivery. These objectives are aligned with those contained in the country's EFA plan.

²⁸ The provision involves the MOEST (for early stimulation and custodial care), Ministry of Gender, Community and Social Services and Ministry of Home Affairs (for protection issues). No Ministry has been officially designated responsible.

²⁹ The duration of this World Bank project was originally from 1996/7 to 2001/2, but was extended for two years (i.e. until 2003/4).

3. REVIEW RESULTS

3.1. Background

3.1.1. Compared to other countries at similar levels of economic development, Kenya has made considerable achievements in ECD provision. As highlighted earlier, the country's GER in pre-primary education marked a remarkable 40% in 2001, which was higher than the median of sub-Saharan African (5.8%) and developing (35%) countries. Kenya is now adopting an expanded vision of ECD, which concerns a holistic development of the cognitive, social, emotional and physical aspects of young children from birth.

3.1.2. An important concern of the present review was putting forward recommendations which will help the country's achievements. It is in this perspective that the following have been chosen as "critical" for the Government to address: (1) the vision of ECD, (2) FPE policy, (3) declining participation rates, growing inequity, (4) quality of teaching and curriculum, and (5) resources.

3.2. Critical Issue I: The Vision of ECD

3.2.1. **Achievements:** The MOEST and the Bernard van Leer Foundation carried out the experimental Preschool Education Project from 1972 to 1982. The main objective was to improve the quality of early childhood services by developing pedagogical and training guidelines and programmes. The interest in quality generated by the project threw the spotlight on the importance of the education sector in ECD and led to Presidential Circular No. 1 of 1980, which mandated that the MOEST would be responsible for preschool education for 3⁺-5⁺-year-olds.³⁰

3.2.2. After the 1990 Jomtien Declaration of Education for All, which states that learning begins at birth, the MOEST embraced under-3-year-olds within the purview of preschool education through the 1989-93 Development Plan. Through this important step, the entire early childhood age group from birth to 5⁺ years was placed under the auspices of the education sector.

3.2.3. The World Bank project undertaken from 1997 to 2004 provided another important opportunity for the Government to expand its vision on early childhood. Focusing on teacher training and community capacity building for service delivery, the project stressed the importance of meeting children's nutritional and health needs as well as their learning needs.³¹ ECD, emphasising the principle of the child's holistic development, came to replace the concept of preschool education. Concern for the child's care and development entered explicitly into the MOEST's discourse on early childhood.

3.2.4. Another important legacy of the World Bank project was the reinforcement of the linkage between early childhood and formal schooling, resulting in the extension of the ECD age group to 8⁺ years. Since then the conception of ECD as targeting children up to 8⁺ years and concerning their holistic development has become the backbone of the country's early childhood policy and system. In 2004, the MOEST introduced a new organisational structure that detached ECD from primary education, and placed it, on a par with primary education, under the Directorate of Basic Education. ECD is now recognised as an independent sub-sector.

3.2.5. **The gaps:** Yet gaps exist in the **implementation** of this expanded vision of ECD.

3.2.6. First, while service delivery for children over three is ensured by ECD Centres, known by various names (e.g., Nursery School, Kindergarten) and under various types of management (e.g., public, private, community-based, etc.), no equivalent service structure exists for **children under**

³⁰ Previously, the Ministry of Culture and Social Services was responsible for ECD. Reference: Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya.

³¹ Through the health and nutrition component of the World Bank project, Kenya successfully implemented the holistic approach to ECD in 14 pilot districts. By providing health and nutrition activities such as growth monitoring and promotion, immunisation, de-worming, vitamin supplementation, feeding programme, safe water provision at the targeted ECD Centres, the project greatly contributed to reducing absenteeism and dropouts and improving the health status of children attending the Centres as well as those residing in the neighbouring communities.

three.³² Mothers with young children visit health services for growth monitoring and immunisation, which is more or less the only care they provide for their young children. However, information on stimulating the child's psychosocial development is largely absent at these health centres, which are very weakly coordinated with the education sector. The care and education of young children under three in Kenya is largely in the hands of older siblings, grandparents, and house help, if they are available.

3.2.7. The major policy initiatives of the MOEST focus mainly on children over three. The access plan of the ESSP on early childhood, for instance, centres on ECD Centres attended by children over three. The second objective of the ESSP is to develop a multi-sectoral approach to ECD, which may lead to the identification of services catering for young children. But the missing policy link for children under three has not been explicitly addressed. The Education Act being drafted within the MOEST singles out 3⁺-5⁺-year-olds as its target group. The Draft Sessional Paper No. 1 of 2005 states that the focus of the MOEST will be on 4⁺- and 5⁺-year-olds, and implies that the provision for children under three will be done in partnership with other stakeholders.

3.2.8. The second gap has to do with the implementation of ECD principles among children over three. Many ECD Centres place so much emphasis on literacy and numeracy skills that they are essentially "early primary education" centres, rather than ECD Centres. Many ECD classrooms including those for 3⁺-year-olds have the children arrayed in rows of chairs and desks, facing the teacher standing at a blackboard. Child-centred pedagogical methods exist, but mostly in a handful of private services in urban areas.

3.2.9. Parents' understanding of ECD is also largely focused on children's early acquisition of learning skills. This is particularly the case among illiterate poor parents: for example, mothers interviewed in Machakos District were vehemently opposed to sending their children to an ECD Centre if it did not teach them how to read and write. Such parental pressure can turn ECD Centres into de facto "early primary education" facilities. In many poor areas, ECD Centres are simply preparatory classes for Standard One³³ aimed at 7⁺-8⁺-year-old out-of-school children.

3.2.10. This is not to say that the MOEST has made no attempts to advocate the holistic approach or to address the care and education needs of younger children. On the contrary, in the ECD teacher training materials³⁴ developed by the KIE, the Government stresses that ECD teachers and their trainers should acquire full knowledge of the multidimensional aspects of child development. The parenting education materials developed by the KIE contain very useful information not only for mothers with 7⁺-8⁺-year-olds, but also for expecting mothers and mothers with children under three. The ECD guidelines developed by the KIE cover the entire age group from 0⁺-8.

3.2.11. Despite efforts on the ground, when it comes to policy development and pedagogical practice, ECD is widely interpreted and understood as a stage for preparing children for formal schooling. Recognising these gaps between vision and reality, and reaffirming the Government's position advocating a holistic and comprehensive view of ECD, would be both timely and indispensable to preventing a reversal of 20 years of progress and investment in Kenya's ECD development.

3.2.12. **Tasks ahead:** As for the care and education of young children under three, **parenting education** could be a cost-effective strategy. In fact, various parenting education activities are already being delivered by various stakeholders outside the education sector. To gain new momentum, the MOEST could begin by making a clear policy statement about this strategy for younger children. The statement must identify the service venues through which parenting education can be delivered. This may require the MOEST, first, to develop partnership with various stakeholders, especially those at the community level; and then, to map, recognise and support a few major delivery points with a view to developing a system for under-three provision. These delivery points may include ECD Centres, literacy classes, DICECE's ECD training courses and clinics in communities where parents can have frequent and easy access.

³² Except the ECD Centres piloted by the World Bank project that cater for younger children. In some ECD Centres younger children are found accompanying their older siblings who attend the centres.

³³ Standard One refers to the first grade in primary school in Kenya.

³⁴ Early Childhood Development Teachers In-service Education Syllabus (2000); Guidelines for Training of Early Childhood Development Trainers in Kenya (2001). Nairobi: KIE.

3.2.13. Another useful strategy to cater for the care and education needs of younger children, without creating a new service structure, would be to enable ECD Centres and other similar existing services to provide more comprehensive services by reinforcing their health and other care components. For example, a non-formal programme for children ages 0⁺-6⁺, implemented by UNICEF, the Ministry of Health and MOEST in three districts, should be considered for replication. Utilising family homes as service venue, the programme is a low-cost initiative that provides good health, nutrition, learning and custodial care for young children in an integrated manner through trained community health workers and caregivers.

3.2.14. As for improving pedagogy at ECD Centres, the first priority is teacher training. Teachers should learn more about making the ECD classroom environment more child-centred and child-friendly. UNICEF's current initiative in this direction should be considered for expansion. Also, desks and chairs should be detached so that the seating arrangement can be varied to allow more interaction among children and between the children and the teacher. ECD teachers should also understand that their job is not to teach specific learning skills, but to stimulate and expand the child's learning potential. The best way to do this is to allow the children to explore the environment themselves and to provide them with concrete objects they can manipulate. Instead of using abstract number cards, for instance, the teacher can use concrete objects such as pebbles.

3.2.15. Most important, to enable ECD teachers to practise what they have learned in training, a strategy must be found to mitigate parental pressure on teachers to "train" children in literacy and numeracy skills. Advocacy is essential to inform parents about the positive impacts of an ECD pedagogy, especially its effectiveness in preparing children for formal schooling. It can be conducted effectively through, for example, mass media and *barazas* (community meetings). Such a campaign will require the use of hard research results or concrete evidence demonstrating the value of the ECD pedagogy for both child development and preparation for formal schooling. Without using concrete evidence, it will be difficult to convince the parents as well as teachers that play is the best medium in which young children develop, learn and prepare for their future.

3.3. Critical Issue II: Free Primary Education Policy

3.3.1. **The impact:** After the Government introduced FPE in 2003, school fees no longer blocked poor children's access to primary education. Within a year, primary school enrolment increased by 17%. Primary education is to be universalised by 2005.

3.3.2. Some information exists on the impact of FPE on ECD; but the information is far from conclusive. According to a study carried out by the KIE in 2003,³⁵ with responses from 52 districts, the policy's impact on ECD enrolments is by no means all negative: about equal numbers of districts reported declines and increases.

3.3.3. Meanwhile, an assessment study of FPE carried out jointly by the MOEST and UNESCO³⁶ in February 2004 found that ECD programmes had almost "collapsed" because children's enrolments had decreased after the introduction of FPE. The study found that parents opted to send their children straight to Standard One, which became free, without having them go through ECD, which was still fee-paying. Moreover, Standard One teachers reported that children who skipped ECD had difficulty coping with lessons in primary school and performed poorly.

3.3.4. Indeed, the Review Team found widespread anecdotal evidence of **drops in enrolment**³⁷ at ECD Centres, especially in poor provinces such as North Eastern. Since the introduction of the FPE policy in the North Eastern Province, which is one of Kenya's poorest, many parents have bypassed ECD altogether; many others send their children only to the Pre-Unit Class of ECD to prepare them for

³⁵ The analysis, however, only covers January through July 2003, i.e. the first seven months of FPE implementation. Reference: The Effect of Free Primary Education on the Early Childhood Development (ECD) Programme in Kenya. (2003). Nairobi: KIE.

³⁶ Two reports have been published by UNESCO Nairobi on the study. One is a synthesis report entitled *Challenges of Implementing Free Primary Education in Kenya: Assessment Report* (2005). The other describes the situation of the districts studied and is called *Challenges of Implementing Free Primary Education in Kenya: Experiences from the Districts*. (2005). The reports can be obtained from Ms. Susan Nkinyangi of UNESCO Nairobi at susan.nkinyangi@unesco.unon.org

³⁷ Enrolment statistics, however, show a decline that started even before 2003. There seems also to be a regional variation: the decline has been more dramatic in disadvantaged regions.

primary school. In some areas, parents are keeping their children at home until they reach the age of 6⁺, entitling them to free education. This tendency is particularly pronounced among **poor families** who cannot afford ECD Centres.

3.3.5. The problem is compounded by the “refusal” of some parents to pay for ECD on the grounds that it, too, should be free. ECD managers and local authorities are now faced with parents who “resist” contributing to ECD Centres. Since teachers’ salaries in most ECD Centres³⁸ depend entirely on parental contributions, the lack of funding leads to the loss of teachers and eventually the closure of ECD services. ECD, some say, is on the verge of collapse.

3.3.6. Other indirect impacts resulted as well. Increased enrolments in primary schools have led to a demand for more classrooms, and ECD Centres set up at primary schools have helped fill the gap by relinquishing their classrooms. While primary school classrooms are being renovated with the fresh FPE funding, ECD classrooms are left to deteriorate. With ECD teachers leaving their jobs, primary school teachers with no experience in handling young children have resorted to creating a little corner in their classrooms and running multi-grade classes for ECD and lower primary school children.

3.3.7. Despite these observations, the impact of FPE on ECD is still subject to dispute. For example, it is unclear whether FPE has been the main cause of falling ECD enrolments, given the evidence that the decline may have begun well before the introduction of the policy.³⁹ Also, it is yet to be determined how many of the unprepared pupils newly flowing into Standard One would have gone to ECD Centres if FPE had not been in place. The influx could simply be explained by a rising enrolment of at-risk children who would not have been able to afford primary education when it was fee-paying, let alone ECD Centres.

3.3.8. Also, further investigation will be necessary to determine whether parents are continuing to resist payment of ECD fees in poor areas; whether parents, relieved of the burden of paying for primary education, are willing to pay for ECD; and whether there are any differences in attitudes and behaviours among parents of different socio-economic backgrounds regarding the payment of ECD fees.

3.3.9. **Proposed measures:** A proposal for tackling these challenges involves offering **one year of free ECD services for 5⁺-year-olds**, thereby extending the country’s education system from 8-4-4 to 1-8-4-4. Setting aside questions of financial feasibility, this proposal carries the risk that ECD will be reduced to pre-primary education, driving children under 5⁺ years out of ECD Centres.

3.3.10. Free participation for 5⁺-year-olds in ECD will spur a large influx of 5⁺-year-olds into ECD Centres, in addition to the 3⁺-4⁺-year-olds who are accepted. But if ECD classes become overcrowded, priority is likely to be given to 5⁺-year-olds. If 3⁺-4⁺-year-olds want to stay, more funds may be needed to secure additional teachers, in which case parents, who will be the main source of this additional funding, may opt to wait until their children reach age 5⁺. In either case, ECD Centres will be emptied of 3⁺-4⁺-year-olds while preserving Pre-Unit Classes (i.e. children of 5⁺ years) only. Thus primary schooling would benefit at the expense of ECD.

3.3.11. One strategy for preventing such a problem would be to keep **unprepared Standard One pupils** within the framework of primary education while reserving ECD for the child’s holistic development. This is feasible, as some primary school teachers are currently trained in the ECD component and government policy is favourable towards them. ECD-trained primary school teachers could run crash pre-primary courses for Standard One pupils in primary schools while the cost of their training could be absorbed by FPE funding.

3.3.12. At the same time, government policy should insist that **ECD Centres ensure the child’s holistic development**. Indeed, this is how ECD best serves primary education, a point that should be made very clear to policymakers who believe instead that “early schooling” is the best preparation for formal schooling. Specific skills such as reading, writing and counting are more readily learned at school at an age when children are developmentally receptive to taking on such abstract tasks. Success in this learning process is more assured when children have developed fully and holistically in the

³⁸ In some municipalities, the municipal councils recruit and distribute ECD teachers to selected Centres, covering their salaries.

³⁹ See Page 17 for trends in enrolment.

emotional, physical and social as well as cognitive domains. Using ECD for the child's holistic development is neither a luxury nor an option. It is the only way to properly prepare young minds for the future.

3.3.13. Meanwhile, there is a clear and urgent need to strengthen ECD to make it a permanent part of government investment policy and keep it firmly on the agenda. To develop a solid policy framework for ECD, the following issues need clarification, among others.

- Name of the discipline – ECD or Early Childhood Development and Education (ECDE).⁴⁰
- Age group concerned – 0⁺-8 or 0⁺-5⁺.
- Purpose of ECD – how to reconcile the child's holistic development with his/her preparation for formal schooling.
- Service structure for 3⁺-5⁺-year-olds – labels and pedagogical goals.
- Service structure for children under 3⁺ years – labels and pedagogical goals.
- Government auspices – especially the MOEST's mandate for ECD.
- ECD workforce – workers' titles, required training and qualification levels, remuneration scheme.
- Pedagogical guidelines – objectives to be achieved by age group and authority responsible for supervision and inspection.
- Policy strategy and options – age groups and service structures to be prioritised for government investment and to be supported in partnership with the private sector.
- Policy focus – how to prioritise and/or reconcile different policy objectives such as increasing access, improving quality and ensuring equity.

3.3.14. More important, the processes through which the Government's position on ECD is developed must involve the necessary key stakeholders. The Review Team learned that concerned actors including the KIE, the ECD Unit of the Directorate of Basic Education and the ECD Unit of the Directorate of Quality Standards and Assurance, let alone other actors from the non-public sector and other government sectors, were not involved in the main policy initiatives related to ECD that are currently underway within the MOEST – namely, the revision of the 1983 Education and Training Act and drafting of the Draft Sessional Paper No. 1 of 2005. It appears that while these actors are consulted on issues related to ECD programmes and practices, they are not necessarily considered key partners to decision-making on critical policy and investment matters with implications for ECD.

3.4. Critical Issue III: Declining Participation Rates, Growing Inequality

3.4.1. **Trends in enrolment:** A 1969 survey counted about 200,000 children enrolled in 4,800 ECD Centres with about 5,000 teachers. The number of ECD Centres and teachers have been growing steadily and, after a stalled increase of only 15% between 1993 and 2000, the enrolment ratio leaped by 50% over the next three years. The current (2001/02) GER in preschool⁴¹ is officially 35%, although the Government's own statistics appear to show a GER of 48% in 1998, falling to 41% in 2002.

3.4.2. The Background Report of Kenya shows that, while enrolment increased substantially from 1,076,606 to 1,281,846 between 1998 and 2002,⁴² there was only a *slight* decline in GERs between 1998 and 2002. A closer look at the figures, however, suggests two rather disturbing trends. First, GERs in preschool have clearly declined since 1998 from 48% to 41%, and the major overall decline took place between 1998 and 1999 before the FPE option arose.⁴³ In fact, a small increase occurred from 2002 to 2003, after FPE was introduced in January 2003. Second, while the 1998 GER was about the same for boys and girls, a gap of 4% in favour of boys opened up in 2001 and grew to 6% in 2002.

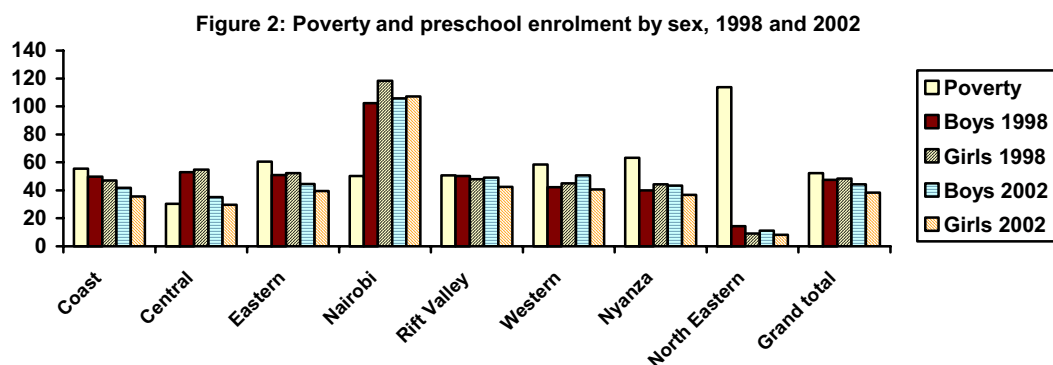
⁴⁰ As referred to in the Draft Sessional Paper No. 1 of 2005.

⁴¹ GER is calculated by dividing the number of children of whatever age enrolled in preschool by the estimated number of 3⁺-5⁺-year-olds.

⁴² However, according to the Quantitative Study of the Kenya Early Childhood Development Project: Final Report to the MOEST (Ngwere et al., 2004), which draws on the MOEST statistics, the 2002 figure is 1,416,048.

⁴³ This may be a statistical artefact that has arisen because systematic recording of data tends to be associated with better-off areas and the processes of recording and reporting will have slowly improved in the less well-provided areas.

3.4.3. **Inequities:** There are obvious geographical inequities. In Nairobi, for instance, far more children are likely to be enrolled in ECD than in other provinces with similar poverty levels (e.g., Rift Valley). Meanwhile, North Eastern Province has the highest poverty level and the lowest enrolment rates (Figure 2). There are also gender disparities. In Nairobi, girls are more likely to be enrolled, whereas in North Eastern Province the reverse is observed.



Reference: Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya.

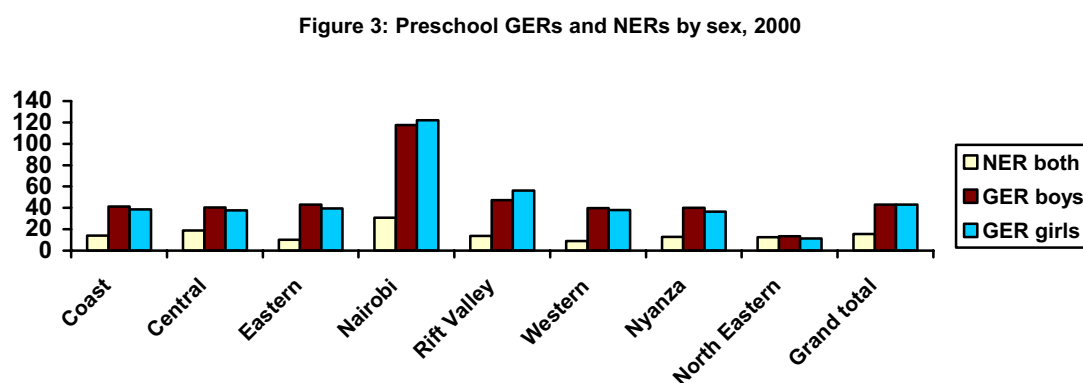
3.4.4. Even within Nairobi, **middle and upper class children** benefit most from preschool experiences. Overall, those lacking access to preschool services tend to be children from disadvantaged communities such as semi-arid and arid areas and urban slums. This observation is reinforced by the findings of the Multiple Indicator Cluster Survey (MICS) (UNICEF/Government of Kenya, 2000) showing that 29.5% of children whose mothers had secondary education were enrolled in some form of ECD, compared with 10.7% of those whose mothers had only completed primary school and 12.4% of those whose mothers had no schooling. There is also a clear association between GERs in 1998 and 2002 and the absolute poverty index (1997) at the district level, with eight of the ten correlations being negative and statistically significant (Table 2), though not very large.

Table 2: Correlations between poverty index (1997) and GERs at district level

| | 1998 | 1999 | 2000 | 2001 | 2002 |
|--------------|---------|---------|---------|--------|---------|
| Boys | -0.355* | -0.252* | +0.145 | -0.096 | -0.271* |
| Girls | +0.007 | -0.287* | -0.272* | -0.048 | -0.290* |

Reference: Kenya Human Development Report. (2001). UNDP / Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya. *Statistically significant at $p < 0.05$.

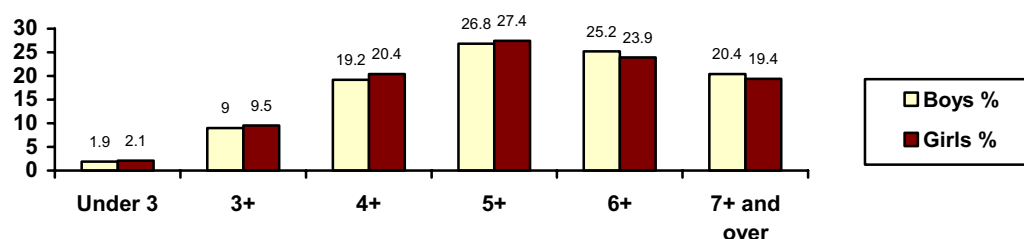
3.4.5. **Predominance of under- and over-age children:** Comparing the NERs from the MICS with the GERs for the same year reveals large differences (Figure 3). In all provinces, NERs were less than half, and in Eastern and Western Provinces less than a quarter, of the GERs. This means that there is a large number of under-age and over-age children enrolled in ECD Centres.



Reference: Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya. / Multiple Indicator Cluster Survey. (2000). UNICEF/GOK.

3.4.6. Analysis of the 2003 enrolment data of the MOEST by age shows that nearly one-fourth of children in ECD Centres are age 6⁺ and about one-fifth are 7⁺ years old. The presence of these “old” school-age children is certainly one of the main reasons why parents put considerable pressure on teachers to prepare their children for Standard One.

Figure 4: Percentage distribution of boys' and girls' preschool GERs by age, 2003



Reference: MOEST.

3.4.7. **Implications:** Overall enrolment has obviously increased since 1993, but it has been accompanied by a worrying decline in GERs in recent years, **before the introduction of FPE**. If this earlier decline in participation rates is confirmed, other factors must have affected enrolment, such as declining real per capita income, over this period. Such factors must be examined in detail for the development of a more valid access plan.

3.4.8. Given the obvious geographical, gender and socio-economic inequalities in access to ECD, the Government’s ECD policy should take these worrying realities into account, notably by prioritising equity as a policy objective and concentrating the Government’s limited resources on improving disadvantaged children’s access to basic ECD services.

3.5. Critical Issue IV: Quality of Teaching and Curriculum

3.5.1. **Working conditions of ECD teachers:** In Kenya, ECD is not part of the 8-4-4 education system. This isolates ECD teachers from their primary counterparts in terms of pay and status, making the former feel inferior to the latter.

3.5.2. In community-owned ECD Centres and those attached to public primary schools, the ECD Committee⁴⁴ decides monthly how much each parent should pay, taking into account the parents’ income levels. ECD teachers’ salaries – averaging around KSh 2,000 per month, though with large variations between rural and urban areas – have not changed much over the last 10 years, and whether or not they are paid depends largely on parental contributions. Thus salaries are not stable and fluctuate each month depending on the level of contribution from parents. In some cases, teachers stay on after official working hours and are paid to look after some children whose parents need custodial care for them. Other teachers are paid to go to the homes of children to provide custodial care. The ECD Committee can hire and fire teachers “at will.”

3.5.3. Although FPE has caused a decline in the number of children per ECD class, as parents opt not to enrol their children, or pull them out of ECD, the teacher/child ratio in ECD Centres is still very high (sometimes more than 30 children per class). While teachers know that it is preferable for

⁴⁴ ECD Committees (also called Preschool Committee) are responsible for the management and coordination of activities for the ECD Centres, including recruitment of the teachers, collection of fees, payment of teachers’ salaries, purchasing furniture and other materials, and maintenance of facilities. They typically consist of 9 members including a chairperson, a treasurer, members of the sponsoring organisation and the District Education Board, and a secretary, who is the preschool head-teacher. Some ECD Centres have their own committees; some others are managed by the committee of the primary school to which the Centres are attached. There are also ECD Centres not managed by any committees. See Chapter 6 on Government Coordination in the Background Report of Kenya (2005).

pedagogical reasons to have fewer children per classroom, they earn more with each additional child. In some cases, attrition of ECD teachers (because of non-payment) has forced schools to combine ECD with primary Standard One classes whose teachers are not trained in multi-grade teaching for ECD children and who lack appropriate materials.

3.5.4. **Qualification and training of ECD teachers:** The World Bank project included an extensive in-service training programme, with a regular two-year course and a new five-week short course.⁴⁵ During the period of the project (1996/97–2001/02), the ratio of pupil to trained teacher declined from 89 to 41, contributing greatly to the quality of ECD Centres. Indeed, the number of trained teachers surpassed the number of untrained teachers for the first time.

3.5.5. Although the trainees do receive a certificate at the completion, the short course is designed only to lay the basis for the two-year in-service training. The fee for the short course is KSh 5,000, while the two-year course costs KSh 22,000. This amount is thought to be affordable for most people, but it does not include materials, transport or living expenses. ECD teachers think the short course is insufficient to equip them with the necessary knowledge and skills. Also, there is some agreement on the inadequacy of the short course among the NACECE staff.⁴⁶

3.5.6. DICECE officers organise meetings, seminars and workshops for ECD teachers as part of ongoing professional development and support. These events are irregular – it appears that it is up to the DICECEs to determine how often they will offer such opportunities. In some areas no training appears to be available after the initial course, partly because the DICECE centres lack accommodation and boarding facilities and a clear management structure.

3.5.7. DICECE officers offer management training to ECD Committees. But since ECD Committee members tend to change every year, training should be provided every year to maintain continuity.

3.5.8. Topics covered by seminars and workshops are determined by DICECEs on the basis of their observation of needs. In principle, teachers of both registered and unregistered ECD Centres, regardless of ownership, are invited. However, ECD teachers from private institutions are normally not given leaves by their employers to attend the meetings and seminars organised by DICECEs.

3.5.9. **Curriculum:** *The Guidelines for ECD in Kenya*⁴⁷ is the national ECD curriculum developed by the KIE and used most widely in the country. The curriculum contains sufficient information for correct pedagogy – that is, child-centred interaction and emphasis on holistic development.⁴⁸ However, ECD teachers and Centres must buy the materials at the end of their training. In many Pre-Unit Classes, ECD teachers are using Standard One textbooks and materials brought to the Centre by the children. The situation seems a little better at private ECD Centres, which buy the relevant pedagogical materials and distribute them to the teachers.

3.5.10. Yet, even when appropriate pedagogical materials are available, most ECD Centres in fact provide “early primary education” to prepare children for formal schooling; this is a more serious problem. What contributes to this pedagogical deviation is pressure from parents who see ECD as a chance to help their children obtain good marks in primary school. Teachers have difficulty resisting this pressure because ECD remains fee-paying, as opposed to FPE, and parents feel they should have a say in the education their children receive.

3.5.11. In addition, although the ECD curriculum focuses on interactive methodologies, many teachers find it easier to revert to teaching the alphabets and numbers, especially where few materials are available for creative expression or for fine motor skills development. Even if appropriate teaching/learning materials are available, they tend to remain in their boxes. ECD teachers reportedly administer pens and paper to children so as to show their parents that they are focusing on reading and writing.

⁴⁵ The five-week course was introduced through the World Bank project, and is currently provided as a bridging course for new ECD teachers who do not meet the educational requirement (i.e. Kenya Certificate of Secondary Examination with D+ requirement) of joining the regular two-year course.

⁴⁶ Personal communication with a NACECE consultant.

⁴⁷ Popularly called the “ECD Guidelines” in Kenya.

⁴⁸ In addition, *Islamic Integrated Education Programme* (IIEP) is an ECD curriculum developed by the KIE, and is applied by trained Koranic teachers in certain Islamic teaching establishments (e.g. Madrassa).

3.5.12. DICECE trainers and teachers are supposed to adapt the *Guidelines for ECD in Kenya* to local situations,⁴⁹ but the Review Team found little evidence of this. In some areas, ECD teachers and DICECE officers may not have received the necessary training. Another factor may be pressure from parents to use nationally defined and standardised materials, which they see as ensuring their children's future success in school, while adapting the curriculum might hinder their children's progress.

3.5.13. Officially, the mother tongue (or the predominant language of the catchment area) is supposed to be used not only in ECD but also in Standards One, Two and Three of primary school. In fact, several ECD Centres visited were conducted in English and Kiswahili and most written work was in English. Curricula exist in 26 of Kenya's 42 languages, but even if materials can be made available in all 42 languages, parents tend to want their children to learn English.

3.5.14. **Implications:** The problems of the workforce are at the heart of the ECD policy debate in Kenya. Job insecurity is threatening the sustainability of ECD Centres and the entire ECD system. Concrete and viable measures must, first and foremost, be taken to guarantee minimum job security. Although improved training is desirable, there is no point in investing in further training if trained teachers cannot find stable jobs.⁵⁰ In this regard, the Government's intention to develop a public service scheme⁵¹ for ECD teachers and to liaise with partners in education to improve their salaries and terms of service, as stated in the Draft Sessional Paper No. 1 of 2005, is welcoming.

3.5.15. Meanwhile, current government efforts to provide in-service ECD training to primary school teachers should be further reinforced to help them address issues related to unprepared early grade pupils and to strengthen the pedagogical linkage and cooperation between ECD Centres and primary schools. For those already in service, appropriate refresher courses should be designed to train, sensitise and disabuse these teachers of prejudice and discrimination against their ECD colleagues.

3.5.16. Many initiatives have already proven effective in improving pedagogy; efforts should be directed towards replicating these instead of investing resources in the development of new ideas. For example, UNICEF's Child Friendly Environment Initiative, which is making good progress in improving the quality of ECD Centres – as witnessed in some of the Muslim ECD Centres – could be introduced in both ECD Centres and Standard One classes in relation to the arrangement of the classroom (e.g., floor, blackboard, sitting space and napping facilities).

3.6. Critical Issue V: Resources

3.6.1. **The status:** The current funding channels of ECD Centres are diverse – including government, municipality and parental contributions. County Councils used to receive revenue from the agricultural sector (e.g., coffee, tea, cashew nuts), but while a few Councils are continuing to support the ECD programme, most have cut off funding since 1994. Indeed, most are employing the teachers they have withdrawn from the programme as revenue collectors from markets. Collecting money from markets brings in revenue to the Councils, while teaching in preschools does not.

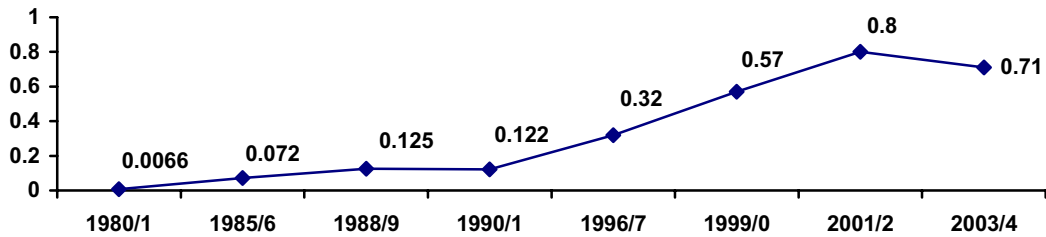
3.6.2. At the government level, ECD received only a small proportion of overall funding from the MOEST during the 1980s (less than 0.1% until 1987/88), even though the Ministry had taken over responsibility for the ECD Centres (See Figure 5 below). However, government spending on ECD began to increase in the 1990s, and during the period of the World Bank project (1996/7-2003/4) it was between 0.35% and 0.80% of the overall education budget. It now stands at **0.7%**.

⁴⁹ Background Report of Kenya for the UNESCO/OECD Early Childhood Policy Review Project. (2005). MOEST, Government of Kenya.

⁵⁰ Some options are discussed in the next section in relation to resource issues.

⁵¹ A scheme that sets out the required educational qualification for ECD teachers, scales of salaries, promotion, benefits, etc.

Figure 5: MOEST expenditure on ECD as a percentage of total MOEST expenditure, 1980 - 1991 / 1996 - 2004



Reference: Ministerial Public Expenditure Review 2000/01-2003/4 and Medium Term Expenditure Framework 2004/05-2006/07. MOEST.

3.6.3. The average household expenditure per preschool child is estimated at KSh 1,000 (US\$18) per year,⁵² while the average in the Project Appraisal Document for the World Bank project (1995)⁵³ was estimated at US\$10 per (preschool) child per year. At the time, the Government was spending KSh 50 million, or less than a dollar per preschool child per year, amounting to only 0.25% of their total education expenditure, so the unit cost was between US\$11 and US\$19. In 2004, based on average teacher wages and average class size, average household expenditure per preschool child was still KSh 1,000 (possibly less), but **government expenditure** had increased substantially to nearly KSh 600 million (0.71% of their overall expenditure on education), making a total of KSh 1,370 or **US\$18 per preschool child per year**. Even with just one child in preschool, a four-person household spends about 1% of its annual income on ECD.

3.6.4. **Investment rationale and strategies:** With the introduction of FPE, government funding for ECD within the MOEST, which had grown to 0.80% of the total government expenditure by 2001/2, was more than halved in 2002/3 although it recovered in 2003/4. ECD is also losing the facilities to make room for primary school classes; and ECD teachers, unpaid, are leaving their jobs. Thus, the impact is felt not only in monetary terms but also in terms of losses in physical and human resources. Worse still, parents do not understand why primary education should be free and not ECD; they have therefore begun resisting paying ECD fees, choking off a vital source of funding.

3.6.5. However, as agreed in the 1996 Memorandum of Understanding on the World Bank project⁵⁴ the Government must keep spending for ECD at least 1% of overall education spending. This is imperative, if for no other reason than to justify the huge investment in ECD that was already made through the project. For example, a large number of ECD teachers were trained as part of the project. If the ECD workforce continues to shrink – whether as a result of FPE or other factors – there is a danger that the investment in their training will yield a minimal long-term return, as trained teachers seek employment opportunities.

3.6.6. Below are a few issues for the Government to consider in supporting the ECD workforce.

3.6.7. **Subsidising ECD teachers' salaries** is a tempting option, but it raises a feasibility issue if it is to be done according to the government remuneration scale for teachers as determined by the Teachers Service Commission (TSC).⁵⁵

3.6.8. Currently the fees charged to parents are used almost entirely – with the exception of the wealthier private providers – to cover payroll costs. These fees average around KSh 200 to 300 a month at public ECD Centres. Assuming that 17,000 teachers are required for the Pre-Unit Class (with an enrolment of 400,000 children for an average of 24 children per class), the total would come to around KSh 470 million (if teachers were paid for 12 months) at the current average wage rate of Ksh 2,300

⁵² It is important not to interpret these as average or marginal unit costs. The costs vary widely between types of ECD Centre/service and between districts. Where unit costs increase for one type of service relative to another, parents will switch services when they can; and, other factors being equal, this will further increase the unit costs for the more expensive service.

⁵³ Staff Appraisal Report, Republic of Kenya: Early Childhood Development Project Pre-Appraisal Document, Report Number 15426-KE. (2004). World Bank.

⁵⁴ Ibid.

⁵⁵ The Government remuneration scheme for teachers.

per month. If the teachers are incorporated into the TSC at the current salary level of around KSh 10,000 per month, the amount would be KSh 2.1 billion, or around 2.5% of the current education budget; relative to the current ECD budget this would be enormous. As it seems highly unlikely that the Government would be able to afford this, other avenues need to be explored.

3.6.9. Another option is for all trained teachers to be paid a minimum salary and incorporated into the ECD teaching force on a different grade from the current TSC scale; parent contributions would make up the difference. The minimum payment may not be commensurate with the TSC scale, but this option would place ECD teachers within the framework of a government teaching force; and the **job security** that the scheme would offer could be as important an incentive as the pay itself to ECD teachers who currently risk receiving no pay and having no job security.

3.6.10. Job security could be achieved through annually renewable contracts guaranteeing a minimum salary for trained ECD teachers. If all 38,000 teachers trained through the World Bank project were to receive a subsidy of KSh 1,500 per month, the total would come to KSh 570 million (US\$7 million) a year, or less than a third of the KSh 1.9 billion that would be needed if the TSC scale were applied, but still a large amount for the Government to afford. However, since a minimum level of government support is essential to obtaining community support, the option deserves serious consideration. The Government could implement the policy gradually, beginning with the poor areas.

3.6.11. The Government should explore the possibility of entering into further partnerships, and of raising more funds, for example, by increasing corporate taxes by 0.5%.

3.7. Other Issues

3.7.1. Data development

3.7.1.1. **Data gaps:** Formal services are monitored by an established data collection system, while information and data on **non-formal and informal services** are severely lacking. Also, information on educational services is available, despite reliability problems, but information on the **care and development** aspects of ECD (e.g., HIV/AIDS orphans) is not so readily available or integrated with that on the education component.

3.7.1.2. The ECD teacher or primary school head-teacher keeps track of the fees paid by parents; but the MOEST or district officials do not systematically collect **financial data**. A better picture of the “total” or “real” cost of delivery of ECD services in Kenya needs to be developed, especially given the extent of private contributions, in order to assess the level of household contributions and the ability of families to pay, and thence to develop appropriate policies.

3.7.1.3. Data on **inequity** is also severely lacking. Precise information is needed on service provision in terms of private versus public, subsidised or non-subsidised, for-profit or non-profit, and across rural and urban areas, to determine who is benefiting from public investments. Enrolment data broken down according to parents’ education, income and employment status would reveal who is attending ECD. The distribution of qualified teachers by region and urban/rural areas could be a useful indicator of regional disparities in quality.

3.7.1.4. Data on the **impact** of ECD services on graduates’ primary school readiness, performance, completion, repetition and dropout rates would help support advocacy for ECD. Primary school teachers report differences in behavioural and academic performance between ECD and non-ECD pupils, but ECD outcomes are not systematically or scientifically measured. Some studies have reportedly been carried out on ECD outcomes, but these are unavailable and are not used for advocacy purposes.

3.7.1.5. **Actions needed:** It is expensive and time-consuming to increase data collection and develop new indicators. The Government must first take stock of available sources of information and data and weigh them against specific policy needs before launching data development efforts. Following are some ideas for improving the Government’s ECD data system.

3.7.1.6. As noted in the Background Report of Kenya, the concept of ECD must first and foremost be clarified, along with the different types of ECD services. Without such **conceptual preparation**, the interpretation and presentation of data will be extremely difficult and confusing. Likewise, given the variety of sectors involved in the delivery of ECD services and the complexity of information needs, roles and responsibilities should be specified, and the MOEST's coordinating role should be reinforced.

3.7.1.7. For the monitoring and evaluation of the holistic ECD policy for ages 0⁺-5⁺, an **Indicator Framework** could be developed, including the following data:

- Inputs (intake rate, % children enrolled in ECD, immunisation rates, teacher qualifications);
- Efficiency (survival rate, repetition rate);
- Financing (cost per child, % of budget, % spent on health of child, parental costs); and
- Outcomes (quality, impact on Primary, impact on development and learning, health).

3.7.1.8. As for the collection of data and information on non-formal and informal services, a complementary but separate system from the formal system may be needed. The effort can start by collecting data from unregistered ECD Centres. These must first be located and the factors impeding them from reporting the data must be determined and eliminated.

3.7.1.9. Although data records are well maintained at ECD Centres, they are paper-based and subject to deterioration over time. Consideration needs to be given to maintaining "primary data" in electronic form if this is not already the case. Also, given that ECD data, like other education data, are collected and edited at several levels of administration, mechanisms are needed across districts to verify data and minimise editing errors to ensure quality and accuracy.

3.7.1.10. Finally, although the World Bank carried out a cost-benefit analysis before making its investment, the Government could usefully conduct a cost-benefit analysis in order to evaluate the return on investment in each service. It could also undertake a study of the impact of participation in early childhood on later school performance. Finally, but most important, the Government could collect figures on the comparative advantages of a holistic and integrated service to the child's overall development, which can strongly bolster arguments for pedagogically appropriate services.

3.7.1.11. Conducting studies is one thing, and using research findings is another. Neither activity is prevalent in Kenya. A stronger link is needed between the research community and policymakers; they need a mechanism for meeting and communicating with each other. If the research community were to receive government statistics systematically, it would respond by developing and carrying out policy-related studies.

4. RECOMMENDATIONS

4.1. **Fulfilling the vision:** The integrated provision of early childhood care and education is a policy objective pursued by many countries, both developing and developed. But it is difficult to implement. The challenge is particularly acute in the education sector, whose mandate usually does not include young children, especially not their care and development needs. In the education sector, the natural tendency is to frame ECD in terms of "early schooling".

4.2. Nevertheless, in Kenya, the MOEST has made exceptional progress. It embraced a broad concept of ECD and expanded its mandate to cover the care and education of 0⁺-8-year-olds. Yet gaps exist, as described in the preceding chapters. At the policy level, the provision of early childhood care and education for children under three receives little mention. Pedagogically, ECD Centres are providing more "early schooling" than integrated assistance to children's holistic development.

4.3. Discourse on the child's holistic development was given renewed attention in Kenya through the World Bank project. Though the project was implemented in agreement and partnership with the Government, the ECD vision was certainly a challenging concept for the Government to implement, which had long understood ECD in terms of preschool education. The tradition seems to continue to influence the implementation of the concept, leading to a gap between principle and practice. It will take time for the holistic ECD concept to take root in Kenyan soil.

4.4. The principles associated with the ECD discourse are more or less universally accepted; few can argue against them. But countries reserve the right to develop implementation strategies in accordance with their own conditions. If ECD cannot be provided to all children, the Government should determine a priority target group. If the care, development and educational needs of young children cannot be all met, again prioritisation is necessary and justified. If one sector cannot meet all the needs, partnerships should be forged; and each sector should prioritise and work in phases to translate principles into feasible actions. This requires the development of a **solid ECD policy framework** with phased plans and priorities. Following are some priority tasks and issues for the Government to consider in developing its ECD policy.

4.5. **Conceptual clarifications:** One priority task is to clarify the **label** used to refer to ECD services. Although ECD has gained currency in the Government discourse on early childhood, other labels such as preschool education, early childhood education, or early childhood development and education (ECDE) remain in use, creating confusion not only in communication but also in policy. If ECD is selected as the label corresponding to the Government's perspective, this should be announced as a policy matter, and more important, proactive steps should be taken to ban the use of other labels to prevent further confusion or debate. Whatever label chosen should reflect the basic principles of the child's holistic development.

4.6. A similar conceptual "clean-up" is needed for service categorisation. Currently, seven different services come under the broad concept of ECD Centre (i.e., Nursery School, Pre-Unit Class, Kindergarten, Day Nursery, Playgroup, Madrassa and Home-Based Care Centre), with no clear grounds for differentiating them. For example, Nursery Schools, Kindergartens, Day Nurseries and Playgroups are all concerned with the care and education of children between 2⁺ and 5⁺ years old, but they are called by different names. They could be streamlined to belong to one single category "Preschools", for example.

4.7. Rationalising service categories will facilitate the development of access plans and the identification of services and age groups that need priority support. Simpler service categorisation is also needed for the development of sound training, inspection, monitoring and evaluation systems, which all dovetail with service categories. The development of pedagogical materials also requires a clear set of service categories. In fact, no efforts to develop the ECD system should be launched without an established **provision structure**.

4.8. The provision structure must reserve a place for parenting education so that it does not end up with services for children only. The structure should also include formal, non-formal and informal tracks so that the Government can exploit all modes of delivery. Most important, the structure should show clearly how the different developmental needs of children of different age groups can be met without disruption from birth to lower primary education, that is, continuously and without duplication. In other words, the structure should show clearly how children can make seamless transitions from their homes to early childhood centres and from early childhood centres to schools, setting off on the uninterrupted path of lifelong learning.

4.9. **ECD and FPE:** ECD is reported by some to be on the verge of collapse, with fingers pointing to the introduction of FPE. FPE seems to have had a significant impact, at least, on poor families, whose decision to send their children to ECD Centres or to schools is affected by whether they have to pay for the services. Considering that most parents view ECD as an early form of schooling, one does not need elaborate data to predict that Kenyan parents will resist paying ECD Centre fees when primary education – which they consider "real" schooling – is free. When parents withdraw their contributions, drops in ECD enrolment and eventual closures of ECD Centres are all but inevitable.

4.10. The proposal to offer one year of free ECD services for 5⁺-year-olds is not trouble-free. The Review Team pointed out that the proposal may aid primary education, but not necessarily early childhood, and could cause a micro-collapse within the ECD system by reducing and discouraging the enrolment of younger children. It is certainly tempting, however, and such measures are often adopted by countries facing a crisis. For instance, to prevent a complete collapse of their preschool education system during the transition period, many former Soviet republics in Eastern and Central Europe and

Central Asia opted to provide six months or a year of pre-primary education, with no support spared for other services.

4.11. The option could strategically serve as a temporary measure, but only if there were solid prospects that the system would soon restore services for younger children, fully promoting the child's holistic development. In Kenya, such a scenario is not evident. First of all, younger children's participation in ECD is extremely low, and, more importantly, no clear service structures exist for younger children that could be "restored". Moreover, parental pressure for pre-primary education is so great that it prevents teachers from practising what they learned in ECD training. As a result, the proposed free year of pre-primary education in Kenya, once implemented, will most likely fossilise as the MOEST's ECD service, leaving the care and education of children under three to the communities and other stakeholders, and quash further attempts to provide other services catering for younger children.⁵⁶

4.12. The proposal to provide one year of free ECD services for 5⁺-year-olds could be viable in Kenya, however, if two back-up measures are put in place. First, the MOEST may develop, in partnership with the concerned ministries, NGOs, development partners and university experts, a complete provision structure of ECD covering the entire age group, and develop a solid policy framework. The policy framework, in turn, may identify priority areas in terms of services and age groups. The 4⁺- and 5⁺-year-olds could be tagged as a priority group, at least of the MOEST, which meanwhile would be firmly engaged at the policy level in developing a partnership plan to support the care and education of the other age groups with the help of other sectors and partners. In short, there is a need for a full policy plan that prioritises and phases certain actions and initiatives, including the free year of pre-primary education.

4.13. **Need for policy development:** All the preceding discussions point to the importance of developing a national policy on early childhood. There are no hard and fast rules as to what such a policy should cover. The basic elements were presented earlier, so they will not be reiterated here. What needs to be stressed is that developing a valid and relevant policy document on early childhood with the involvement of all key partners and stakeholders is a great challenge because it requires major decisions to be taken.

4.14. For instance, many country policies emphasise the importance of partnerships. But mentioning this incontestable principle is not enough. Partnerships cannot work unless the respective roles and responsibilities of the different actors are clearly specified, along with the lines of authority, to enable partners to coordinate and harmonise their activities. This often requires difficult political decisions, without which the policy merely pays lip service to the politically correct principle.

4.15. In this regard, needless to say, an effective policy should be backed up by legislation. In fact, most countries that have effected major policy changes in early childhood started by preparing a legislative framework. For example, Kazakhstan is now drafting a bill to submit to the Parliament to universalise preschool education for children ages three years and up. The country has devoted far less time to preparing a policy document on this issue than on drafting the bill. Some other major policy decisions in Kazakhstan on preschool education have been likewise backed up by legislation – which oblige stakeholders to implement government decisions.

4.16. It is thus important for the Government not to attach too much importance on preparing a lengthy policy paper, especially one that sets out "empty" measures that cannot be enforced in the absence of legislation. Rather it may concentrate on identifying a few key policy questions that require major decisions, and on drafting relevant legislation. Otherwise, it may end up with a policy document, but without implementation means that enable concrete actions.

⁵⁶ Echoing this, the Draft Sessional Paper No. 1 of 2005 already contemplates the idea of concentrating the MOEST's support for children ages 4⁺ and 5⁺.

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ANNEX 1: SCHEDULE OF REVIEW VISIT

| Date | Time | Programme | |
|---------------|------|--|---|
| 19 Sept. 2004 | AM | Arrival in Nairobi | |
| | PM | Meeting of the Review Team members | |
| 20 Sept. 2004 | AM | Meeting with Mr. Stephen Karaba, Senior Deputy Director of Education, and other officials concerned with early childhood development of the Ministry of Education, Science and Technology | |
| | PM | Meeting with the national experts who prepared the Background Report of Kenya | |
| 21 Sept. 2004 | | Machakos / Garrisa group | Nakuru/Thika group |
| | AM | Travel to Machakos District, Eastern Province Meeting with Machakos District Education Officer in the District Education Office Visits to: Baptist Preschool Kasinga CRC | Travel to Nakuru District, Rift Valley Province Meeting with Nakuru DICECE officer |
| | PM | Visits to: Mungala-Mwanamwende office Kalama Kiamuhinga DICECE resource centre | Visits to: Baraka ECD Centre attached to public primary school Lighthouse Academy (private ECD Centre attached to primary and secondary school) |
| | | | |
| 22 Sept. 2004 | AM | Travel to Garissa District, North Eastern Province | Visits to: Kanpi Ya Moto ECD Centre attached to primary school Heshima ECD Centre attached to public primary school in the slum community Langalanga Health Centre Meeting with: Parents of Kampi Ya Moto ECD Centre |
| | PM | Meeting with District Education Officer, Garissa District Education Office Visit to Uma Farook Duksi | Visits to: St. Nicolas Anglican Church of Kenya Orphanage Itherero ECD Centre Meeting with the Statistical Officer of the District Education Office |
| 23 Sept. 2004 | AM | Visits to: Young Muslim Association Primary School and Children's Home Mnarani Academy Tetu ECD Centre Raya Primary School Sankori Primary School | Travel to Thika District, Central Province Meeting with District Commissioner of Thika Visits to: Nanny's School, a private independent ECD Centre ECD Centre and health centre on a coffee plantation |
| | PM | Visits to: Public Health Office Town clerk | Visits to: ECD Centre attached to primary school Community ECD Centre Orphanage run by women's group |
| 24 Sept. 2004 | AM | Travel to Nairobi | Visit to ECD Centre in Del Monte Meetings with: Kiganjo ECD and primary school head-teachers Igegania parents District Education Office Statistics Officer |
| | PM | Return to Nairobi | Return to Nairobi |

| | | |
|------------------|----|--|
| 27 Sept. 2004 | AM | Meeting with the African Network for Protection and Prevention of Child Abuse and Neglect (ANPPCAN) Visit to home-based childcare centres in Korogocho Slum, Nairobi, operated by ANPPCAN |
| | PM | Meeting with: ECD personnel of the Ministry of Education, Science and Technology Statistical officers of the Ministry of Education, Science and Technology and the Ministry of Planning |
| 28 Sept. 2004 | AM | Early Childhood Development Stakeholders' Consultation: <ul style="list-style-type: none"> • Venue: Kenya Institute of Education, the Ministry of Education, Science and Technology • Participants: Early childhood stakeholders from the central and local government (the Ministry of Education, Science and Technology, Provincial and District Education Offices, Kenya Institute of Education, NACECE, DICECE, MUCECE, CICECE), NGOs, faith-based organisations, private training colleges, universities, ECD teachers, international organisations |
| | PM | Early Childhood Development Stakeholders' Consultation (continued) Meeting of the Review Team members |

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ANNEX 3: COMPARATIVE DATA ON KENYA

1. Demography

Table 1: Size, growth, distribution and composition of the population

| | Total population, 2002 (millions) | Average annual population growth rate (%) | | Fertility rate (births per woman) | | Urban population (% of total) | | Rural population | | Percentage of population ages 0-14, 2002 |
|-------------------------|-----------------------------------|---|---------|-----------------------------------|------|-------------------------------|------------------|------------------------|------------------------------|--|
| | | 1980-2002 | 2002-15 | 1980 | 2002 | 2002 | 2015 (projected) | Average annual %, 2002 | % of total growth, 1980-2002 | |
| Kenya | 31 | 2.9 | 1.4 | 7.8 | 4.2 | 38.2 | 51.8 | 65 | 1.7 | 42.6 |
| Project ⁵⁷ | | | | | | | | | | |
| Brazil | 174 | 1.6 | 1.1 | 3.9 | 2.1 | 82.4 | 88.4 | 18 | -1.2 | 27.9 |
| Indonesia | 212 | 1.6 | 1.1 | 4.3 | 2.3 | 44.5 | 57.8 | 57 | 0.2 | 29.8 |
| Kazakhstan | 15 | 0.0 | 0.3 | 2.9 | 1.8 | 55.8 | 58.2 | 44 | -1.2 | 25.3 |
| Reference ⁵⁸ | | | | | | | | | | |
| Botswana | 2 | 2.9 | 0.4 | 6.1 | 3.8 | 51.1 | 57.5 | 50 | 0.7 | 41.8 |
| Ghana | 20 | 2.8 | 1.7 | 6.5 | 4.1 | 45.0 | 51.1 | 63 | 2.4 | 42.5 |
| South Africa | 45 | 2.3 | 0.3 | 4.6 | 2.8 | 56.5 | 62.7 | 42 | 1.3 | 32.1 |
| Tanzania | 35 | 2.9 | 1.7 | 6.7 | 5.0 | 34.4 | 46.8 | 66 | 1.7 | 45.0 |
| Uganda | 25 | 3.0 | 2.4 | 7.2 | 6.0 | 12.2 | 14.2 | 85 | 2.7 | 49.0 |
| Global ⁵⁹ | | | | | | | | | | |
| Low income | 2,495 | 2.1 | 1.5 | 5.5 | 3.5 | 31.2 | 37.5 | 69 | 1.6 | 36.5 |
| Lower middle income | 2,408 | 1.3 | 0.8 | 3.1 | 2.1 | | | 51 | 0.2 | 26.1 |
| Upper middle income | 329 | 1.5 | 1.1 | 3.6 | 2.4 | 52.8 | 61.0 | 25 | 0.1 | 28.9 |
| High income | 966 | 0.7 | 0.3 | 1.9 | 1.7 | 77.8 | 80.9 | 22 | -0.3 | 18.3 |
| World | 6,199 | 1.5 | 1.0 | 3.7 | 2.6 | 47.8 | 53.5 | 52 | 0.8 | 29.2 |

Reference: World Development Indicators. (2004). World Bank / Human Development Indicators. (2004). UNDP.

Kenya has a population of 31 million, similar to neighbouring Tanzania and Uganda. Population growth, however, has slowed, with a rate of 1.4% projected for 2002-15, lower than the average for low-income countries of 1.5%. The fertility rate has dropped sharply by 46% from 7.8 in 1980 to 4.2 in 2002. The decrease is greater than in any of the reference countries of the region. Children under 15 account for about 43% of the total population, higher than the average for low-income countries (37%). Kenya's overall **demographic profile** is not expanding at a particularly alarming pace.

Meanwhile, the **urban population** in Kenya is expanding rapidly. It is projected to grow by 36% from 38% in 2002 to 52% in 2015. This is one of the fastest growth rates among the reference countries. A rise in urban population is closely associated with a rise in double income households with less access to childcare from family members. Thus, in Kenya, even though fewer children require early childhood services, the **demand** for early childhood services among working parents in urban areas will increase rapidly. Childcare services for urban working parents may soon become a policy issue in Kenya.

⁵⁷ Countries participating in the UNESCO/OECD Early Childhood Policy Review Project.

⁵⁸ Countries selected from the region to provide Kenya with a frame of reference or benchmarking.

⁵⁹ According to the World Development Indicators, low-income countries are those with a GNI per capita of \$735 or less in 2002; the range for lower-middle-income countries is between \$735 and \$2,935; upper-middle-income countries, \$2,935 and \$9,076; and high-income countries \$9,076 or more. According to this categorisation, Kenya, whose GNI per capita in 2002 was \$360, is a low-income country.

2. Economy

Table 2: Size and structure of the economy

| | PPP gross national income, per capita (\$), 2002 | Unemployment % of total labour force, 2000-02 | GDP % growth, 2001-02 | Structure of GDP, 2002 | | |
|---------------------|--|---|-----------------------|------------------------|-------------------|-------------------|
| | | | | Agriculture % of GDP | Industry % of GDP | Services % of GDP |
| Kenya | 1,010 | -- | 1.0 | 16 | 19 | 65 |
| Project | | | | | | |
| Brazil | 7,450 | 9.4 | 1.5 | 6 | 21 | 73 |
| Indonesia | 3,070 | 6.1 | 3.7 | 17 | 44 | 38 |
| Kazakhstan | 5,630 | -- | 9.8 | 9 | 39 | 53 |
| Reference | | | | | | |
| Botswana | 7,740 | 15.8 | 3.1 | 2 | 48 | 50 |
| Ghana | 2,080 | -- | 4.5 | 34 | 24 | 42 |
| South Africa | 9,810 | 29.5 | 3.0 | 4 | 32 | 64 |
| Tanzania | 580 | -- | 6.3 | 44 | 16 | 39 |
| Uganda | 1,360 | -- | 6.7 | 32 | 22 | 46 |
| Global | | | | | | |
| Low income | 2,110 | -- | 4.0 | 24 | 30 | 46 |
| Lower middle income | 5,290 | 4.3 | 4.9 | 10 | 34 | 56 |
| Upper middle income | 9,550 | 9.0 | -1.2 | 6 | 34 | 60 |
| High income | 28,480 | 6.2 | 1.6 | 2 | 27 | 71 |
| World | 7,820 | -- | 1.9 | 4 | 29 | 68 |

Reference: World Development Indicators. (2004). World Bank.

Kenya's PPP gross national income per capita, at \$1,010, is below the average for low-income countries (\$2,110). Its **GDP** grew by 1.0% in 2001-02, which is lower than the global growth rate of 1.9% and a relatively **low growth rate** in the region, whose rates range from 3.0% in South Africa to 6.7% in Uganda. In terms of GDP structure, Kenya is similar to Botswana and South Africa: **Services** is the largest contributor (65%) to GDP, reflecting the trend in middle and high-income countries.

Table 3: Income distribution and poverty

| | Percentage share of income or consumption | | GINI index ⁶⁰ (survey year) | International poverty line | | | | |
|--------------|---|-------------|---|----------------------------|-------------------------------|-----------------------------|-------------------------------|-----------------------------|
| | Lowest 10% | Highest 10% | | Survey year | Population below \$1 a day, % | Poverty gap at \$1 a day, % | Population below \$2 a day, % | Poverty gap at \$2 a day, % |
| Kenya | 2.3 | 36.1 | 44.5 (1997) | 1997 | 23 | 6.0 | 58.6 | 24.1 |
| Project | | | | | | | | |
| Brazil | 0.5 | 46.7 | 59.1 (1998) | 2001 | 8.2 | 2.1 | 22.4 | 8.8 |
| Indonesia | 3.6 | 28.5 | 34.3 (2002) | 2002 | 7.5 | 0.9 | 52.4 | 15.7 |
| Kazakhstan | 3.4 | 24.2 | 31.3 (2001) | 2001 | < 2 | < 0.5 | 8.5 | 1.4 |
| Reference | | | | | | | | |
| Botswana | 0.7 | 56.6 | 63.0 (1993) | 1993 | 23.5 | 7.7 | 50.1 | 22.8 |
| Ghana | 2.1 | 30.0 | 30.0 (1999) | 1999 | 44.8 | 17.3 | 78.5 | 40.8 |
| South Africa | 0.7 | 46.9 | 59.3 (1995) | 1995 | 7.1 | 1.1 | 23.8 | 8.6 |
| Tanzania | 2.8 | 30.1 | 38.2 (1993) | 1993 | 19.9 | 4.8 | 59.7 | 23.0 |
| Uganda | 2.3 | 34.9 | 43.0 (1999) | -- | -- | -- | -- | -- |

Reference: World Development Indicators. (2004). World Bank.

Compared with Brazil, whose GINI index reached nearly 60 in 1998, Kenya does not have a particularly challenging disparity in **income distribution** and **consumption**. The GINI index in 1997 stood at 44.5, lower than Botswana's and South Africa's. Kenya's richest 10% share or consume about 36% of national income, while the figures for Botswana and South Africa are around 57% and 47%, respectively. The lowest 10% in Kenya share or consume about 2% of national income, while in Botswana and South Africa the figures are below 1%.

About 23% of the Kenyan population lives below the international **poverty line** of US\$1 a day. More than half earn less than \$2 a day, while among the reference countries, only Ghana and Tanzania have a bigger affected population (about 80% and 60%, respectively). Compared with Botswana or South Africa, which have smaller proportions of people earning less than \$2 a day, Kenya shows a poverty gap at \$2 a day of 24.1%, higher than Botswana's 22.8% or South Africa's 8.6%. Poverty in Kenya is deeper than in the other two countries despite its relatively low GINI index.

⁶⁰ "Measures the extent to which the distribution of income among individuals or households within an economy deviates from a perfectly equal distribution." Reference: World Development Indicators. (2004). The World Bank. p. 63.

3. Women development

Table 4: Employment status of women

| | Female labour force participation rate, %, ages 15-64 | | Female employment by economic activity (%) (2000-02) | | | Women in non-agricultural sector, % of total, 2000-02 |
|---------------------|---|------|--|-----------------------------|-----------------------------|---|
| | 1980 | 2002 | Agriculture | Industry | Services | |
| Kenya | 77.7 | 76.8 | 16 | 10 | 75 | 37.8 |
| Project | | | | | | |
| Brazil | 35.7 | 47.0 | 16 | 10 | 74 | 45.7 |
| Indonesia | 45.6 | 59.1 | 54 (1980) 42 (1995-2001) | 13 (1980) 16 (1995-2001) | 33 (1980) 42 (1995-2001) | 29.7 |
| Kazakhstan | 70.5 | 68.9 | -- | -- | -- | -- |
| Reference | | | | | | |
| Botswana | 72.2 | 66.5 | 17 | 14 | 67 | 44.8 |
| Ghana | 82.8 | 81.0 | -- | -- | -- | -- |
| South Africa | 46.5 | 50.2 | -- | -- | -- | -- |
| Tanzania | 86.0 | 82.7 | -- | -- | -- | -- |
| Uganda | 83.3 | 81.2 | -- | -- | -- | -- |
| Global | | | | | | |
| Low income | 53.8 | 54.4 | -- | -- | -- | -- |
| Lower middle income | 64.2 | 67.2 | -- | -- | -- | -- |
| Upper middle income | 44.3 | 49.0 | 8 | 19 | 73 | -- |
| High income | 52.6 | 63.5 | 3 | 15 | 82 | -- |
| World | 57.3 | 60.8 | -- | -- | -- | -- |

Reference: World Development Indicators. (2004). World Bank.

In 2002, about 77% of women between the ages of 15 and 64 in Kenya were in the labour force, which is lower than in Tanzania, Uganda and Ghana, whose rates exceeded 80%. The figure, however, is certainly higher than the average for low-income countries of 54%, or the world average of 60.8%. The structure of female employment by economic activity is similar to that of Brazil. Between 2000 and 2002, about 75% of **female employment** in Kenya was in the **services sector**. Compared with Botswana (67%) and upper-middle-income countries (an average of 73%), the percentage of women working in the services sector in Kenya is relatively high. Women in Kenya's non-agricultural sector account for about 38%, compared with 45% in Botswana.

Table 5: Educational status of women

| | Female gross intake rate in primary education, % of relevant age group (2001) | Gender parity index (female/male) in NER in primary education (2001) | Female survival rate to last grade of primary education, % of relevant age group (2000) | Gender parity index (female/male) in NER in secondary education (2001) | Female adult literacy, %, ages 15 and over | |
|----------------------|---|--|---|--|--|---------|
| | | | | | 1990 | 2000-04 |
| Kenya | 101.5 (1999/2000) | 1.02 | 58 (2001/02-2002/03) | 0.97 | 60.8 | 78.5 |
| Project | | | | | | |
| Brazil | 118.8 | 1.02 | 84.5 | 1.08 | 81.2 | 88.3 |
| Indonesia | 113.1 | 0.99 | 88.7 | 0.95 (1999/2000) | 72.5 | 83.4 |
| Kazakhstan | 105.9 | 0.99 | 94.8 | 0.97 | 98.2 | 99.2 |
| Reference | | | | | | |
| Botswana | 109.6 | 1.04 | 88.5 | 1.15 (2000/01) | 70.3 | 81.5 |
| Ghana | 83.6 | 0.96 | 57.8 (1999/2000) | 0.87 | 47.2 | 65.9 |
| South Africa | 94.0 | 1.01 | 56.3 (1999/2000) | 1.11 (2000/01) | 80.2 | 85.3 |
| Tanzania | 99.8 | 1.00 | 71.7 | -- | 51.0 | 69.2 |
| Uganda | -- | -- | -- | 0.86 (2000/01) | 43.5 | 59.2 |
| Global | | | | | | |
| Developing countries | 101.5 | 0.93 | 79.6 | 0.85 | 57.9 | 69.3 |
| Sub-Saharan Africa | 91.6 | 0.89 | 65.3 | 0.84 | 40.3 | 54.2 |
| Developed countries | 98.4 | 1.00 | -- | 1.01 | 97.5 | 99.1 |
| World | 102.0 | 0.94 | 87.0 | 0.89 | 69.1 | 76.5 |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing. / World Development Indicators. (2004). World Bank.

In Kenya, the female intake rate in primary education is over 100%,⁶¹ but the completion rate is only 58%. Kenya has gender parity in terms of net enrolment ratios (NERs) in primary and secondary education. Female adult literacy in 1990 was lower than the world weighted average; however, in 2000-04, Kenya marked 78.5%, which is above the world weighted average of 76.5%.

⁶¹ Gross intake rate refers to “[t]otal number of new entrants in the first grade of primary education, regardless of age, expressed as a percentage of the population at the official primary-school entrance age” (EFA Global Monitoring Report, 2004). The rate can exceed 100% due to the presence of children who enter at an age earlier or later than the official entrance age.

Table 6: Gender parity, vulnerability and reproductive health status of women

| | GDI ⁶² rank | Female-headed households, % of total (year) | Teenage fertility rate, births per 1,000 women, ages 15-19, 2002 | Pregnant women receiving prenatal care, %, 1995-2002 | Births attended by skilled health staff % of total, 1995-2002 | Maternal mortality ratio, per 100,000 live births, modelled estimates, 2000 |
|---------------------|---|---|--|--|---|---|
| Kenya | 114 | 31 (1998) | 100 | 76 | 44 | 1,000 |
| Project | | | | | | |
| Brazil | 60 | 20 (1996) | 68 | 86 | 88 | 260 |
| Indonesia | 90 | 12 (1997) | 52 | 89 | 64 | 230 |
| Kazakhstan | 63 | 33 (1999) | 35 | 91 | 99 | 210 |
| Reference | | | | | | |
| Botswana | 102 | -- | 68 | 91 | 94 | 100 |
| Ghana | 104 | -- | 81 | 88 | 44 | 540 |
| South Africa | 96 | 41 (1998) | 43 | 94 | 84 | 230 |
| Tanzania | 131 | 23 (1999) | 115 | 49 | 36 | 1,500 |
| Uganda | 113 | 27 (2000-01) | 182 | 92 | 39 | 880 |
| Global | | | | | | |
| Low income | [Norway 1, Mauritius 55, China 71, Cape Verde 83, Namibia 101, Pakistan 120, Niger 144] | -- | 98 | -- | 41 | 657 |
| Lower middle income | | -- | 33 | -- | 78 | 112 |
| Upper middle income | | -- | 54 | -- | 92 | 67 |
| High income | | -- | 24 | -- | 99 | 13 |
| World | | -- | 63 | -- | 60 | 403 |

Reference: World Development Indicators. (2004). World Bank. / Human Development Indicators. (2004). UNDP.

Despite the active participation of women in the labour force, Kenya's **Gender-related Development Index (GDI)** ranks low at 114 out of 144. Among the five reference countries from the region, only Tanzania (at 131) lags behind Kenya.

Meanwhile, female-headed households are relatively prevalent in Kenya (31%), compared with neighbouring Tanzania (23%) and Uganda (27%). Kenya's adolescent fertility rate (100) is lower than Tanzania's and Uganda's rates of 115 and 182, but high compared with the average for low-income countries of 98. The country's **social vulnerability** for these two factors is relatively high.

Seventy-six percent of pregnant women in Kenya receive prenatal care, which is lower than any of the reference countries except Tanzania. The percentage of births attended by skilled health staff is even lower at 44%, much lower than Botswana's 94% or South Africa's 84%. This must, in part, explain Kenya's high **maternal mortality ratio** of 1,000 per 100,000 cases, higher than that of all the reference countries except Tanzania.

⁶² The Gender-related Development Index (GDI) "adjusts the average achievement to reflect the inequalities between men and women" in life expectancy at birth; adult literacy and school enrolments; and estimated earned income (PPP US\$). Reference: Human Development Report. (2003). UNDP. p. 343.

4. Education

Table 7: Educational financing

| | PPP gross national income, per capita (\$), 2002 | Public expenditure on education, % of GDP, 2001/02 | Public expenditure on education as % of total expenditure, 2001/02 | Public expenditure per student as % of per capita GDP | | |
|---------------------|--|--|--|---|------------------|-----------------|
| | | | | Primary 2001/2 | Secondary 2001/2 | Tertiary 2001/2 |
| Kenya | 1,010 | 6.3 (2000/01) | 22.5 | 0.9 | 2.2 | 256.7 |
| Project | | | | | | |
| Brazil | 7,450 | 4.2 (2001) | 10.4 | 10.7 | 10.0 | 48.5 |
| Indonesia | 3,070 | 1.4 (2001) | 9.6 | 3.7 | 7.3 | 21.0 |
| Kazakhstan | 5,630 | 4.4 | -- | -- | -- | -- |
| Reference | | | | | | |
| Botswana | 7,740 | 2.3 (2000/01) | -- | 6.0 | 5.5 | 88.6 |
| Ghana | 2,080 | 4.2 (1999/2000) | -- | -- | -- | -- |
| South Africa | 9,810 | 5.8 (1999/2000) | 18.1 | 14.3 | 18.3 | 56.8 |
| Tanzania | 580 | 2.2 | -- | -- | -- | -- |
| Uganda | 1,360 | 2.5 (1999/2000) | -- | -- | -- | -- |
| Global | | | | | | |
| Low income | 2,110 | 3.1 | -- | -- | -- | -- |
| Lower middle income | 5,290 | 4.0 | -- | -- | -- | -- |
| Upper middle income | 9,550 | 4.4 | 13.7 | 12.4 | 16.9 (1990-1) | 30.6 |
| High income | 28,480 | 5.2 | 11.5 | 26.2 | 31.0 (1990-1) | 66.5 |
| World | 7,820 | 4.1 | -- | -- | -- | -- |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing. / World Development Indicators. (2004). World Bank.

Kenya's **expenditure on education** as a percentage of GDP is relatively high at 6.3%, compared with the reference countries and the average of high-income countries (5.2%). The high investment in education in Kenya is also observed in relation to public expenditure on education as a percentage of total expenditure, which stands at 22.5%, compared with South Africa's 18%.

However, Kenya's **public expenditure per student** is highly skewed toward tertiary education, spending less than 1% of per capita GDP on primary education per student, while in Botswana and South Africa, the figure stands at 6% and 14%, respectively, and it exceeds 26% in developed countries. Almost all of Kenya's public expenditure on education flows to tertiary education.

Table 8: Adult and youth literacy rate

| | Adult literacy rate, %, age 15 and older | | | | Youth literacy rate %, ages 15-24 | | | |
|---------------------|---|------|--------|------|--------------------------------------|------|--------|------|
| | Male | | Female | | Male | | Female | |
| | 1990 | 2002 | 1990 | 2002 | 1990 | 2002 | 1990 | 2002 |
| Kenya | 81 | 90 | 61 | 79 | 93 | 96 | 87 | 95 |
| Project | | | | | | | | |
| Brazil | 83 | 86 | 81 | 87 | 91 | 93 | 93 | 96 |
| Indonesia | 87 | 92 | 73 | 83 | 97 | 99 | 93 | 98 |
| Kazakhstan | 99 | 100 | 98 | 99 | 100 | 100 | 100 | 100 |
| Reference | | | | | | | | |
| Botswana | 66 | 76 | 70 | 82 | 79 | 85 | 87 | 93 |
| Ghana | 70 | 82 | 47 | 66 | 88 | 94 | 75 | 90 |
| South Africa | 82 | 87 | 80 | 85 | 89 | 92 | 88 | 92 |
| Tanzania | 76 | 85 | 51 | 69 | 89 | 94 | 77 | 89 |
| Uganda | 69 | 79 | 43 | 59 | 80 | 86 | 60 | 74 |
| Global | | | | | | | | |
| Low income | 64 | 72 | 72 | 53 | 75 | 82 | 59 | 70 |
| Lower middle income | 87 | 92 | 74 | 82 | 95 | 96 | 91 | 94 |
| Upper middle income | 92 | 95 | 88 | 92 | 97 | 98 | 95 | 98 |
| High income | -- | -- | -- | -- | -- | -- | -- | -- |
| World | 79 | 84 | 63 | 71 | 87 | 89 | 78 | 83 |

Reference: World Development Indicators. (2004). World Bank.

As in most other countries cited from the region, the male/female literacy rate of 15-24-year-olds in Kenya is close to 95%, close to the level of lower-middle-income countries. Adult literacy among females over 15 in Kenya remains relatively low at 79%, but this is still above the world average of 71% or the average for low-income countries of 53%, although Botswana and South Africa show higher literacy rates at 82% and 85%, respectively, in the region.

Table 9: Enrolments and internal efficiency in pre-primary, primary and secondary education

| | GER in pre-primary education, 2001 | NER in primary education, 2001 | Survival rate to last grade of primary education (%), 2000 | Repeaters in primary school, 2001, % of enrolment | Transition to secondary education, 2000 (%) ⁶³ | NER in secondary education, 2001 | Repeaters in secondary education, 2001, % of enrolment |
|----------------------|------------------------------------|--------------------------------|--|---|---|----------------------------------|--|
| Kenya | 40.4* | 69.9 | 56 (2000/01–2002/03) | -- | 73.1 | 24.0 | -- |
| Project | | | | | | | |
| Brazil | 67.2 | 96.5 | 79.9 | 21.5 | 84.0 | 71.6 | 18.0 |
| Indonesia | 20.3 | 92.1 | 85.9 | 5.3 | 79.5 | 47.4 (1999/2000) | 0.3 |
| Kazakhstan | 12.8 | 89.5 | 94.8 | 0.2 | 98.8 | 84.1 | 0.2 |
| Reference | | | | | | | |
| Botswana | -- | 80.9 | 89.5 | 3.2 | 96.1 | 54.6 (2000/01) | -- |
| Ghana | 41.5 | 60.2 | 59.3 (1999/2000) | 6.9 | 90.3 | 32.0 | -- |
| South Africa | 35.1 | 89.5 | 57.4 (1999/2000) | 8.8 | 91.9 (1999/2000) | 62.0 (2000/01) | -- |
| Tanzania | -- | 54.4 | 69.3 | 2.5 | 19.9 | -- | 0.2 (1999/2000) |
| Uganda | 4.2 | -- | 67 | -- | 40.6 | 14.0 (2000/01) | -- |
| Global | | | | | | | |
| Developing countries | 31.9 | 82.5 | 77.5 | 7.7 | 84.0 | 48.5 | 7.4 |
| Sub-Saharan Africa | 5.8 | 62.8 | 58.0 | 19.5 | 63.9 | 21.3 | -- |
| Developed countries | 81.9 | 95.6 | -- | 1.7 | 98.9 | 90.0 | -- |
| World | 48.6 | 84 | 86.2 | 5.6 | 90.8 | 54.9 | 4.4 |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing. / World Development Indicators. (2004). World Bank.
*Data from Education Statistical Booklet 1999-2004, Ministry of Education, Science and Technology, Government of Kenya.

The GER in **pre-primary education** in Kenya reached 40.4% in 2001, well above the sub-Saharan African average (5.8%) and that of developing countries (31.9%). The NER in **primary education** in Kenya stands at 70%, lower than the average for developing countries of 82.5%. The survival rate to last grade in primary education is also low at 56%, lower than in any of the reference countries as well as the average for sub-Saharan Africa.

Meanwhile, 73.1% of primary school graduates continue their education at the secondary level, a rate lower than the median for developing countries of 84.0% or the world median of 90.8%. The NER in **secondary education** remains below 25%, far lower than the weighted average for developing countries of 48.5%.

⁶³ “New entrants to the first grade of secondary education in a given year, expressed as a percentage of the number of pupils enrolled in the final grade of primary education in the previous year”. Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing, p. 391.

Table 10: Repetition rates by grade in primary education, %, 2000

| | Grade 1 | Grade 2 | Grade 3 | Grade 4 | Grade 5 | Grade 6 |
|--------------------------|-----------------|---------|---------|---------|---------|---------|
| Kenya | 7.2 (1999/2000) | -- | -- | -- | -- | -- |
| Project | | | | | | |
| Brazil | 31.1 | 19.1 | 16.1 | 14.2 | n.a. | n.a. |
| Indonesia | 10.8 | 6.6 | 5.4 | 4.2 | 2.9 | 0.5 |
| Kazakhstan | 0.1 | 0.3 | 0.2 | 0.1 | n.a. | n.a. |
| Reference | | | | | | |
| Botswana | 4.1 | 2.2 | 2.1 | 10.5 | 1.5 | 1.1 |
| Ghana (1999/2000) | 8.0 | 5.1 | 4.6 | 4.1 | 3.6 | 3.8 |
| South Africa (1999/2000) | 8.4 | 7.3 | 8.7 | 10.5 | 9.7 | 7.1 |
| Tanzania | 3.5 | 2.4 | 2.6 | 8.8 | 0.1 | 0.0 |
| Uganda | -- | -- | -- | -- | -- | -- |
| Developing countries | 10.7 | 7.9 | 7.7 | 7.5 | 6.3 | 5.8 |
| World | 6.5 | 5.4 | 5.2 | 5.3 | -- | -- |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing.

In Kenya, repetition rate in grade 1 stands at 7.2%, lower than Ghana (8%) and South Africa (8.4%), but higher than the global average of 6.5%.

Table 11: Private enrolment as % of total enrolment in pre-primary, primary & secondary education, 2001

| | Pre-Primary | Primary | Secondary |
|----------------------|------------------|-----------------|----------------|
| Kenya | 10.4 (1999/2000) | 5.6 | 4.2 |
| Project | | | |
| Brazil | 28.7 | 8.1 | 11.3 |
| Indonesia | 98.8 | 16.0 | 42.7 |
| Kazakhstan | 11.9 | 0.6 | 0.9 |
| Reference | | | |
| Botswana | -- | 4.7 | 4.2 |
| Ghana | 34.8 | 18.3 | 10.5 (2000/01) |
| South Africa | 10.8 | 2.0 | 2.4 |
| Tanzania | -- | 0.2 (1999/2000) | -- |
| Uganda | 100 (2000/01) | 4.9 (1999/2000) | -- |
| Global | | | |
| Developing countries | 55.5 | 10.9 | 14.9 |
| Developed countries | 7.8 | 4.2 | 7.1 |
| Sub-Saharan Africa | 61.8 | 9.2 | 13.3 |
| World | 40.1 | 7.2 | 11.7 |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing.

In pre-primary education, Kenya's proportion of private enrolment (10.4%) is similar to that of South Africa (10.8%). Private enrolments are lower in primary education and particularly secondary education compared with the rates of developing countries, sub-Saharan Africa and the world.

Table 12: Trained teachers and pupil/teacher ratio in preschools, primary and secondary education

| | Preschools | | | Primary | | | Secondary | |
|----------------------|---------------------------|---------------------|------|---------------------------|---------------------|------|---------------------|-----------------|
| | Trained teachers, %, 2001 | Pupil/teacher ratio | | Trained teachers, %, 2001 | Pupil/teacher ratio | | Pupil/teacher ratio | |
| | | 1998 | 2001 | | 1998 | 2001 | 1998 | 2001 |
| Kenya | 47.4 | 27 | 25 | 98.0 | 29 | 32 | 26 | 26 (2000/01) |
| Project | | | | | | | | |
| Brazil | -- | 20 | 19 | -- | -- | 23 | -- | 19 |
| Indonesia | -- | -- | 13 | -- | -- | 21 | -- | 14 |
| Kazakhstan | -- | 9 | 5 | -- | 18 | 19 | -- | 12 |
| Reference | | | | | | | | |
| Botswana | -- | -- | -- | 89.5 | 28 | 27 | 17 | 20 |
| Ghana | 22.2 | 25 | 25 | 64.9 | 30 | 32 | 20 | 19 |
| South Africa | -- | 36 | -- | 67.6 | 37 | 37 | 30 | 30 |
| Tanzania | -- | -- | -- | -- | 38 | 46 | -- | -- |
| Uganda | -- | 25 | 25 | -- | 60 | 54 | 12 | -- |
| Developing countries | -- | 22 | 21 | -- | 28 | 28 | 19 | 20 |
| Developed countries | -- | 16 | 14 | -- | 16 | 15 | 13 | 12 |
| Sub-Saharan Africa | -- | -- | 25 | -- | 43 | 44 | 24 | 24 |
| World | -- | 19 | 18 | -- | 24 | 22 | 17 | 17 |

Reference: EFA Global Monitoring Report. (2004). UNESCO Publishing.

The **pupil/teacher ratio** in preschool education in Kenya stood at 25 in 2001, like Ghana's and Uganda's, and higher than the developing countries' average of 21. In primary education, the pupil/teacher ratio stands at 32 in 2001, which is the same level as in Ghana. The percentage of trained teachers in primary education is the highest among the reference countries.

5. Child development and health environment

Table 13: Child development and health environment

| | Under-5 mortality rate, 2002 | Child immunisation rate, measles, 2002 | Prevalence of child malnutrition, % of children under age 5, 1996-2002 | | Public expenditure on health, % of GDP, 2001 | Private health expenditure, % of total, 2001 | Access to improved water sources, % of population | Access to improved sanitation facilities, % of population | |
|---------------------|------------------------------|--|--|----------------|--|--|---|---|------|
| | | | Weight for age | Height for age | | | 2000 | 1990 | 2000 |
| Kenya | 122 | 78 | 22 | 33 | 1.7 | 78.6 | 57 | 80 | 87 |
| Project | | | | | | | | | |
| Brazil | 37 | 93 | 6 | 11 | 3.2 | 58.4 | 87 | 71 | 76 |
| Indonesia | 43 | 76 | 25 | -- | 0.6 | 74.9 | 78 | 47 | 55 |
| Kazakhstan | 99 | 95 | 4 | 10 | 1.9 | 39.6 | 91 | -- | 99 |
| Reference | | | | | | | | | |
| Botswana | 110 | 90 | 13 | 23 | 4.4 | 33.8 | 95 | 60 | 66 |
| Ghana | 97 | 81 | 25 | 26 | 2.8 | 40.4 | 73 | 61 | 72 |
| South Africa | 65 | 78 | -- | -- | 3.6 | 58.6 | 86 | 86 | 87 |
| Tanzania | 165 | 89 | 29 | 44 | 2.0 | 53.3 | 68 | 84 | 90 |
| Uganda | 141 | 77 | 23 | 39 | 3.4 | 42.5 | 52 | -- | 79 |
| Global | | | | | | | | | |
| Low income | 121 | 65 | 42 | -- | 1.1 | 73.7 | 76 | 30 | 43 |
| Lower middle income | 40 | 78 | 9 | 17 | 2.7 | 52.8 | 81 | 45 | 58 |
| Upper middle income | 22 | 94 | -- | -- | 3.7 | 42.3 | -- | -- | -- |
| High income | 7 | 90 | -- | -- | 6.3 | 37.9 | -- | -- | -- |
| World | 81 | 72 | -- | -- | 5.6 | 40.8 | 81 | 45 | 55 |

Reference: World Development Indicators. (2004). World Bank.

The **under-5 mortality rate** in Kenya (122) is close to the average of low-income countries (121). But Kenya has no room for complacency since the regional reference countries besides Tanzania and Uganda have lower rates than Kenya's.

Kenya's child **immunisation** rate for measles stands at 78%, which is equal to the average of lower-middle-income countries. The prevalence of **malnutrition** in the country is close to that of Uganda. However, compared with lower-middle-income countries, Kenya shows a much higher percentage of malnourished children in terms of weight (22%) and height (33%), suggesting a need for increased efforts to improve young children's nutrition.

Kenya's public **expenditure on health** as a percentage of GDP (2001) is 1.7%, lower than any of the reference countries in the region. On the other hand, private health expenditure amounts to 78.6%, the highest in the region.

Only around 57% of the Kenyan population has access to improved **water sources**, but those who have access to improved **sanitation** facilities stood at 87%, a 9% improvement from 80% in 1990. This, however, is much lower than the low-income countries' average improvement of 43%, and even lower than Botswana's (10%) and Ghana's (18%), where access to improved sanitation facilities grew more during the same period.