ASIA-PACIFIC END OF DECADE NOTES ON EDUCATION FOR ALL

EFA Goal 1
Early Childhood Care and Education
Early Childhood Care and Education
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Acronyms

ARNEC: Asia-Pacific Regional Network for Early Childhood
CEE/CIS: Central and Eastern Europe and the Commonwealth of Independent States (UNICEF regions)
CERID: Research Centre for Educational Innovation and Development (Tribhuvan University, Nepal)
CRC: Convention on the Rights of the Child
DBNA: Dayak Bidayuh National Organization
DOE: Department of Education (Nepal)
ECCD: Early Childhood Care and Development
ECCE: Early Childhood Care and Education
ECD: Early Childhood Development
ECE: Early Childhood Education
ECECD: Early Childhood Education, Care and Development
ECED: Early Childhood Education and Development
EDNs: End of Decade Notes (Asia-Pacific End of Decade Notes on Education for All)
EFA: Education for All
ELDS: Early Learning and Development Standards
GC: General Comment (of the CRC)
GER: Gross Enrolment Ratio
GPI: Gender Parity Index
IBE: International Bureau of Education (UNESCO)
ICT: Information and Communication Technology
JSY: Janani Suraksha Yojana (national conditional cash transfer programme, India)
Lao PDR: Lao People’s Democratic Republic
MDA: Mid-Decade Assessment (EFA)
MDGs: Millennium Development Goals
MICS: Multiple Indicator Cluster Survey
MOU: Memorandum of Understanding
MRRD: Ministry of Rural and Regional Development (Malaysia)
NDP: National Development Plan (Maldives)
NGO: Non-Government Organization
NICHD ECCRN: National Institute of Child Health and Human Development, Early Child Care Research Network
PAUDNI: Ditjen Pendidikan Anak Usia Dini Nonformal dan Informal (Early Childhood Education Directorate of Non-formal and Informal, Indonesia)
SPARK: Singapore Pre-school Accreditation Framework
UIS: UNESCO Institute for Statistics
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNICEF: United Nations Children’s Fund
UNICEF EAPRO: UNICEF East Asia and Pacific Regional Office
UNICEF ROSA: UNICEF Regional Office for South Asia
WHO: World Health Organization
“The equation is simple: education is the most basic insurance against poverty. Education represents opportunity. At all ages, it empowers people with the knowledge, skills and confidence they need to shape a better future.”

Irina Bokova, Director-General, UNESCO

Article 26 of the 1948 Universal Declaration of Human Rights states that “everyone has the right to education”. Not only is education a basic human right, it both equips individuals with the skills and knowledge to lead better lives and underpins human development. But education is still not a right recognized by all, and many who miss out on education miss out on the opportunity to improve their lives.

In recognition of this, governments, United Nations agencies, donors, NGOs and civil society groups made a joint commitment to provide Education for All (EFA) in March 1990 at the World Conference on Education for All in Jomtien, Thailand. The pledge was made by 155 countries and representatives of 160 government and non-government agencies. The World Declaration on Education for All and the Framework for Action to Meet Basic Learning Needs adopted by the World Conference on EFA in Jomtien reaffirmed education as a fundamental human right and urged countries to intensify efforts to address the basic learning needs of all by 2000.

The global assessment of EFA progress in 2000 showed that the commitment made in Jomtien was not delivered. Thus in April 2000 at the World Education Forum in Dakar, Senegal, the international community reaffirmed its commitment to achieve Education for All this time by 2015.

The Dakar Framework for Action specifies the following six goals:

1. Expanding and improving comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children.

2. Ensuring that by 2015 all children, particularly girls, children in difficult circumstances and those belonging to ethnic minorities, have access to and complete free and compulsory primary education of good quality.

3. Ensuring that the learning needs of all young people and adults are met through equitable access to appropriate learning and life skills programmes.

4. Achieving a 50 per cent improvement in the levels of adult literacy by 2015, especially for women, and equitable access to basic and continuing education for all adults.

5. Eliminating gender disparities in primary and secondary education by 2005, and achieving gender equality in education by 2015, with a focus on ensuring girls’ full and equal access to and achievement in basic education of good quality.

6. Improving all aspects of the quality of education and ensuring excellence of all, so that recognized and measurable learning outcomes are achieved by all, especially in literacy, numeracy and essential life skills.

Some of these goals were later reiterated in September 2000 when 189 nations came together at the United Nations Millennium Summit and endorsed the Millennium Declaration. The Declaration set out the eight Millennium Development Goals (MDGs) to be achieved by 2015, including achieving universal primary education (MDG 2) and promoting gender equality and empowering women (MDG 3). There is clear consensus that the achievement of EFA contributes to the attainment of the other MDGs as well.
The End of Decade Notes

At the close of the 2000s, the Asia-Pacific region reviewed regional and national progress toward the EFA goals and targets. The resulting Asia-Pacific End of Decade Notes on Education for All take stock of the progress, persisting issues and remaining challenges in achieving each EFA goal.

The End of Decade Notes, or EDNs, highlight examples of innovative policy reforms and strategies, particularly those aimed at reducing disparities in access to and quality of education. They also emphasize the policy, capacity and governance gaps to be addressed in order to achieve EFA in the region.

The EDNs consist of six reports, one for each EFA goal that build on the findings of the Asia-Pacific EFA Mid-Decade Assessment (2006–2008), which examined EFA progress and gaps at the mid-way point of the 2000–2010 decade.

The first section of each EDN report provides an overview of progress towards the respective EFA goal. The second section discusses the remaining challenges and priority issues. Each report concludes with recommendations on what needs to be done to accelerate progress towards the 2015 targets.

While each EDN covers the Asia-Pacific region, it also highlights issues and challenges specific to subregional groupings, as per the Education for All Global Monitoring Report. The EDNs thus cover the subregions of Central Asia, South and West Asia, East Asia and the Pacific. Details on which countries are included in the subregional groupings are found in the Statistical Annex at the end of this EDN.
Foreword

In 1990, a World Declaration on Education for All was adopted in Jomtien, Thailand reaffirming the notion that education was a fundamental human right.

With less than four years remaining for the EFA goals to be achieved, it is now an opportune moment to take stock in Asia and the Pacific of both achievements and shortcomings to draw lessons and move forward. Understanding and sharing the information on how much has been accomplished during the past decade and the main hurdles to attaining the goals by 2015 will help countries and EFA partners in the region identify options and strategies for achieving the goals. Success in Education for All is critical to meeting the Millennium Development Goals, including in areas related to poverty reduction, nutrition, child survival and maternal health.

Within this context, the Asia-Pacific End of Decade Notes on Education for All examine what the region has attained between 2000-2010. The Notes highlight policy reforms and strategies implemented by countries, especially addressing disparities in education, as potential models and provide the latest thinking on ways forward.

The Asia-Pacific region has experienced strong economic growth, substantially reduced poverty and ensured more children are enrolled in school. This progress, however, has been skewed; rising income inequality and inequalities in access to basic human services continue to plague the region, presenting significant challenges and long-term consequences.

Progress in meeting the six goals has been uneven with some groups of children left out, such as ethnic minorities, migrant children, children with disabilities and in South Asia, girls. Slow progress has been especially noted in the expansion of early childhood care and education, in reducing out-of-school numbers, and in improving the quality of education.

To ensure regional stability and prosperity, we must address these inequities and we must ensure the provision of quality education for all learners. Many countries in the region have endeavoured to ‘reach the unreached’ and ensure that education is truly for all. The End of Decade Notes aim to support and strengthen this momentum, energy and commitment to EFA in the region.

With less than four years remaining before 2015, we are racing against time. We need renewed vigour and concerted action to guarantee equitable access to quality education and to ensure that children are not missing out on schooling and learning opportunities because of their sex, geographic location, ethnicity, disability, socio-economic status or other causes of marginalization.

UNESCO and UNICEF are committed to supporting countries and working with partners to speed up progress in meeting the EFA targets by 2015. The End of Decade Notes, created under the auspices of the Regional Thematic Working Group on EFA, which UNESCO and UNICEF co-chair, is one way of extending our support and advocacy for EFA.

We hope the End of Decade Notes will serve to guide actions and interventions and ultimately accelerate the progress towards the EFA goals.

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The term ‘early childhood care and education’ (ECCE) refers to a range of processes and mechanisms that sustain, support and aid in the holistic development of children, from birth to age 8 years. Due to the rapid neural connections, brain development and growth that take place at this age, this period is considered a critical window of opportunity for optimizing children’s development through the combined impact of education, care, health, nutrition, protection and stimulation. The field of early childhood care and education is replete with evidence that attests to the considerable benefits of good-quality ECCE programmes. Children who have participated in quality ECCE exhibit tremendous gains in their overall social, cognitive and intellectual development. ECCE has contributed to breaking the cycle of poverty; it also offers an entry point and platform for improving social equity and inclusion.

This Asia-Pacific End of Decade Note on Education for All Goal 1 on early childhood care and education starts with an examination of five themes in the Asia-Pacific region:

1. Policy-making
2. Access for vulnerable and disadvantaged children (closely related to finance issues)
3. Holistic ECCE (encompassing the health and well-being of young children)
4. Standards, regulations and guidelines, and training and capacity-building
5. The quality imperative (defining quality and analysing caregiver–child ratios and interactions, parenting and community involvement, curriculum and approaches, coordination among multiple actors, monitoring and evaluation)

This End of Decade Note, or EDN, highlights the variations in definition, scope and progress across the region and the challenges and problems that remain. Although significant progress has been made in all five themes, some daunting challenges persist:

- Adequate training, certification and incentives for ECCE practitioners (teachers and caregivers) are lacking.
- Public funding for ECCE remains negligible.
- Attention to marginalized and disadvantaged groups (those in remote areas, minorities and indigenous communities) is limited. In particular, difficulties in providing ECCE services and support to these groups continue to be formidable.
- Coordination between sectors is weak (especially for services for children aged 0–3 years). Holistic ECCE must include the mother, a parent and/or the family.
- There is an urgent need for relevant data; frequently, available information is also scattered across ministries and agencies. This issue is further compounded by issues of accuracy, lack of harmony with data from other sectors and agencies and incomplete reporting on internationally agreed basic indicators. Available data from other sectors (health, nutrition and child protection) need to be integrated, with a particular focus on vulnerable groups.
- There is also a lack of preparedness for ECCE in situations of emergencies, disasters and conflicts.

Based on the analysis of the progress and challenges and on the urgency for achieving Education for All (EFA) Goal 1 by 2015, the following recommendations are offered for each of the five themes.
Policy-making: The recommendations call for: i) a strengthening of the reporting structures for data and knowledge management, particularly on the basic ECCE indicators; ii) explicit and clear statements specifically directed towards issues relating to children aged 0–3 years in policy documents, guidelines and frameworks; iii) constructive engagement with experts and practitioners within a country to build a sound evidence base; iv) disaggregation of data to ensure the inclusion of research on children in indigenous communities, in ethnolinguistic groups, with disabilities, in emergency situations, residing in rural and remote areas and in conflict and post-conflict situations; and v) the documenting and scaling up of innovative practices.

Access for vulnerable and disadvantaged children: The recommendations advocate for: i) the use of low-cost, safe and indigenous materials to improve the quality of activities and programme content; ii) activities and programming that are based on culturally salient practices that benefit children; iii) engaging local talent creatively in the service of improving programme content and quality, including grandparents and other family members in the programme scheduling; iv) ensuring a smooth transition from ECCE to primary school through administrative as well as relational strategies; and v) encouraging and supporting play-based rather than overly formal pedagogical approaches.

Holistic ECCE: The recommendations suggest: i) formal, written agreements among actors and agencies; ii) integrating personnel from the various ministries and departments through regular telephone or e-mail contact; iii) ensuring that the nodal or principal ministry or department reaches out to other sectors (education, health care, nutrition, women's and children's affairs, child and family social welfare, protection, etc.); iv) ensuring the inclusion of local administrative representatives in national coordinating mechanisms; v) including parents and family members in national coordinating mechanisms; vi) increasing budget allocations for implementing and monitoring existing policies and frameworks; and vii) strengthening financial commitments for policies on the very young (0–3 years) and their implementation.

Standards, regulations and guidelines, and training and capacity-building: The recommendations seek: i) the establishment and/or enforcement of ECCE standards; ii) the standardizing and regulating of teacher qualifications that are meaningful and based on research evidence; iii) creative formats for training caregivers through media, radio programming, etc.; iv) the establishment of culturally relevant, play-based, age-appropriate curriculum guidelines for educating the very young, including safe, indigenous and low-cost resources for play and stimulation; v) virtual education and the expanded use of information and communications technology; vi) the involvement of experienced research and expert practitioners in in-service and pre-service training initiatives, mentoring and monitoring of caregivers and teachers; vii) incentives and skills training for ECCE caregivers and teachers, particularly in rural and remote areas and in conflict, post-conflict or emergency contexts.

The quality imperative: The recommendations call for increased allocation of financial resources for strengthening family-based or home-based ECCE programmes, including increased engagement with community-based caregivers on creating resources and materials for mother tongue-based instruction and with parent groups in national consultations, especially in defining criteria for quality ECCE.
Introduction

The international community, including governments and development partners, reaffirmed their commitment to achieve Education for All (EFA) by 2015 at the World Education Forum in Dakar, Senegal in April 2000. The Dakar Framework for Action specifies 6 goals and 12 strategies that, if pursued, should bring more children into a classroom and keep them there.

With the close of the 2000–2010 decade, there is a need to assess where Asia and the Pacific as a region and where countries within the region stand regarding their progress towards reaching those goals. Participants in workshops, conferences, e-discussions, policy review exercises and initiatives in the Asia-Pacific region between 2003 and 2007 asked for an end-of-decade review that takes stock of what has been done. Analysing the progress in and the obstacles to attaining the goals will help countries consider other strategies that may likely accelerate the work they are doing to educate all children.

UNESCO and UNICEF orchestrated a thorough examination of the work done and still to be done per goal. Six separate Asia-Pacific End of Decade Notes on Education for All (EDNs) present the product of that analysis for each goal. The EDNs highlight innovative approaches to policy reform and strategy, especially for reducing disparities in education. They also discuss the remaining policy, capacity and finance gaps that need to be overcome to achieve not only the EFA goals but the education-related Millennium Development Goals (MDGs) as well.

The EDNs build on the findings of the Asia-Pacific EFA Mid-Decade Assessment (MDA) (2006–2008). The intent is to maintain the momentum and commitment to the EFA concepts in the region, particularly ‘reaching the unreached in education’ and ‘EFA with equity.’
2

Background on early childhood care and education

Goal 1: Expanding and improving comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children

2.1 Definitions of early childhood care and education

Early childhood refers to the period between birth and 8 years of life. The widely used term ‘early childhood care and education’ (ECCE) refers to a range of processes and mechanisms that sustain and support development during the early years of life: it encompasses education, physical, social and emotional care, intellectual stimulation, health care and nutrition. It also includes the support a family and community need to promote children’s healthy development.

ECCE at the close of the 2000–2010 decade remains as complex a concept as it seemed at the beginning. The following describes the situation at this point and thus the rationale for the direction the Goal 1 EDN has taken:

- Diversity of terminology. Several terms and definitions are used across the Asia-Pacific region to refer to education and care for children younger than 8 years – along with the term ‘ECCE’ that this note uses, these include early childhood care and development (ECCD), early childhood development (ECD), early childhood education (ECE), early childhood education, care and development (ECECD) and early childhood education and development (ECED). Clearly, some consensus on the scope and the holistic nature of ECCE is needed.

- The lack of holistic, integrated services that address all aspects of development during early childhood remains a problem. Sector-based compartmentalization of different aspects of children's services is limiting and can lead to fragmented or inconsistent delivery. This EDN gives examples of good practice of integrated approaches used in the region.

- There is a need for a ‘one-stop’ platform in which decision-makers can look for evidence of regional, national and subnational trends to help them better target their policies. This EDN includes a synthesis of such trends and themes.

- The absence of a quantitative end target makes monitoring the progress towards this goal difficult (UNESCO, 2007a). Mechanisms are required to address and analyse qualitative targets (such as provisions for inclusion, components that include training for holistic interventions, in-depth analyses of skills for caregiving that go beyond training and qualifications). The MDA process also highlighted similar issues, including the need to clarify what the terms ‘comprehensive’, ‘expanding’ and ‘disadvantaged’ mean and how to define parameters and measurable indicators for each.

- Specific gaps and equity issues need to be systematically documented to ensure that the appropriate interventions improve policy-making, implementation and monitoring.

This status update is not just a ‘stocktaking tool’ but a means to look ahead to 2015 and determine as succinctly as possible what could be done differently. Not all the recommendations may be valid...
or relevant for all countries; there may also be unique or context-specific recommendations that need to be developed or strengthened.

This EDN does not provide a national analysis for every country, nor does it analyse information from every country in the region. Rather, it provides an overview of quantitative and qualitative information and presents some common issues, debates and solutions that have emerged in the region.

Information on ECCE was not always easy to obtain due to the fact that regional mechanisms for reporting on indicators are relatively recent; thus, the lack of information presented a major limitation. Where available, information was not always disaggregated and was sometimes represented in the form of one composite indicator rather than as a complex set of indicators that reflected gender, location, class, caste, social context and other factors.

### 2.2 Why ECCE is important for policy-makers to address – Rationale for holistic ECCE

The first eight years of a child’s life is a period of tremendous growth and development. Brain connections multiply exponentially in the first three years, and the potential for ensuring optimal development is very high up to age 8. It is imperative that this true ‘window of opportunity’ is fully used and strengthened to ensure long-term benefits, not just for each individual child’s development but also for the larger community. Research indicates that ECCE can be a powerful instrument for helping to break the cycle of poverty in many countries (Arnold, 2004). ECCE also is widely recognized as a significant pathway to inclusiveness and social equity in education, provided that the programmes are accessible to all sections of a society (Miyahara and Meyers, 2008; Becher and Li, 2010). Children who have participated in high quality ECCE demonstrate considerable gains in social, educational, health and intellectual spheres, distinctively different from those who have not participated in ECCE programmes. Within the framework of education as a human right and not just a family or a school obligation (Hayashikawa, 2008), ECCE can assist governments in fulfilling their commitments (such as through the Convention on the Rights of the Child) to help young children exercise their rights and develop to their full potential.

Figure 1 indicates that among some countries in the region, children who have had prior ECCE experience are more likely to complete primary education. This finding supports Heckman’s repeated contention (2000, 2006; Heckman and Carneiro, 2003) that the highest rate of return is possible when an ECCE intervention targets the very young in a country.

**Figure 1:** ECCE experience and survival rate to the last grade of primary education in selected countries, 2009

![Graph showing ECCE experience and survival rate to the last grade of primary education in selected countries, 2009](image)

3 Issues surrounding the EFA Goal 1 in the region at the time of Dakar 2000: Scope and challenges

3.1 Scope of the goal

Although no specific, measurable targets for any of the six goals were set at the global level, the wording of Goal 1 attempts to provide three directions for ECCE policy in countries: i) the word ‘expanding’ indicates expansion of access, number and types of services and availability of resources for ECCE to all children, regardless of their geographical location, sex, health or nutritional status, disabilities or any discriminatory criteria; ii) ‘improving comprehensive ECCE’ refers to the quality of existing and new programmes and services; iii) ‘especially for the most vulnerable and disadvantaged’ refers to the issue of equity and ensuring that all children, including and especially those children who are living in disadvantaged circumstances, are specifically addressed.

In many countries in the Asia-Pacific region as well as beyond, there is a misconception that ECCE refers only to pre-school or pre-primary education. As noted, ECCE covers (and should address) the whole period from birth up to 8 years of age. Pre-school or pre-primary education can be a major portion of ECCE, but the concept of ECCE is broader than that and also addresses the issues specific to children younger than 3 years as well as the transitional period into a formal primary school system. Thus, in a quality ECCE programme, ‘care’ encapsulates health, nutrition, hygiene, affection, protection, safety and psychosocial support and ‘education’ goes beyond being just “downward extensions of a formal school system” (UNESCO, 2000) to the provision of opportunities to facilitate learning and to guide the process of acquiring new skills, knowledge and values.

The Dakar Framework for Action contains numerous commitments and strategies to which several governments are signatories. Particularly noteworthy is the call for all States to develop or strengthen existing national plans of action by 2002 at the latest. In this framework, emphasis was placed on involving community leaders, parents, learners, non-government organizations (NGOs) and civil society.

An unparalleled set of analyses, based on several indicators and measures that took stock of progress towards the EFA goals since Jomtien in 1990 were presented during the World Forum in Dakar. The EFA 2000 Assessment showed that some progress had been achieved, reaffirming the belief that education for all is a realistic and achievable goal. The report also included candid acknowledgment that progress on ECCE had been uneven and far too slow.

Specifically, the EFA 2000 Assessment noted:

• Of the more than 800 million children younger than 6 years, less than a third benefit from any form of early childhood education.

• Some 113 million children, 60 per cent of whom are girls, have no access to primary schooling.
At that time, these figures were seen as representing an affront to human dignity and denial of the basic right to education. They were viewed as major obstacles to eliminating poverty and attaining sustainable development and were deemed “clearly unacceptable” (UNESCO, 2000).

In an atmosphere of commitment towards education for all and recognition that such education cannot be achieved without investing in very young children, the Dakar Framework for Action set out several recommendations for expanding ECCE coverage. Chief among them were a call for strengthening existing national plans of action, commitment to gender equity, political will and leadership, increased international support (particularly for countries in transition) conflict or post conflict and the establishment and strengthening of national EFA forums.

Specific strategies were included in points 30 and 31 in the Expanded Commentary on the Dakar Framework for Action. Point 30 emphasizes comprehensive, holistic programmes in children’s mother tongue language; it also reiterates the need for child-centred programming that is supported by multiple sectors. Point 31 places the responsibility for focused and planned ECCE programmes within national EFA plans.

### 3.2 Progress and overview of trends in ECCE in the Asia-Pacific region

Now ten years on, how have those recommendations, strategies and other ambitions played out? How many more young children, particularly those in vulnerable and disadvantaged communities, have access to quality ECCE programmes? How has the delivery evolved – how are existing centre-based and family-based programmes functioning? Are existing programmes comprehensive, inclusive of families and communities and supported by multiple sectors and ministries? Are partnerships with parents and families based on an understanding and analyses of practices and established indicators? What budgets have been allocated for ECCE? Who is responsible for ECCE at the national and subnational levels? Are there new or additional provisions for children up to age 3 years?

As already noted, there is limited quantitative data available regarding children from birth to 3 years of age in the region, while information on pre-school-aged children, typically 3–5 years old, is becoming much more available. Information on children younger than 3 years largely relates to non-education issues, such as health and nutrition. The review for this end-of-decade analysis is thus constrained by the greater availability of data on children aged 3–8 years. More critically, the dearth of data on children from birth to 3 years of age is a glaring gap for policy development and planning purposes.

The Education for All Global Monitoring Report 2011 (UNESCO, 2011) describes global trends in progress towards Goal 1. According to the report, progress on both the care and education dimensions in the Asia-Pacific region is mixed. The mortality rates among children younger than 5 years continue to soar in some parts of the region. Gross enrolment ratios in pre-primary education, however, continue to rise across the region.

Monitoring and progress reports from the region indicate that, overall, gross enrolment ratios (GER) in pre-primary education increased in all subregions and in most countries between 2000 and 2009 (figure 2). Worldwide, gross enrolment ratios increased by 12 percentage points or 35 per cent over the same period, and among the Asia-Pacific subregions, the greatest gains were in South and West Asia (22 percentage points or 88 per cent increase).

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It is clear from figure 3 that there was a decline in the gross enrolment ratios for pre-primary education in most Central Asian countries between 1990 and 2000, primarily due to a budget crisis after the fall of the Soviet Union, with the rates climbing in 2009 in many of those countries. In East Asia and the Pacific also, the gross enrolment ratio in pre-primary education have increased between 2000 and 2009 in almost all countries. In particular, the increase was sharpest in two countries of South and West Asia (India and Islamic Republic of Iran), at least according to the available data for the three reference periods.

**Figure 2:** Regional averages of gross enrolment ratios in pre-primary education 2000, 2005 and 2009


**Figure 3:** Gross enrolment ratios in pre-primary education: 1990, 2000 and 2009

Note: Ranked by data for 2009.


The Asia-Pacific region reflects considerable progress and challenges in working towards Goal 1. Based on repeated mention in recent regional conferences (ARNEC, 2009 and 2011a), five broad themes will be analysed as particularly relevant in the region. The following sections provide an overview of progress made over the past decade in five thematic areas and a summary of the significant challenges that remain.
The five themes:
1. Policy-making
2. Access for vulnerable and disadvantaged children (closely related to finance issues)
3. Holistic ECCE (encompassing health and well-being of young children)
4. Standards, regulations and guidelines, and training and capacity-building
5. The quality imperative (defining quality and analysing caregiver – child ratios and interactions, parenting and community involvement, curriculum and approaches, coordination among multiple actors, monitoring and evaluation)

An additional section on disparities due to poverty and limited parental education has also been included to underscore the reality that inclusion and equity continue to persist as challenges that underlie each trend.

3.3 Policy-making for early childhood

A plethora of legal frameworks, initiatives and provisions relating to early childhood exist in countries in the region. Overall, noteworthy progress has been made with regards to developing or implementing a national, multisector policy in both the East Asia and Pacific and the South and West Asia subregions.

East Asia and the Pacific

Several countries (Brunei Darussalam, Cambodia, Indonesia, Lao People’s Democratic Republic, Malaysia, Philippines, Singapore, Thailand, Timor-Leste, Vanuatu and Viet Nam) have a national policy or laws concerning early childhood.

- Brunei Darussalam’s Long-Term Development Plan (2007–2012), also known as Wawasan Brunei 2035, lists early childhood education (ECE) as an investment priority under its Outlined Strategies and Policies for Development from 2007–2017. Brunei’s focus on ECE in the past was the domain of the Ministry of Education (under primary education) and focused largely on education for children aged 5–6 years in pre-school sections attached to government primary schools. The Ministry of Education established an early childhood education unit in 2010, which expanded the focus of ECCE support to children aged 3–6 years.

- In Cambodia, a national ECCD policy was developed and approved in 2008 through inter-ministerial consultations. The Government endorsed the national ECCD policy in 2010. A national plan of action was also developed. An ECCD Technical Committee (with 15 ministries named in the implementing guidelines) was then established.

- In Indonesia, 99 per cent of kindergartens are organized by community parties, while the Government operates only 0.6 per cent of centres nationally. This lack of public investment in early childhood may account for huge variations in the net enrolment rates across provinces, considering many poor families cannot afford the relatively high costs associated with private facilities. Article 28 of Law 20, 2003, made some provision for underserved populations of young children. Because private centres offer ECCE regularly, the principal strategy appears to be the delivery of services to these areas through integration with health services (posyandu) and religious contexts (mosques, churches and viharas). The overall strategy is the guidance of early childhood-related initiatives through advocacy and community involvement rather than through direct policy formulation. In the document Education for All Mid-Decade Assessment Country Report (Ministry of National Education, Indonesia, 2007), the directorate in charge (PAUDNI) made a series of commitments in line with the Ministry of Education’s strategic plan 2004–2009 that centred...
on the following three agendas: i) ensuring improved ECE access and equity; ii) improving quality assurance of ECE services; and iii) strengthening governance and accountability of early childhood services.

- In Lao PDR, Articles 14 and 15 of the Education Law of 2007 refer to early childhood education or ECE, dividing ECE into two subcomponents: crèches and kindergartens. Crèches receive infants from the age of 3 months and children up to age 3 years. Kindergartens provide services for children aged 3–6 years (the age for entering primary education) (UNESCO-IBE, 2010). Some strategies for efficient pre-primary and primary education include an enhanced ECE school readiness curriculum as part of a comprehensive inclusive education curriculum, and implementing village and community-based ECE programmes to enhance school readiness. Community caregivers were to be trained to deliver the programme in existing community locations, targeting 5-year-old children in villages with limited primary school classes (only grades 1–2 or 1–3) but no pre-primary classrooms. Despite human resource and other constraints, the approach provides school readiness programmes for children in very remote, poor communities.

- In Malaysia, the Child Care Centre Act of 1984, amended in 2007, ensures quality of early childhood care and education programming. Act 550, the National Education Act, formally integrated pre-primary education into the educational system. A formal ECCE curriculum was introduced in 2003 as well (Ministry of Education, Malaysia, 2009).

**Box 1: School readiness reaches out to remote areas in Malaysia**

ECCE in Malaysia is broadly divided into two groups: 0–4 years old and 4–6 years old. ECCE for the older group comes under the responsibility of the Ministry of Education, the Ministry of Rural and Regional Development (MRRD) and the Department of National Unity and Integration. ECCE for the younger group is the responsibility of the Ministry of Women, Family and Community Development and the MRRD. The MRRD is regarded as a pioneer in setting up pre-schools in Malaysia (beginning in the early 1970s), known as the KEMAS pre-school, which are located in rural and suburban areas at the request of a local community.

*Source:* Ng, 2010.

- In Philippines, the landmark Republic Act 8980 (ECCD Law) promulgated a comprehensive, national, multisector policy on early childhood care and development. National debate is ongoing regarding government responsibility versus public-private partnerships, oversight for the implementation of the law and maintaining quality, and the transition from home-based ECCE to primary school. To meet the EFA 2015 goals, the Philippines Department of Education made pre-school education (kindergarten) mandatory for 5-year-old children in June 2011.

- In Singapore, the Child Care Centres Act and the Child Care Centre Regulations of 1988 were established to control, license and regulate child-care centres for children aged 18 months to 7 years. Child-care centres are licensed by the Ministry of Community, Youth and Sports, while kindergartens register with the Ministry of Education (UNESCO-IBE, 2006a). A recent noteworthy effort is the Singapore Pre-school Accreditation Framework (SPARK) which seeks to raise the quality of pre-schools in Singapore. The initiative was first implemented in January 2011.

- In Thailand, the Council of Ministers, headed by the prime minister, enacted a Long-Term Policy and Strategy for Early Childhood Care and Development in May 2007. Based on that policy, early childhood development activities are provided to two age groups: 0–3 years old and 3–5 years. The complementing Long-Term Policy and Strategy for Early Childhood Care and Development (0–5 Age Group) 2007–2016 (Ministry of Education, Thailand, 2008b) provides useful and much-needed guidance on ECCD services, focusing on the survival, security, protection and all-round balanced development of children.

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• In Timor-Leste, an ECCE policy will be finalized by the end of 2011 to ensure the incorporation of at least one to two years of pre-school into the education system. A significant challenge is the application of a ‘mother tongue-based’ policy because the three primary indigenous languages are oral languages. The National Education Policy 2007–2012 (Ministry of Education, Timor-Leste, 2008) states that “access to pre-school education is understood as a vital component of basic education”. In 2007–2008, there were 143 pre-primary schools, a dramatic increase of 150 per cent from the 57 pre-primary schools registered in 2002. A shortage of qualified caregivers/teachers remains the more pressing problem in ECCE; the Government intends to invest in human and material resources in its five-year investment plan (UNESCO Jakarta, 2009).

• In Vanuatu, the Government now has an official policy for ECCE. A primary focus of this policy is quality, both of teachers and of the learning process. Initiatives for improving teacher quality include:
  - support qualifications training of unqualified ECCE teachers
  - improve selection criteria for entry to ECCE education training institutions
  - develop National ECCE curriculum that supports ECD
  - collaborate with the teachers in-service training unit to upgrade ECCE teachers’ skills.

Quality of learning is primarily supported by efforts towards developing a national curriculum that will promote a holistic approach to child development and children’s learning needs. A field-based training for caregivers has been developed that has the approval of the government. A team is currently working on the Vanuatu Early Learning and Development Standards, which will be used as a guide to write the Vanuatu national kindergarten curriculum, which will be the only recognized curriculum (Ministry of Education, Vanuatu, 2010).

• In Viet Nam, the Education Law 2005 defines early childhood education as a part of the national educational system. The Early Childhood Education Department comes under the charge of the Ministry of Education and Training and is the lead agency responsible for early childhood programmes, standards, strategies and guidelines (UNESCO-IBE, 2006b). A national project on early childhood education development (2006–2015) prioritizes the construction of adequately equipped kindergarten schools and classes in remote and ethnic minority areas.

Central Asia

• In Mongolia, the Integrated Early Childhood Development Policy has made progress on several fronts. A policy review initiated and guided jointly by UNESCO and UNICEF and conducted in eight districts revealed several interesting aspects of the national, multisector early childhood policy. The Child Rights Protection Act of Mongolia deals with social welfare, social insurance and grants for young children (UNESCO and UNICEF, 2011). The Law of Social Welfare provides conditional financial aid to underserved groups. These efforts have helped steer children from marginalized groups and children with disabilities into kindergarten classrooms. The Social Welfare Fund, with programmes that subsidize meals for children, has created positive conditions for inclusion.

South Asia

In South Asia, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka each have a policy or policy initiatives, guidelines and frameworks in place.

• In Bangladesh, the National Education Policy includes early childhood provisions, with three ministries involved in providing oversight of related services, particularly in pre-primary education. There is an operational Policy Framework for Pre-primary Education that is based on the national plan of action with an emphasis on a holistic, multi-sector early childhood policy. There is also a policy proposal that covers the full spectrum of 0–8 years and proposes a coordinating mechanism among ministries.
• In Bhutan, a draft ECCD policy and guidelines have been developed and endorsed by the Ministry of Education. Several agencies provide oversight of ECCE, including a Steering Committee for ECCD, the Ministry of Health, the Royal University of Bhutan and the Royal Education Council (ARNEC, 2010a).

• In India, despite increasing population and inflation, efforts are underway to provide holistic early childhood services. India is home to the Integrated Child Development Services programme, a large and relatively established system of holistic early childhood development initiated in 1975 that overcame several difficulties, including the fragmentation of responsibilities into two ministries (the Ministry of Women and Child Development and the Ministry of Education). Recently, the 86th amendment to article 45 of the Indian Constitution modified wording to indicate that the State shall “endeavour to provide early childhood care and education for all children until they complete 6 years of age” (Government of India, 2002). The inclusion of the word ‘endeavour’ initially caused concern among some proponents of early childhood care in the country (NCERT, 2006) who saw it as a lightening of governmental responsibility and a pushing of the full burden of caring for the very young onto parents and the community. Arguments in favour of the amendment included the need for multisector responsibility and increased public-private partnerships as the most effective mechanisms for providing ECCE.

• In the Maldives, pre-primary education features prominently in the overall Education Policy, and a 2009 EFA report notes that “ECCD was included in the Fifth and Sixth NDPs, the Education Sector Master Plan (1995–2005) and has a clear focus in the Seventh NDP” (UNESCO Bangkok, 2009).

• In Nepal, an ECD Strategic Plan was developed in 2004 and implementing guidelines followed in 2005 by the Ministry of Education and Sports. The Department of Education (DOE) is active in advancing the cause of ECD as part of its Tenth Five-Year Plan, in both community-based and school-affiliated ECD programmes (such as the Shishu Kaksha programmes). The number of ECD centres expanded, from 5,023 in 2004 to more than 17,000 by the end of 2007 (UNESCO and UNICEF, 2008). The DOE also concentrates on improving the quality of ECD centres, training and curriculum. Specific difficulties persist in the quality (training issues) and monitoring of programmes. The Government has a policy to provide full support for establishing and operating ECD centres in disadvantaged communities. The policy categorically mentions that disadvantaged populations, including ethnic minorities, women, Madhesis, marginalized groups and Dalits, are to be identified and children in those groups are to have ensured access to ECCD services.

• In Pakistan, the development of standards and guidelines for better quality education in the government-run katchi programmes has advanced the cause of early childhood initiatives in the country. Problems persist, however, in the form of gender inequalities, access to services in remote areas and lack of uniformity in the quality of services.

• In Sri Lanka, a National Policy on Early Childhood Care and Development was introduced and approved in 2004 that emphasizes quality of existing programmes and better coordination between national and provincial representatives. A National ECCD Act has been drafted. Home-based ECCD services are provided in collaboration with international NGOs, private organizations, corporations, UN agencies and independent consultants.

Despite these commendable initiatives across the region, the reports reviewed for this analysis point to differences stemming from diverse definitions of early childhood activities. For example, the terms ECD, ECCD, ECCE, ECE, pre-primary education etc. focus differentially on care, development and education of young children and reflect vast disparities in target ages of children. In some countries, early childhood policy covers children aged 0–3 years, while in others it is aged 3–5 years. These differences in definitions and target ages frequently translate into fragmented entry points, and the fallout usually negatively impacts underserved and disadvantaged contexts.

Additionally, gaps in national-regional coordinating mechanisms, absence of ownership in policy efforts and financial constraints have been noted. Experts are calling for enhanced monitoring and evaluation of ECCE policies and programmes, greater national-regional cooperation and increased budget allocations for specific programmes and good governance, including ensuring the participation of all parties in the process (Rao and Sun, 2010; Britto and Ravens, 2009).

In summary, despite considerable progress with increases in the visibility of issues relating to early childhood on the national scene, at least two regional data sources (ARNEC, 2009–2010; UNESCO, 2006) point to gaps in the implementing of these policies. Several countries in the region are still in the process of developing or refining their policy guidelines and frameworks for addressing the needs of the most vulnerable and disadvantaged children.
4.1 Addressing wealth inequities through ECCE: Access for vulnerable and disadvantaged children

Recent research and a set of articles published by The Lancet (2007 and 2011) confirmed the idea that young children benefit greatly from participation in quality ECCE programmes (Engle, et al., 2007 and 2011). This was corroborated by studies undertaken in Bangladesh (Aboud, 2006), Cambodia (Rao and Pearson, 2007; Rao et al., 2010), Nepal (CERID, 2006) and Myanmar (Lwin, Nwe Oo and Arnold, 2004). The findings are particularly marked for children from economically deprived backgrounds who attended pre-school programmes and who were found to have far better developmental outcomes than those who did not (Rao and Sun, 2010).

A critical question in relation to the increased access in the Asia-Pacific region, therefore relates to equity: Is access to ECCE services available to children from marginalized, vulnerable and disadvantaged communities?

The Education for All Global Monitoring Report 2007 (UNESCO, 2006) highlighted three significant factors of risk in access to holistic ECCE services: i) residence in rural neighbourhoods, ii) gender (being a girl) and iii) poverty. More recently, thanks to more sophisticated analyses and awareness, there is an increased appreciation of parents’ education level and poverty as more formidable obstacles that cut across geographical location, age or gender. In some countries, children who come from marginalized groups and lower castes (such as in India and Nepal) are left out of quality ECCE programmes. As figure 4 illustrates, children from wealthier families participate more in ECCE programmes than children in the lowest quintiles of wealth.

Figure 4: Percentage of 3- and 4-year-olds attending early learning programmes, by wealth in selected countries, 2005–2007

Note: Data are for the most recent year available during the period specified.
Wealth quintiles have served as a useful tool for disaggregation of data so that efforts can be focused on those communities that are most underserved. Figure 5 shows that in Mongolia, children from the poorest wealth quintiles are the ones that are least likely to attend some sort of organized ECCE programme. When data such as these are obtained, analyses can then focus on what needs to be done to get the poorest into ECCE – such as targeted subsidies, including food or financial incentives or revised service delivery platforms.

**Figure 5**: Proportion of children aged 36–59 months in Mongolia attending ECCE, by wealth quintile

![Proportion of children aged 36–59 months in Mongolia attending ECCE, by wealth quintile](image)

**Source**: National Statistics Office of Mongolia, 2005.

A solid step in addressing the challenge of inequities in access to good-quality ECCE is obtaining reliable evidence on the disadvantaged communities. For example, the Nepal Department of Education is engaged in mapping access to ECCE services in remote areas (tables 1 and 2).

**Table 1**: Distribution of children enrolled in ECCE centres, by geographical region and type of programme in Nepal, 2010

<table>
<thead>
<tr>
<th>Geographical region</th>
<th>Community-based</th>
<th>School-based</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mountain</td>
<td>2,362 (92.6%)</td>
<td>189 (7.4%)</td>
<td>2,551</td>
</tr>
<tr>
<td>Hill</td>
<td>11,119 (88.7%)</td>
<td>1,420 (11.3%)</td>
<td>12,539</td>
</tr>
<tr>
<td>Kathmandu Valley</td>
<td>635 (37.1%)</td>
<td>1,075 (62.9%)</td>
<td>1,710</td>
</tr>
<tr>
<td>Terai</td>
<td>10,657 (86.7%)</td>
<td>1,632 (13.3%)</td>
<td>12,289</td>
</tr>
<tr>
<td>Total</td>
<td>24,773 (85.2%)</td>
<td>4,316 (14.8%)</td>
<td>29,089</td>
</tr>
</tbody>
</table>

**Source**: Department of Education, Nepal, 2009a.

**Table 2**: Percentage of Dalit and Janajati children with access to ECCE services in Nepal, by sex, 2010

<table>
<thead>
<tr>
<th>Children</th>
<th>Total No. of children</th>
<th>No. of Dalit children</th>
<th>No. of Janajati children</th>
<th>Percentage of Dalit children enrolled in ECD</th>
<th>Percentage of Janajati children enrolled in ECD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls</td>
<td>488,900</td>
<td>90,935</td>
<td>193,604</td>
<td>18.6</td>
<td>39.6</td>
</tr>
<tr>
<td>Boys</td>
<td>529,643</td>
<td>91,628</td>
<td>205,501</td>
<td>17.3</td>
<td>38.8</td>
</tr>
<tr>
<td>Total</td>
<td>1,018,543</td>
<td>182,563</td>
<td>399,105</td>
<td>17.9</td>
<td>39.1</td>
</tr>
</tbody>
</table>

**Note**: Dalit and Janjati are marginalized groups in Nepal.

Obtaining data on the availability of ECCE enrolment, disaggregated by provinces or regions, in remote and disadvantaged areas can be particularly beneficial in targeting communities most at risk and can be a powerful advocacy tool for both raising awareness and resources from donor communities.

### 4.2 Addressing gender inequities through ECCE

Some ECCE experts argue that in early childhood, unlike in later years of education, gender does not seem to be a significantly limiting factor to access and participate in ECCE programmes (Rao and Sun, 2010). However, in going beyond sex-disaggregated data and looking at the qualitative mechanisms underlying role-related and cultural expectations, certain gender inequities can persist right from infancy through the lifespan (UNESCO, 2007b). Gender-based equality issues also exist in the actual content of ECCE programmes and services as well as in other aspects, such as the balance of trained male and female teachers. “ECCD interventions can promote gender equity by compensating for gender biases in nutrition, health care or stimulation that may occur in the home” (Arnold, 2004:10). A study in Nepal (Bartlett et al., 2003) indicated that participation in ECCE was closely related to retention rates of young girls in the early grades of primary school among the Dalits (a widely marginalized community in South Asia).

Figure 6 illustrates that in pre-primary education for some countries, gender disparities are to the disadvantage of boys, with greater proportions of girls enrolled. In fact, in several countries, such as the Islamic Republic of Iran, New Zealand and Mongolia, disparities in ECCE enrolment grew worse against boys from 2000 to 2009. In Bhutan, the ratio of the enrolment ratios of girls to boys was almost within the gender parity band, but there was a shift over time, with a far smaller proportion of boys enrolling than girls. In a few countries, such as Cook Islands and Marshall Islands, the trend has been in the opposite direction, with a smaller proportion of girls enrolling than boys.

**Figure 6:** Gender parity index for the gross enrolment ratios in pre-primary education, 2000 and 2009

![Gender parity index](image)

**Source:** Statistical Annex, UIS, 2011.

However, a caveat is in order: Overall enrolment in pre-primary education itself is limited. These trends have to be interpreted with caution, and policy should concentrate on increasing access and the provision of ECCE for both sexes.

Additionally, the national data frequently conceal local disparities and do not reflect the real picture in poor, remote or rural areas. The numbers also do not reflect differences in treatment and
socialization of girls and boys, such as censure by teachers of what is considered atypical play (such as boys playing with dolls) and whether girls and boys have equal access to toys and instructional materials.

**Box 2: Missing girls in India: Gender inequities begin even before birth**

A recent report from India describes the shocking rate of increase in female feticide and sex-selective abortions. “Between the 2001 and 2011 censuses, more than twice the number of Indian districts (local administrative areas) showed declines in the child sex ratio as districts with no change or increases. … Selective abortions of girls totaled about 4.2–12.1 million from 1980 to 2010, with a greater rate of increase in the 1990s than in the 2000s. … Selective abortion of girls, especially for pregnancies after a firstborn girl, has increased substantially in India. Most of India’s population now lives in states where selective abortion of girls is common.” The study also highlighted such practices even among the upper-income and educated segments of the population.

*Source:* Jha et al., 2011: 1921.

Issues pertaining to teachers do not always feature in discussions about gender and ECCE. A recent article noted that there is a major paucity of data and information regarding the qualifications of ECCE staff (Kim and Umayahara, 2010). It follows from this argument that it is critical to also inquire into the availability of training opportunities for teachers of both sexes in ECCE. In many countries in South Asia (see the Statistical Annex, UIS), female teachers outnumber male teachers.

For example, in Pakistan, trained female teachers outnumber trained male teachers in ECCE in all provinces; in some provinces (figure 7), the disparities are huge. Although it may be good to invest in the training of female teachers, there is the potential impact on communities and children from the lack of male role models and imbalances in professional representation as well as in attitudes towards ECCE as a profession. There are gender stereotypes associated with the profession, and ECCE may be perceived as a predominantly ‘feminine’ occupation because it involves nurturing and caregiving – a very discriminating perspective that presumes males are incapable of such skills. Alternatively, pay differentials also may propel men to look for occupations in other sectors. For a more robust analysis of gender issues in education as a whole, see the EDN on gender.

**Figure 7: Percentage of trained teachers in ECCE in Pakistan, 2005–2006**

![Graph showing percentage of trained teachers in ECCE in Pakistan, 2005–2006](Source: Ministry of Education, Pakistan, 2006.)
4.3 Addressing language inequities in ethnolinguistic and indigenous communities: The value of multilingual education

Language and the provision of mother tongue-based ECCE programmes are important issues in the Asia-Pacific region. Language of choice in programmes and services has a significant impact on early learning. Although extensive research (Young, 2002; Nettle and Romaine, 2000; Geary and Pan, 2003) exists on using a child’s mother tongue in early learning, in several countries in the region, the national or official language continues to be the medium of instruction. In place of models that focus only on economic goals for literacy, Young proposes an alternative model that develops the critical thinking skills of students, builds cognitive and affective domains and values their local language, experiences and culture. “Thus, by first establishing the empowering role of language in the social system of the students’ community, groundwork is laid for the expansion of the students’ identity to include their role in the larger national and international contexts.” (Young, 2002: 221)

In many countries, there is a perception that using a native or minority language may hinder economic progress. There is also the worry that children will be left behind to suffer relative economic hardship because of their perceived inability to engage more successfully in business or economic activities (Geary and Pan, 2003). One response is bilingual education, representing a middle way, that “supplies the advantages of a strong local identity and a global communication network at almost no cost, since children’s capacity for spontaneous language learning is almost limitless” (Nettle and Romaine, 2000: 173). Bilingual programming in ECCE offers an opportunity to empower communities for local as well as global challenges. Mother tongue-based education is thus important in building bridges and empowering communities (Kosonen and Young, 2009).

Research has also highlighted the value of ECCE as a crucial pathway in addressing children in disadvantaged circumstances, including in lower caste groups, such as the Dalits in Nepal (Bartlett et al., 2003), children in mountainous communities and those in ethnolinguistic communities and rural areas. In these communities, experiences in the region point to the need for encouraging young students to consider careers in ECCE; for example, to prepare teachers for ECCE programmes in Nepal, the Government introduced early childhood development as an optional subject in the secondary school curriculum (grades 9 and 10). Graduates with early childhood development as their optional subject are given priority to work as ECCE teachers in the future. In these communities, ECCE provides a double dividend: a pathway towards the holistic development of young children and the empowerment of youth in the community.

Figure 8 highlights data from the pre-school component of action research in September 2008 in Viet Nam. Two cohorts had completed their schooling in 2009 and 2010. The first cohort of students entered grade 1 of primary school in September 2009 and completed grade 1 in May 2010. Language assessments for pre-school students were carried out in three provinces at the beginning and end of each school year. A comprehensive assessment of grade 1 students was undertaken in May 2010 to measure the learning outcomes in the mother tongue, Vietnamese and mathematics as well as non-academic outcomes (life skills and learning attitudes). The results indicated superior performance by the cohort of students who had received mother-tongue based ECCE in key areas of cognitive development.
**Figure 8:** Pre-school assessment: Comparison between mother tongue-based education and non-mother tongue-based education students in Viet Nam, 2010 (second cohort of students)

<table>
<thead>
<tr>
<th>Activity</th>
<th>MTBE</th>
<th>Non-MTBE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Listening comprehension</td>
<td>17</td>
<td>12</td>
</tr>
<tr>
<td>Knowing name and function</td>
<td>16</td>
<td>12</td>
</tr>
<tr>
<td>Implementing commands</td>
<td>14</td>
<td>9</td>
</tr>
<tr>
<td>Knowing names of people and animals</td>
<td>14</td>
<td>11</td>
</tr>
<tr>
<td>Arranging pictures based on stories</td>
<td>13</td>
<td>9</td>
</tr>
</tbody>
</table>

**Note:** MTBE = mother tongue-based education

**Source:** MOET, Viet Nam and UNICEF Viet Nam, 2011. Available at: http://www.unicef.org/vietnam/brief_TA.pdf

### 4.4 Holistic ECCE addresses the health and well-being of young children and coordination among sectors

Several indicators can be used to assess the health and well-being of young children. Two of the most widely used and preferred indicators are measures of stunting and under-5 mortality rates. Under-5 mortality rates are influenced by nutrition, early care, immunization, breastfeeding and gender issues in nurturing practices. On average, under-5 mortality rates have declined tremendously in the Asia-Pacific region over the past decade.

**Box 3: The DBNA/UNESCO Multilingual Education Project in Malaysia**

In 2006, the Dayak Bidayuh National Organization (DBNA) collaborated with UNESCO to undertake a multilingual education (MLE) pilot project in Malaysia. The project targeted Bidayuh children with a firm foundation for and a head start in their education by beginning their learning experience in their mother tongue, then gradually introducing instruction in Malaysian and English. In January 2007, seven pilot Bidayuh-language playschools were launched, spread throughout the five Bidayuh language regions. In January 2009, five pilot MLE kindergartens (and one supplementary Bidayuh kindergarten programme) were launched in the same villages that were already hosting the pilot playschools. In January 2010, three playschools were started in new villages. The Bidayuh MLE programme for pre-primary education serves children in two stages of development:

**Stage 1:** MLE Playschool – 3- to 4-year-old children conducted entirely in the local Bidayuh language. Children who are 3 years old can enroll and then they repeat the whole curriculum the following year.

**Stage 2:** MLE Kindergarten and Year 1 – 5-year-old children, ideally those who participated in the MLE playschool. A curriculum with daily activities for all subjects was developed for this programme in the Bidayuh language. Malaysian is then orally introduced through a variety of activities and games. In addition, a supplementary Bidayuh programme is offered for one hour after a full session of government pre-school (prasekolah). It is all in the Bidayuh language (specifically, Bukar-Sadung) and focuses on reading and writing in Bidayuh. A stage 3 for 2- to 6-year olds is being developed.

**Source:** Joyik et al., 2011.
Figure 9 indicates that although overall rates have declined, there are still unacceptably high under-5 mortality rates in South Asia. These rates remain significantly higher than those of the other subregions of Asia-Pacific as well as the world average. Even in the regions that have shown progress, several instructive questions need to be asked: Do the children who survive to their fifth birthday exhibit optimal health and well-being? Is their nutritional status satisfactory? Do they receive recommended immunizations on time? Do they get adequate stimulation and developmental opportunities? How can we ensure that all children reach their fifth birthday with adequate nutrition and care? Desired educational and other outcomes cannot be achieved if problems such as these are not jointly addressed by all relevant agencies.

**Figure 9: Under-5 mortality rate, global and regional averages, 1990–2009**

Note: The UNICEF regional classification is used.


Maternal education has been identified as an important factor in reducing child mortality. “In the Philippines, Rwanda and Senegal, under-5 mortality rates are at least three times higher among children of mothers with no education than among those having mothers with some secondary education. … women’s empowerment through education saves lives. The more educated women are, the more likely they are to have better access to reproductive health information, family planning and antenatal care and to delay childbirth, have fewer children and provide better nutrition to their children, all of which reduce the risk of child mortality” (Cohen, 2009; Lewis and Lockheed, 2008; Singh-Manoux et al., 2008, cited in UNESCO 2011: 30).

**Figure 10: Under-5 mortality rate and regional weighted average, by mother’s education, 2004–2009**

Note: Regional averages are calculated using countries with data for the most recent year available in each region (four in South and West Asia and 25 in sub-Saharan Africa) and weighted by the population younger than 5 years.

Stunting, or low height for age, is one of several indicators in the analysis of healthy child development. As shown in figure 11, South Asia has the highest rate of stunting among all subregions, with an alarmingly large proportion of young children affected. According to UNICEF (2010c: 16), “In the developing world, children living in rural areas are almost 1.5 times as likely to be stunted as those in urban areas. Children in the poorest 20 per cent of households are twice as likely to be stunted as children in the richest 20 per cent of households. Children younger than 2 years are most vulnerable to stunting, the effects of which are then largely irreversible.”

**Figure 11: Percentage of children younger than 5 years who are stunted, by region, 2009**

<table>
<thead>
<tr>
<th>Region</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-Saharan Africa</td>
<td>42%</td>
</tr>
<tr>
<td>Middle East and North Africa</td>
<td>32%</td>
</tr>
<tr>
<td>South Asia</td>
<td>48%</td>
</tr>
<tr>
<td>East Asia and the Pacific</td>
<td>22%</td>
</tr>
<tr>
<td>Latin America and the Caribbean</td>
<td>14%</td>
</tr>
<tr>
<td>World</td>
<td>34%</td>
</tr>
</tbody>
</table>

**Source:** WHO data, cited in UNICEF, 2009.

Stimulation and nutrition together can positively affect children’s development and conversely, their absence can seriously impair development. Unless urgent measures are put in place to combat this scourge, it will not be possible to achieve the EFA goals as well as the Millennium Development Goals. Holistic early childhood care and education significantly impacts and positively influences long-term educational outcomes for young children. Figure 12 indicates that children from the poorest contexts are most likely to be malnourished and underweight.

**Figure 12: Percentage of children 0–59 months old who are underweight, by household wealth quintile, 2003-2009**

<table>
<thead>
<tr>
<th>Region</th>
<th>Richest 20%</th>
<th>Fourth 20%</th>
<th>Middle</th>
<th>Second 20%</th>
<th>Poorest 20%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-Saharan Africa</td>
<td>56%</td>
<td>49%</td>
<td>40%</td>
<td>25%</td>
<td>15%</td>
</tr>
<tr>
<td>Developing countries</td>
<td>56%</td>
<td>49%</td>
<td>40%</td>
<td>25%</td>
<td>15%</td>
</tr>
<tr>
<td>Middle East And North Africa</td>
<td>34%</td>
<td>29%</td>
<td>24%</td>
<td>20%</td>
<td>13%</td>
</tr>
</tbody>
</table>

**Note:** Analysis is based on a subset of 61 countries with household wealth quintile information, covering 52 per cent of the under-5 population in the developing world. Prevalence estimates are calculated according to WHO Child Growth Standards, 2003–2009. CEE/CIS, East Asia and the Pacific, and Latin America and the Caribbean are not included due to lack of data coverage.

Children living in poverty face a double jeopardy; not only are they at a much higher risk for stunting and malnutrition but they are also much less likely to receive educational or developmental opportunities in their early years. Stunting and absolute poverty are both indicators that are closely associated with poor cognitive and educational performance in children (Grantham-MacGregor et al., 2007). Unless measures are put in place to combat such health threats to young children, within the context of holistic ECCE efforts, desired educational outcomes are unlikely to be achieved.

Many innovative efforts to address ECCE issues, including lack of immunization, poor nutritional status and fractured well-being, are currently underway in the region.

- In Philippines, for example, the Healthy Start programme administered by the Consuelo Foundation involves a home-visiting scheme. Pregnant women and new mothers enrol in the programme, which provides ‘advisors’ who visit them in the first three years of a child’s life. The programme focuses on increasing positive parenting behaviour and decreasing environmental risk through: i) increased parental knowledge of child development; ii) the provision of games and activities to support healthy development and learning; iii) strengthened relationships between family members; and iv) increased access to social, medical and employment services. Families with children of the same age (within a three-month age bracket) are grouped during pregnancy and in the first two years of a child’s life, home visits are conducted two to three times per month. In the third year of a child’s life, the visits are reduced to one to two times per month (ARNEC, 2011b).

- In Malaysia, child health services policies (per Article 24 of the Convention on the Rights of the Child) promote programmes including routine visits and medical examinations for children, immunizations, nutritional status and growth monitoring and evaluation, and health education for parents. The National Nutrition Policy, formulated in 2003, promotes programmes that include breastfeeding campaigns and promoting healthy and appropriate diets and lifestyles. Several other countries in the Asia-Pacific region also promote such integrated programmes. Also, immunizations, nutritional assessments and health education are provided during child health clinic sessions whenever necessary. The Child Care Centre Act ensures minimum health standards in day-care centres.

In the Asia-Pacific region, several countries are moving towards integrated and coordinated early childhood services.

- In Indonesia, for example, there are services to improve the health and nutrition of children younger than 5 years. ECCE is administered primarily through community health centres (puskesmas) or through the integrated health services centres (posyandu). A posyandu is an activity centre “from the community, for the community and by the community, with supervision from medical personnel”. Despite the number of posyandu “increasing over the period 2004–2006 ... it appears that the total number of children accessing these services has fallen, from 10.8 million in 2004 to 6.6 million in 2006” (Ministry of National Education, Indonesia, 2007: 44). Clearly, access to integrated early childhood services presents a continuing problem.

Similarly, in Lao PDR, coordination exists between the Ministry of Education and the Mother and Child Health Centres (under the Ministry of Health) to promote breastfeeding and improve nutrition and primary health care for young children in ethnolinguistic communities, and in rural and remote areas. Unfortunately, the links between health care practices and ECCE that exist in urban areas do not always extend to rural areas, where children are more likely to be undernourished and lack access to quality medical facilities, which can seriously hinder their development.

- In Myanmar, it is not immediately clear from education reports whether health links with ECCD have been established. There are projects through the Integrated Management of Mother and Child Illness scheme and the country EFA mid-decade assessment report (Ministry of Education, Myanmar, 2007) contains information about various health programmes. Protein energy malnutrition and other micronutrient deficiencies have spurred government intervention targeted specifically towards pregnant women and children younger than 5 years. Growth monitoring for children younger than 3 years is also a major emphasis of the initiative.
In Thailand, early integrated programming provides a range of services, including immunizations, physical health check-ups, follow-ups on cognitive development and nutritional supplementation. Parental education on child care and Mommy’s and Baby’s Health Diaries are provided at the first time of registration with a public health worker. Data from these health diaries are shared with teachers and assist them in the monitoring of children’s health after they enter school. Public health workers also visit child-care centres and schools to provide physical health check-ups at least twice a year. Public health workers also regularly visit families, especially those with young children. Attention is given to the mothers’ health during the prenatal and postnatal periods. Children’s growth and development are constantly monitored, and monitoring continues until the time for school enrolment.

In South Asia, there are a few examples of integrated or holistic programmes.

• In Bangladesh, relevant ministries and several NGOs have embraced programmes for children up to 7 years; for instance, the Integrated Community Development project in the Chittagong Hill Tracts provides health care and nutrition-related support (Ministry of Primary and Mass Education, Bangladesh, 2008).

• In India, the Integrated Child Development Service is the largest sponsored programme providing ECCE. Included in the service are supplementary nutrition and health check-ups for pregnant and lactating mothers. A growth chart is maintained for all children to assess malnourishment. There is a monthly village health day for check-ups, immunizations and discussion on health care and nutrition. Despite its vision for delivery of holistic ECCE, however, the programme continues to encounter challenges, such as disparities in access, quality of services, inadequate training of staff, lack of monitoring and huge gaps, particularly in delivering services to very young children. Successful interventions from a few states in India (Karnataka, Tamil Nadu) and innovations from other states (Bihar, Tamil Nadu) suggest that the potential for positive impact exists (World Bank, 2005).

**Box 4: Prenatal care to ensure quality ECCD: An example in India**

The state of maternal, newborn and child health in India is a matter of global importance. More than 1 million children in the country do not survive their first month of life – one third of the world’s total number of neonatal deaths. Both maternal and neonatal mortality have been diminishing far too slowly to achieve the fourth and fifth Millennium Development Goals. To contend with the limited progress, the Government in 2005 launched Janani Suraksha Yojana (JSY), a national conditional cash transfer programme aimed at creating incentives for women of low socio-economic status to give birth in health facilities.

Preliminary evaluations indicate that there has been a marked increase of in-facility births and a small reduction in neonatal deaths. However, the poorest and least educated women have not always been well targeted. The more serious problem is that birth centres are chronically understaffed and do not meet basic quality standards. Instances of corruption have also been reported. For all its problems, JSY is a serious attempt to address one of the most pressing human development issues facing India.

**Sources:** Lim et al., 2010 and Paul, 2010, cited in UNESCO, 2011: 38.

• In Sri Lanka, various organizations and charities are implementing ECCD projects with some links to the health sector but, because of the lack of a national policy and guidelines, the quality of services varies greatly. Children up to 5 years are screened by public health midwives during home visits and at pre-schools. Sri Lanka has implemented the home-based ECCD programmes to reduce maternal mortality, infant mortality and the incidence of stunting among children.
Immunizations

In East Asia and the Pacific, some notable successes have been achieved in immunizations in recent years – measles deaths have fallen dramatically while tetanus among newborns, a disease grossly underreported, remains endemic in only seven countries. In recent years, several countries, including Cambodia, Lao PDR and Papua New Guinea, have introduced new vaccines, such as the Haemophilus influenzae B vaccine to protect children against bacterial pneumonia and meningitis, a common killer of young children. In South Asia, some countries have been very successful in addressing issues of immunization, so there is good work to be built on. Overall, immunization targets are being achieved and maintained in Bhutan, Maldives and Sri Lanka.

Although most countries in South Asia achieved more than 80 per cent immunization coverage in the early 1990s, later these efforts began to slide as time wore on, especially in the three most populous countries – Bangladesh, India and Pakistan. Routine immunization remains low in several areas due to lack of planning at the district level, lack of funds to conduct outreach and poor supervision and monitoring systems to track progress (UNICEF, 2010c).

In countries where health targets are not yet achieved, the integration of services is still very new and requires a different kind of planning and organizing across ministries and departments in order for programmes to be successful. For example, due to the success of immunization programmes, the number of deaths from vaccine-preventable diseases has visibly decreased across the region. Some governments have shifted their priority focus, and thus investment in immunization programmes has stagnated. Families may now no longer see the value in immunizing their children or having routine health and developmental screenings. It is imperative that governments continue to be vigilant and monitor integrated delivery processes as well as the health and developmental outcomes in their ECCE initiatives.

Summary

The issue of holistic ECCE is closely tied to the issue of coordination and governance in the region. Some countries have been successful in integrating the delivery of ECCE through coordinating mechanisms at the national level. Thailand created a National Centre on Early Childhood Development, which provides policy oversight and coordination across the five ministries involved with its ECD programmes and services. An example of one activity under this umbrella is Thailand’s Book Start Programme – a programme to address literacy and development needs of very young children – which is coordinated between the Ministry of Health (as the first-care service provider) and the Ministry of Education (as supporting ministry) (ARNEC, 2010b). Papua New Guinea established a national committee to coordinate ECD planning, the Philippines has a National ECCD Council and Bangladesh has the Bangladesh ECD Network.

Although there are attempts to include a holistic perspective in ECCE in programmes in the region, the issue of coordination and financing dominate in regional dialogues on ECCE. In a 2010 EFA Coordinators’ Meeting in Bangkok, participants voiced concerns over persisting issues and challenges; chief among them were the lack of reporting on basic indicators of ECCE; the lack of accurate, reliable, valid and disaggregated data; the lack of sector coordinating mechanisms; the neglect of children younger than 3 years in all aspects (such as limited cross-sector data and analyses, assessments or services); lack of interagency efforts in national assessments and dissemination of noteworthy practices; and lack of clear definitions of quality across sectors.

Compounding these factors further is a bottleneck due to multiple ministries in charge of different aspects of ECCE; this situation is frequently described as leading to ‘practical nightmares’. Some of these ‘nightmares’ specifically include fragmentation of data, lack of coordination, lack of sector-based coordination and even scattering of efforts (and not just data) in different sectors. Context-specific coordinating mechanisms and guidance on process appear to be urgently needed (ARNEC, 2010c; UNESCO, 2010b). In some countries, data availability seems less of an issue (data are available) than integration of data from different sectors (ARNEC, 2011a; UNICEF, 2010a). The issue of financing is repeatedly discussed; there are a few examples of financing for ECCE, such as the inclusion in...
the EFA Fast Track Initiative (Mongolia, Lao PDR) and the Pre-Primary Education Voucher Scheme in Hong Kong, China (UNESCO, 2010a). But the issue of costing ECCE for reducing disparities and reaching the most underserved or marginalized communities continues to be a challenge and represents a huge gap in coordination across ministries and agencies.

It is time to systematically address these bottlenecks. There is consensus in the region that the issue of public-private partnerships is also crucial to the discussion. In some countries, a huge proportion of children are reached by private, non-state enterprises. In practical terms, it is unlikely that few, if any, countries will ever be able to provide 100 per cent of ECCE, and involvement from and partnership with the private sector is a necessity. If countries stretch public resources for ECCE too far, it can result in underfunding and poor quality. On the demand side, parents’ perceptions appear to influence participation.

Given these dynamics, compounded by the absence of clear standards and regulations for private institutions, the issue of public-private partnerships remains to be fully exploited.

Despite considerable advances in the provision of holistic child development services, issues such as multisector coordination, inadequate funding and uneven access to the services (for rural children and children from disadvantaged backgrounds) continue to mean that many very young children are deprived of quality care. If this situation continues, the issue of quality in early childhood care and education delivery is likely to be seriously compromised, even with policy initiatives at the national level.

4.5 Standards and guidelines

Standards, guidelines and frameworks to monitor developmental readiness are critical for early childhood programming to succeed and for reaching the poorest and the most disadvantaged groups (Miyahara and Meyers, 2008). Most countries in the region are now aware of the importance of national standards and government-guided frameworks in advancing the quality of early childhood programming. The development, monitoring and evaluation of these standards, however, vary significantly among countries, in addition to the differences in definitions and the scope of such standards.

With technical and financial support from UNICEF, several countries in the (UNICEF) East Asia and Pacific region have engaged in the early learning and development standards (ELDS) development process: Cambodia, China, Democratic People’s Republic of Korea, Fiji, Lao PDR, Mongolia, Philippines, Thailand, Vanuatu and Viet Nam. In South Asia, Bangladesh, Nepal, Pakistan and Sri Lanka have engaged in ELDS initiatives. In this process, within the broad framework of physical, social-emotional, cognitive and language development, a government defines, develops and validates country-specific standards for different aspects of early childhood care and education, such as curricular advancement, teacher quality and training, programme planning, evaluation and monitoring and advocacy.

- In Malaysia, the Education Act of 1996 introduced and mandated a national pre-school curriculum, followed by a national pre-school curriculum for children with special needs. The non-registration of ECCE centres (particularly private ones that register with the Ministry of Entrepreneurship) was listed as more of a problem than access to ECCE (Ministry of Education, Malaysia, 2009). However, problems with equity and access continue for indigenous people and children with special needs. These problems are compounded in ethnolinguistic minority communities where children and other community members may not understand the content of their programmes. Successful examples rely on including community members and developing awareness of the importance of ECCE. A useful lesson (box 5) is that even if the goal for sending children to these programmes seems to be different at first, continual engagement of community members, particularly parents, appears to contribute to increased awareness of the importance of the early years.
Box 5: Teaching the value of pre-school education

Simah Asir has a job that many of her neighbours feel is unnecessary. She is a pre-school teacher in a small village two hours by jeep from the nearest sizeable town, at the end of a rugged road snaking through rubber and palm oil plantations. On this day, she is teaching her impatient students to tear and fold plant leaves into shapes of animals. Simah works slowly around the circle, helping each child work on his or her design. They may not know it, but the children are getting something most of their parents never had: a formal education. The students are mostly from the Temiar ethnic group, one of 18 groups in Malaysia called Orang Asli, or original people. “Generally, indigenous parents are still not very interested in education,” said Simah. “They see this pre-school as a place to send their children to play and eat. But when they see people from outside the community showing interest in their children, they grow more conscious of the need for education. But it’s hard. We need to do this regularly.”


- In the Philippines, the lack of conformity to national standards in the curriculum, inadequately trained teachers (lack of uniformity of training and knowledge levels across all barangays) and lack of stratified, age-disaggregated data are problems in ensuring national standards for monitoring developmental readiness in early childhood and are noted as continuing problems in the delivery of services. The authors of the country policy review report noted that “the development of standards for learning competencies in ECCD must consider that a majority of our children do not access ECCE programmes prior to entering primary school (despite the new National Pre-School Education programme)” (Gordoncillo et al., 2009). Lack of research on such standards is also indicated as an issue to address.

- Cambodia has developed early learning and development standards for 3- to 5-year-olds and is in the process of working towards expanding it for children from birth up to age 8. The School Readiness Programme is reported as effective in ensuring better school readiness and retention rates (Nonoyama-Tarumi and Bredenberg, 2009).

- In Myanmar, the Ministry of Social Welfare, along with the UN agencies and local NGOs, developed a curriculum for pre-schools and day-care centres, in addition to supporting the development of a teachers’ manual and guidelines (UNESCO-IBE, 2010) for caring for children younger than 3 years.

Despite efforts to advance the cause of early childhood, issues such as lack of quality data and management of national early childhood statistics continue to plague the system and hamper efforts towards evidence-based policies. Additionally, the monitoring of teacher standards does not always extend to remote areas or to private institutions. Some countries have implemented minimum standards for kindergarten teachers to improve the quality of pre-primary education services (Kim and Umayahara, 2010), but there is a lack of data on teacher qualifications. Recent work in the region calls for assessment and data building on teacher qualifications (Rao and Sun, 2010; Kim and Umayahara, 2010).

- Recently, Singapore raised the bar from a certificate to a diploma level for all its kindergarten teachers, and they must now pass five (up from three) courses in their secondary education. Such uniform standards can be quite challenging in large, heterogeneous and diverse countries.

- In India and China, for example, even the introduction of minimum qualifications can be potentially difficult (Rao and Sun, 2010). Negative conditions, such as remote geographical areas, low teacher salaries, lack of training programmes, materials and resources and the paucity of trained teachers, frequently hamper efforts to introduce or implement minimum acceptable standards in these contexts. Access continues to be an issue for disadvantaged populations, and frequently, minimal or no standards exist for children with disabilities.

• Even when countries have standards, there is rarely the necessary budget to see them fulfilled. Nepal, for example, developed a 40-page document outlining high standards for ECD centres; but there was no increase in the budget or any budget sharing to enforce the standards.

• Across the region, there is variation in the types of early screening programme and referral system that countries have in place. In Thailand, the 2008 EFA mid-decade assessment country report indicates that the Ministry of Public Health uses indicators of physical health and brain disorder for screening children before they enrol into the school system; clinics provide constant health care and health watch for all children (Ministry of Education, Thailand, 2008a).

• In Malaysia, the child health services policies (per Article 24 of the Convention on the Rights of the Child) promote routine visits and examinations for children, immunization, healthy nutritional status, growth monitoring and evaluation as well as health education for parents; the national nutrition policy formulated in 2003 promotes breastfeeding campaigns and healthy and appropriate diets and lifestyles.

It is clear that a greater public impetus for early screening programmes is needed in the region. There is a need for increased use of disaggregated, subnational data in addressing progress on this indicator, given the wide range of disparities between rural-urban areas, between privileged and disadvantaged backgrounds and across provinces.

Advocacy for early screening should be formulated as a collaborative venture with partnerships from multiple sectors: ministries and government agencies, international NGOs, community actors, grass-roots groups, health centres and the private sector. On this indicator, South Asia appears to be lagging and will likely take a long time to put in place functional referral systems. International NGOs, such as Save the Children, have been advocating for collaborative assessments with parents that lead to more parental engagement and stronger support for children at home rather than referrals (considering services are often nonexistent).

4.6 The quality imperative in ECCE services

The General Comment (GC) 7 of the Convention on the Rights of the Child (CRC) affirms the right of young children to be active and engaged participants in daily life routines. In addition, the CRC requires that ‘children, including the very youngest children, be respected as persons in their own right. Young children should be recognized as active members of families, communities and societies, with their own concerns, interests and points of view. For the exercise of their rights, young children have particular requirements for physical nurturance, emotional care and sensitive guidance, as well as for time and space for social play, exploration and learning’ (United Nations, GC 7 on the CRC, 2006).

Inherently, this comment addresses the issue of quality. The term ‘quality’ has been subject to great scrutiny and has been the focus of several debates in the education field in general and in ECCE in particular (see the EDN on quality for a more detailed discussion).

Quality is a multilevel and multidimensional construct that includes various programme and classroom features (Mashburn et al., 2008). In the literature, the general agreement of ECCE quality reflects components of the environment that are related to positive child outcomes in the academic and social domains (Pianta et al., 2005). Two broad dimensions are often used to capture ECCE quality. These include features of programme infrastructure and children’s direct experience in classrooms. The former dimension is commonly referred to as the ‘structural quality’ or the regulatable classroom environment, such as space and furnishings, activities offered in a programme and services available for children and families. It also includes regulatable features of the programme, such as a class size, child-to-teacher ratio, teachers’ educational backgrounds and years of teaching experiences (NICHD ECCRN, 2002).
The latter dimension, which involves children’s direct experience, is perceived as ‘process quality’. Process quality covers two subdimensions involving interactions between individuals (child-child and child-teacher) as well as interactions among individuals as a whole (Howes, 2010; Howes and Ritchie, 2002). The regulation of the structural ECCE environment matters because teachers in ECCE classrooms with a low adult-child ratio were found to be more supportive of children’s needs, had greater respect for a child’s autonomy and expressed fewer negative instructions, especially for younger children (De Schipper, Riksen-Walraven and Geurts, 2006). In one study, when all teachers’ qualifications met state pre-Kindergarten standards (having a bachelor’s degree and teaching certificate), teachers’ years of teaching experiences were related to greater exposure to literacy activities for children in a classroom (Phillips, Gormley and Lowenstein, 2009). The pathways from structural ECCE environments to process quality to child outcomes are not well studied in the Asia-Pacific region. These have traditionally been observed through the direct use of benchmarks based on Western contexts and belief systems (such as the child-to-teacher ratio and group size) and frameworks in defining quality without considering local culture and practices.

Traditionally and until very recently, quality was defined primarily for structured, centre-based preschool programmes by Western benchmarks, including the National Association for the Education of Young Children’s notion of developmentally appropriate practice. In this framework, a young child is seen as an individual agent in her/his own development. This idea of individual development of a child, socialized for independence and individualism, guided the understanding of quality in early childhood, particularly in programming (UNESCO and UNICEF, 2011).

More recently, however, experts (Woodhead, 2006) are arguing that in reality, traditional Western standards and definitions of quality do not represent the optimal solution: one size does not fit all – there are several issues to keep in mind when addressing quality in ECCE.

Western and internationally developed frameworks are not implicitly transportable to regions in the developing world. For example, the use of traditional practices, listening and interpreting the world through shared familial and communal experiences with village elders, learning through play, music and cultural activities that are intrinsically relational, group-based and developed from natural and indigenous contexts are hallmarks of some cultures in the Asia-Pacific region (Burford, Ngila and Rafiki, 2003; Odora Hoppers, 2002; Pence and Schafer, 2006). Early childhood education in these contexts, although deemed to be authoritarian and didactic, may derive from alternate modes of constructing knowledge (Sarangapani, 2003; ARNEC, 2009).

Education in these contexts is not necessarily focused on the burgeoning individualism of a child but on the child’s relationship with aspects of her/his context. In this scenario, it is more important to focus on the interaction of (and sometimes clash between) local cultural beliefs about failures, successes and education itself with the broader beliefs of a community and what they perceive as successful education and the process of formal care settings. Thus, notions of discipline and authority that guide ECCE programmes and curricula in the Asia-Pacific region may not necessarily derive from dictatorial or autocratic motives but more likely may be based on how the developing child can function within the larger culture: moderating individualism in the service of a larger community. This is not to say that education based on such traditional practices is always necessarily rights-based; rather, the emphasis is on examining and building on existing understandings and practices that are contextually relevant and culturally meaningful within a community. Such culturally rooted and contextually relevant processes for ensuring quality in ECCE can resonate with broader goals for education for sustainable development and education for peace building and tolerance.

There are attempts to provide more global direction and focus on this issue of quality. A recent report (Britto et al., 2011), points to the need to go beyond the programme to larger systemic indicators in the study of quality. In other words, quality must be addressed at all levels of an ecological system. Indicators should include not only those commonly used, such as class size and teacher training, but others such as support channels for the supply of material resources, levels of training for service providers, reduction of accidents and injuries, environmental sustainability, disaster preparedness
and congruence with parental and cultural belief systems (Britto et al., 2011). In the Asia-Pacific region, frameworks such as these can help guide policy-makers’ thinking towards more specific and culturally relevant dimensions for quality.

It is thus urgent and of vital importance that countries develop their own conceptualizing and streamlined operationalizing of quality through national and local consultations with all parties that reflect the diversity within the countries and seek to implement them effectively (Myers, 2006; Rao and Sun, 2010).

The issue of quality in programme content and teaching also has to be understood in context. In contrast with high-quality standards of developed Western countries, the quality of some ECCD programmes in Asian and Pacific countries may appear to be inadequate at first glance. A remote village with no assigned room or facility may be running an ECCD programme under the tree using simple handmade aids, with a relatively larger child-caregiver ratio. Yet, it may be a quality programme because of the exceptional and sensitive teacher/caregiver who provides a stimulating learning environment and experience to the young children with support from parents and the community.

Experts (Prochner, 2002; Tobin, 2005) contend that indicators, such as large class size, are not necessarily indicators of low quality because children in some societies in which class sizes are large also appear to exhibit ‘developmentally appropriate’ behaviour.

**Box 6: Possible questions on quality to address in national consultations**

<table>
<thead>
<tr>
<th>Should quality be measured by:</th>
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<tbody>
<tr>
<td>The content of the curriculum?</td>
</tr>
<tr>
<td>The qualifications of the caregivers?</td>
</tr>
<tr>
<td>The child-caregiver ratio? The existence of standards?</td>
</tr>
<tr>
<td>The existence of national guidelines and policies for implementing such standards?</td>
</tr>
<tr>
<td>Whether the programme was administered in a formal centre or at home?</td>
</tr>
<tr>
<td>Young children’s readiness for school?</td>
</tr>
<tr>
<td>The effectiveness of the transition from pre-primary to primary education?</td>
</tr>
<tr>
<td>The language of communication and instruction in formal ECCE settings?</td>
</tr>
<tr>
<td>Whether the programme addresses children from disadvantaged contexts?</td>
</tr>
<tr>
<td>Whether the programme addresses children with disabilities and special needs?</td>
</tr>
<tr>
<td>Whether the broad community (particularly parents and family-based caregivers) are engaged in the holistic development of young children?</td>
</tr>
</tbody>
</table>

Although much of the work in this region focuses on these types of questions, it is clear that each question is important in addressing significant aspects of quality – a quality programme should reflect all these aspects.

These specific questions can be viewed within two broad issues: i) quality in terms of the programme impact (are children more ready for school as a result of the programme, are children staying in school longer, are their developmental outcomes better, etc.) and ii) quality in terms of the actual delivery of the intervention/programme – things like the environment, teacher or facilitators qualifications and holistic nature of the programme apply.
Although there is a welcome progression towards defining the issue of quality within the Asia-Pacific region, there is an urgent need in all forms of reporting for a clear definition and articulation of what a ministry or an agency means by ‘quality’. For example, some regional experts (Young, 2005; Vijayakumar, et al., 2010) point to the idea that quality must include the idea of language of instruction in early childhood. These researchers also attest to the idea that children need to start their education in their first language, with other languages added in an educationally sound manner. There is evidence as well, however, that in practice, initially, it may seem that children who begin in one language are doing well but do not manage to maintain a level of mastery or interest and eventually drop out of school. This is the same in indigenous minority communities. In this scenario, quality of ECCE is seen as closely intertwined (if not determined by) the issue of language. In the context of indigenous minority communities, based on needs and research, it may be more expedient to define quality with greater focus on language. However, in doing so, it is important to consider and implement other dimensions of quality as well within this larger focus on language issues.

In Philippines, quality of ECCE programmes is closely intertwined with holistic, community-based interventions. The Philippines ECCD Law, enacted in 2000, affirms parents as primary caregivers and a child’s first teachers (UNESCO, 2006). The Parent Effectiveness Service implemented by the Government provides support to all caregivers, especially from low-income groups. The programme includes parent sessions, home-based training, neighbourhood assemblies, live radio programmes and manuals. A special focus on involving fathers in ECCE is an essential part of the model (Rao and Sun, 2010).

Of the 49 countries in the Asia-Pacific region, Australia, Bangladesh, Cambodia, Indonesia, Kazakhstan, Maldives, New Zealand, Philippines and Turkmenistan explicitly include family- and home-based ECCE programmes within their national policies. There are other countries that start ECCE services targeting children still in their mothers’ wombs, but whether they provide comprehensive support to the family is not clear (Rao and Sun, 2010).

An issue that is often discussed in relation to quality is the pupil-teacher ratio in formal ECCE contexts. In the Asia-Pacific region, the problem is also compounded by the lack of trained teachers, and the absence of clearly defined standards for training. Training may span anywhere from three months to a year and may not be uniform in terms of content, even within a country. Subnational disparities in coverage are also huge, and in many countries, teachers are unwilling to work in remote or rural areas.

Often, even trained teachers lack the skills necessary for high-quality interactions with young children. It is thus critical for countries in the region to assess, benchmark and provide recommendations for skills training and ‘out-of-the-box’ innovative programmes for training teachers in classroom dynamics and interactions.

Subnational, disaggregated data can be useful in targeting specific advocacy-related efforts towards the populations that urgently require intervention. For example, it is possible that a high teacher-pupil ratio may be hampering the provision of good-quality ECCE in specific areas of a country. Indeed, the pupil-teacher ratio in the ECCE context has repeatedly surfaced as a serious problem in most countries in the Asia-Pacific region. However, pupil-teacher ratios should not be understood as representing class size because some teachers may teach more than one group of students or because other staff not recorded as ‘teachers’ may be involved in class work. This is especially an issue in ECCE because unregulated provision may result in short hours and teachers handling multiple classes; additionally, those who are not ‘teachers’ may have relevant qualifications in health and child development even if they do not have them in education.

Although there are repeated calls for smaller class size as a means to redress gaps in quality, others argue that class size alone is sometimes used as a justification for neglect of in-depth analyses of quality issues.
Figure 13 indicates that the number of pupils per teacher increased in a few countries between 2000 and 2009. Recent discussions in the Asia-Pacific region appeal for investments in teacher training and to rethink activities and programme content to address quality issues more creatively, especially since meeting Western standards for class size can be particularly daunting (Bennett, 2004). For example, using empathy and social-emotional skills, culturally relevant group games and activities or rotational leadership processes can help children in family-based and structured ECCE settings work collaboratively on group activities. These experiences can be targeted towards developing skills for playing and working together, for ‘teaching’ gender equality in having both boys and girls lead and follow, and for the interpersonal, social and emotional development of children. This does not mean that a larger class size is better, but in a context in which there is lack of trained caregivers, more creative strategizing may be necessary as an interim measure. Smaller child-caregiver groupings are still important for stimulation, development and adequate protection for young children; but careful analyses and sharing of experiences that are rooted in the cultural contexts need to be strengthened.

**Figure 13:** Number of pupils per teacher in pre-primary education, 2000 and 2009

In addition to class size and teacher training, there are several other issues that need to be addressed regarding quality. Teaching in ECCE centres continues to be delivered in didactic and academic formats rather than as play-based activity that is exploratory and joyous; the cognitive benefits of delivering good-quality, play-based curriculum to children not only outweigh any potential costs but may even serve as investments in a more engaged workforce because it eases the full burden of child care on parents and caregivers.

Other noteworthy initiatives for improving quality through parenting and community-based initiatives include mother tongue-based multilingual ECCE programmes (Kazakhstan, Malaysia, Myanmar and Viet Nam); home-based programmes (Cambodia) and research on ‘brain-based’ learning and Book Start (promoting reading by children and parents in Thailand). Examples of important centre-based initiatives include organizing ECCE programmes at non-formal education centres (for children of young mothers attending literacy training), parent education programmes (Bangladesh and Philippines) included as part of a centre-based ECCE programme, and ECCE programmes attached to primary schools (Lao PDR).
4.7 Disparities due to poverty and limited parental awareness

Although progress has been made in several areas of policy development and in the provision of systemic support, the degree to which these initiatives include children who are vulnerable and disadvantaged is still unclear due to the various stages of development across countries.

Obstacles to education, health, nutrition, social protection and other social services from the earliest years onward are significant challenges for achieving equity and inclusion. Inclusive education involves welcoming every child and recognizing every child’s right to an education (McCullough, 2009). However, Price argues that “even where the right to education has been accepted, there appears to be an implicit assumption that there is a ‘hierarchy’ of rights” wherein marginalized children, such as those with a disability, “have to wait until the rights of all other children have been achieved” (Price, 2009: 71).

In Indonesia, for example, there is an earnest attempt to provide integrated services to many children. But as figure 14 indicates, wide disparities in access exist across provinces. Yogyakarta boasts a net enrolment rate of 44 per cent (the highest nationally) in contrast to Maluku, with a 6 per cent net enrolment rate. One reason for this vast difference could be that most of the ECCE programmes in Indonesia are private, and thus access to child care becomes very difficult for some children, particularly the ones from poor families in provinces such as Maluku (Ministry of National Education, Indonesia, 2007: 47–48). There seems an imperative in contexts such as these to make a concerted effort to direct policy towards the poorer sections of a country.

Figure 14: Provincial ECCE net enrolment rate of 3–to-6-year-olds in Indonesia, 2006

Box 7: Inclusion in an ethnolinguistic minority community in Bangladesh

A recent study highlighted the importance of using mother-tongue education to ensure educational quality and access for linguistic minorities. In the Chittagong Hill Tracts of Bangladesh, children who attended mother tongue-based pre-school programmes consistently outperformed their peers in national language-based pre-schools on measures of communication, language and literacy and also in knowledge and understanding of the world. Classroom observations show a higher level of child engagement in mother tongue-based classrooms and a generally more friendly and participatory environment. The study sheds light on the importance of inclusive practices, such as mother-tongue education in early years as a critical element in the holistic development of children from disadvantaged communities.

Source: Vijayakumar, et al., 2010.

Box 8: Mother Circles in Myanmar: Inclusion in low-income families

An ECCE strategy in reaching the priority target groups and reducing rural-urban gaps has been the innovative development of Mother Circles, which represent a hybrid model whereby pre-primary school-based early childhood centres serve as the nucleus of support to home-based programmes. Initiated in 2000 in disadvantaged peri-urban townships in Yangon, the Mother Circles form a successful model for supporting the development of the most vulnerable young children in Myanmar. In 2006, there were some 1,408 Mother Circles that served more than 14,000 children younger than 3 years. Mother Circles are conducted in homes in cooperation with basic education schools. As part of an ECCE parenting education activity, parenting education on developmentally appropriate practices is given to community volunteers and support groups. Low-income families and rural communities receive ECCE opportunities through the Mother Circle, whose activities can be managed at low cost and with a participatory community approach.


Problems relating to access in remote and minority communities can present an even greater challenge for children in emergency situations (UNICEF and Save the Children, 2009). Children in a disaster situation are more vulnerable due to lack of access to resources, low social capital and lack of quality care (Morrow, 1999; Peek and Stough, 2010). Quality ECCE can, in fact, support recovery and healing, resourcefulness and collective support within communities (Connolly and Hayden, 2007; Cologon, 2010). Funding and support are usually available for infrastructure needs, but access to a good-quality education and stimulation frequently can be absent, particularly for young children (Save the Children, 2005). Child-friendly spaces can be provided even in courtyards, under trees or in tents. It is critical for countries to include ECCE in their plans for disaster risk reduction and vice-versa – include disaster risk reduction in ECCE policies. ARNEC, UNICEF and Macquarie University in Australia have supported the development of a regional guidebook that is based on research in four countries (Bangladesh, Papua New Guinea, Philippines and Vanuatu) for capacity building for ECCE in emergencies.7

The provision of good-quality ECCE in conflict and post-conflict situations has also become a priority issue for the Asia-Pacific region. Vast disparities may exist within these communities that face conflict and disasters, and reports from staff and humanitarian workers indicate the urgent need for preparedness, empowerment for community resilience and strong inter-sector mechanisms between ECCE and emergency clusters in such contexts (Cologon and Hayden, 2010).

Parental awareness of ECCE continues to remain a challenge in the region. Based on a review of findings from interventions for parenting support in countries such as Jamaica, Bangladesh and India, Walker (2011) argues that the strongest evidence base supports home visitation programmes, particularly by trained paraprofessionals who share knowledge and techniques in stimulation and good-quality interactions with children. However, in a region in which human resource systems

7 ARNEC, UNICEF and Macquarie University, 2010.
are already stretched, training professionals for routine delivery of holistic services could represent a problem. Studies done in the region in Bangladesh and India (Hamadani et al., 2006; Sharma and Nagar, 2009), suggest that investment of resources do not need to be large. For example, the training of ‘core’ mothers and other women in communities in Cambodia illustrates how low-capital, low-cost programmes can be integrated into the structure of ECCE services within a country (Rao and Pearson, 2009). In one study, literate village women and in another study, community health workers already engaged in the delivery of services were trained to provide individual play and focus group sessions with mothers. Thus, incorporating interventions within the community context, empowering community caregivers with knowledge and training, and leveraging existing resources are cost-effective strategies that merit further investigation.

### 4.8 Summary of challenges

Several of the issues identified here are recurring themes that have been discussed in the region:

- Adequate training, certification and incentives for ECCE practitioners (teachers, caregivers) is lacking.
- Public funding for ECCE remains negligible.
- Attention to marginalized and disadvantaged groups (remote areas, minorities, indigenous communities) is limited. In particular are the difficulties in reaching these groups in an emergency situation.
- Coordination between sectors is weak (especially for services for children aged 0–3 years).
- Limited attention to parents, caregivers and family members and their skills and capacities for provision of ECCE; holistic ECCE must include the mother, parent and/or family.
- Necessary data are lacking (problems relate to relevance, access because data are scattered across ministries, accuracy, lack of collection or aggregation, harmony with the data of donor agencies and the incomplete reporting on internationally agreed basic indicators). Available data from other sectors (health, nutrition and child protection) needs to be integrated. Preparedness for ECCE in an emergency is lacking.

During the Regional Consultation on Early Learning Frameworks (Manila, March 2011), delegates were invited to list the top issues or priorities for capacity building in their country; the following highlights their responses:

<table>
<thead>
<tr>
<th>Table 3: Issues and challenges in capacity building</th>
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<td>Thailand</td>
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<td>Timor-Leste</td>
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4.9 Summary of priority areas for the region

It is clear from the previous sections that there is a need to determine realistic and achievable priority areas that are rooted in a country context but that also ensure the holistic development of all children. One urgent priority that has emerged in the region is the need for the development or elaboration of new and existing outcome measures of ECCE. This may involve the use of more elaborated outcome measures that go beyond education outcomes to include indicators such as (ARNEC, 2010b):

- physical health and motor development
- social and emotional development
- moral and spiritual development
- cognition and general knowledge
- language development
- arts and creativity
- approaches towards learning.

The development of such measures should include evidence-based knowledge generation and management. Such initiatives can identify gaps and point to the need for developing new measures where necessary. For example, a standards measure in a particular country may reflect spiritual dimensions more because of the cultural salience of spirituality for that country. A key strategy to address the need for evidence would be a careful mapping of existing programmes and noteworthy practices, gathered from diverse sectors (NGOs, ministries and academia), which can provide useful national pictures of what works and what does not. Resources can then be efficiently allocated and used towards strengthening programmes for national scaling up and to identify new programmes based on needs.

A related priority area for the region is ensuring clear coordinating mechanisms between sectors. Research and mapping exercises in the region highlight the need for establishing formal, ‘spelled-out’ arrangements and guidelines for “who does what” in programme management, monitoring and evaluation. Two countries (Bangladesh and Philippines) have already pointed to the need for mandated collaboration to keep the coordinating mechanism dynamic and strong. The mandate could come from the text of the policy/guiding framework itself or it could come from the formal written arrangement between the nodal agency and other parties. Frequently, such coordinating mechanisms include national, provincial and local administrative units and actors (Cambodia, Philippines, Sri Lanka and Thailand) and can provide the impetus for the strengthening of policies.

For countries that are still in the process of developing ECCE policies, this means they do not have to engage in the process of developing efforts and initiatives from scratch. Lessons from other countries indicate that useful strategies include leveraging existing mechanisms and articulating roles and responsibilities with greater clarity and definition. For example, in Thailand, the Book Start programme is already an established mechanism of collaboration between the health ministry (as the primary care and service provider) and the education ministry. In Sri Lanka and Indonesia, the existing infrastructure in the health sector as the first service provider to families is used as the entry point for providing holistic ECCE services.

A third, urgent priority area in this region is the development of sound costing (including cost-benefit analysis) and financial planning measures for effective programmes. This includes careful consideration of i) the types of service delivery models to be promoted, ii) proposed outcomes and targets, iii) resources available and needed and iv) the financial costs of providing these resources. Sri Lanka recently engaged in a marginal budgeting for bottleneck analysis that involves estimating incremental costs and benefits for addressing bottlenecks or systemic limitations in effective programming (ARNEC, 2009). Save the Children has also initiated a cost-benefit analysis of the ECCE programme supported by the education ministry. This kind of analysis is helpful in ensuring that the models put forth for scaling up are cost effective and sustainable.
A fourth priority area for the region is the need for effective monitoring and evaluation. Although regional perspectives appear to have a well-heeled understanding of impact-oriented evaluations (based on desired child development outcomes), experts note the dearth of process-oriented (continuous monitoring during the process of implementation rather than after) and innovative input-oriented (based on research and evidence from the ground) mechanisms, such as culturally relevant resources or indigenous practices, for evaluation (Britto et al., 2011). It is critical that countries strengthen their process and evidence-based monitoring so that the feedback loops coming in from sites as programmes are implemented can be strengthened.

Sound programming constitutes the basis for good policies, which can in turn fuel the strengthening and development of existing and new programmes. This reciprocal relationship between programmes and policies can be further strengthened when governments invest in careful prioritizing, based on their specific needs.

What then are the implications of these priority lists for policy development, implementing and monitoring?

If a country is in the policy development stage, the list of priorities include:

- identifying a nodal agency or ministry as the lead agency that will collaborate with other relevant sectors and actors
- ‘mandated collaborations’ between sectors with modalities of operations clearly identified; for example, the nodal agency should be charged with facilitating regular and periodic email contacts and face-to-face meetings when possible
- allocation of budget to support policy implementing and monitoring
- formal establishment of a coordinating mechanism through an MOU or ‘who-does-what’ direction, with provisions for regular meetings, formal note taking and minutes distributed
- representation of lower-level administrative units in the coordinating mechanism
- national and local consultations on what the term ‘quality in ECCE’ means
- involvement with researchers and academic institutions to ensure that policies are evidence-based and rooted in research on the needs of a country, including the use of observational and qualitative data on holistic ECCE
- engagement of nodal ECCE ministries with emergency cluster organizations and nodal disaster risk reduction ministries to ensure preparedness for ECCE during an emergency situation.

If a country is in the policy implementing stage, the list of priorities include:

- formal, written commitments from key actors on the distribution of responsibilities for policy implementation
- instituting measures for the ongoing monitoring of programmes; for example, if the programme is on teacher standards, build in observational components during the implementing stage to provide feedback on whether core elements of the programme are understood and translated into practice
- capacity building and training for process documentation, even in the context of an emergency or disaster, and in remote or geographically difficult areas
- ensure that all input, process and outcome evaluations are documented and disseminated and serve as the database and baseline for the next steps, in a continuous improvement process.

Several experts consider capacity building and training for process documentation, even in the context of an emergency or disaster and in remote or geographically difficult areas, as critical. While they call for the extensive use of technology to aid in the documenting process, this is not always possible, especially in countries such as in the Pacific. However, it is definitely worthwhile
and beneficial to engage in training for systematic process documentation (even if it is in a ‘pencil and paper’, non-technological format). Such documentations can provide: i) valuable lessons on what works and what doesn’t and ii) the basis for an organized and systematic national reference document for the nodal ministries.
The following recommendations are specific to the five themes discussed in this EDN. These recommendations derive from a careful analysis of the mid-decade assessment reports and summaries, mapping surveys (ARNEC, 2010c), policy seminars in the region between 2009 and 2011 and global calls for quality ECCE for all. Although several competing priorities exist in each country, this list prioritizes issues specifically confronting the Asia-Pacific region. For example, while quality ECCE is accepted as a precondition for a child’s successful transition into primary education, there seems to be no clear articulation of what the term ‘quality’ means for each country. Similarly, while inter-sectoral coordination is seen as a huge challenge in several contexts, clear and specific steps for achieving it are not clear or realistically achievable.

Frequently, access and equity issues are framed in the discourse of costs versus benefits, without creative explorations into how existing resources can be optimally used to increase quality and access (UNESCO, 2007b), given constraints such as remoteness and multiple languages. There is an abundance of evidence that ECCE is an entry point for reducing disparities, engaging ethnolinguistic communities, providing stability, safe havens and child-friendly spaces during disasters and emergencies, ensuring gender equality (Bartlett et al., 2003), strengthening coordination between multiple actors and accelerating the achievement of the EFA goals.

Thus, the following recommendations seek to provide strategies to address urgent priorities in the region that countries can use as a basis to examine, innovate and implement the steps necessary to achieve the EFA goals by 2015.

### 5.1 Recommendations for evidence-based policy and advocacy

- Report on basic international indicators; gaps exist in the form of missing data, inadequate information of indicators and lack of disaggregated data. This reporting, in the form of a national ECCE digest, is important in providing baselines and can also serve as a comparative measure across countries.

- Include indicators of ECCE in reports on higher levels of education. The data can cover ECCE in reports on school readiness programmes, data on transition to primary schools and reports on survival rates to the last grade of primary education.

- Include explicit and clear statements specifically directed towards issues for very young children (0–3 years) in policy documents, guidelines and frameworks.

- Actively engage with experts and practitioners in the country to build a sound evidence base.

- Disaggregate data to ensure the inclusion of research on children in indigenous minority communities, ethnolinguistic communities, children with disabilities, children in emergencies, rural and remote areas and children in conflict and post-conflict situations.

- Document and scale up innovative practices.
5.2 Recommendations for improving access for children in vulnerable and disadvantaged circumstances

• Use low-cost, safe and indigenous materials to enhance the quality of activities and programme content.

• Build on activities and programming that may be based on culturally salient practices that can benefit children (not all traditional practices are beneficial).

• Engage local talent creatively in the service of improving programme content and quality; for example, in Philippines, local musicians and instruments were used extensively in the curriculum to ensure the inclusion of movement and play in the curriculum.

• Include community members, grandparents and other family members in programme activities.

• Ensure a smooth transition from ECCE to primary school through administrative strategies (such as training ECCE and primary school educators, integrated curricula and regulations that bridge ECCE programmes with primary schools) as well as relational strategies (such as transferring cohorts of ECCE children together into the same primary classroom, parent meetings and organizing visits to primary schools). These seamless transitions should occur regardless of whether the entrants to primary school come from a community-based or formal centre-based ECCE programme. For children who enter primary school with little or no ECCE experience, efforts must be made to provide shorter-duration, interim training (a short-term summer pre-primary programme, for example) to boost their school readiness.

• Encourage and support play-based rather than overly formal, pedagogical approaches (that appear more like a formal ‘grade’ school curriculum), regardless of whether these approaches are employed in the formal or community-based settings. The point here is that it is not always necessary to make huge cost investments or allocate tremendous resources to early childhood care and education, but rather it is better to invest in creative ‘looking around’ and identifying existing and local resources guided by technical experts and existing evidence to ensure the provision of quality through stimulating, joyous and innovative activities within and beyond classrooms.

5.3 Recommendations for providing holistic ECCE, governance and strengthening national coordinating mechanisms

• Establish formal, written agreements among key players and agencies, with clearly outlined work plans and direction on who does what.

• Engage not only in the initiation of joint programmes but ‘staying the course’, and engage in joint monitoring and evaluation activities.

• Stimulate mutually beneficial integration of staff and personnel from various ministries and departments through email platforms and/or regular phone contact.

• Ensure that the primary or nodal ministry or department reaches out to other sectors, including education, health and nutrition, women and children’s affairs, child and social welfare, protection, etc.

• Ensure the inclusion of representatives from lower administrative units in the national coordinating mechanisms.
• Ensure the inclusion of parents and family members in the national coordinating mechanisms.
• Increase and enhance budget allocations for implementing and monitoring the existing policies and frameworks.
• Strengthen the financial commitments for policy reviews on services for the very young (0–3 years).

5.4 Recommendations for improving standards, guidelines and training

• Establish and/or implement standards for ECCE.
• Standardize and regulate teacher qualifications that are meaningful and based on research.
• Establish creative formats for the delivery of training for caregivers, such as through radio programmes to remote neighbourhoods that can help improve the quality of home-based ECCE programming. There is a need to ensure a monitoring and evaluating component to such programmes and also an assessing of children’s readiness for learning outside the family. Strengthening programming is possible if a short but targeted assessment of the impact of such programmes can be obtained.
• Establish culturally relevant, play-based age-appropriate curriculum guidelines for educating the very young, including safe, indigenous, low-cost resources for play and stimulating very young children (0–3 years).
• Consider virtual education and the enhanced use of ICT, which have been recognized as important mechanisms for delivering pre- and in-service training programmes.
• Involve experienced research and expert practitioners in the in-service and pre-service training, mentoring and monitoring.
• Provide incentives and skills training for ECCE caregivers and teachers, particularly in remote and rural areas, and for those working in conflict or post-conflict and emergency situations.

5.5 Recommendations for strengthening community and family involvement

• Allocate financial resources for strengthening family-based or home-based ECCE programmes, particularly for the very young.
• Engage with parents on strengthening resources and materials for mother-tongue instruction.
• Invite parent groups into national consultations, especially to define criteria for quality in ECCE.
It is clear that countries in the region have achieved significant progress in acknowledging high quality ECCE as an urgent and inclusive step towards achieving the EFA goals. However, major challenges still continue to plague such efforts. Less than four years remain to accelerate progress towards these goals. There is a plethora of information from neuroscience, the social sciences and other fields to indicate that investment in ECCE is a sound and strategic way to ensure the holistic development of children and to obtain significant returns and results (Heckman, 2008). It is critical at this stage to translate these findings into evidence-based policy and increased public awareness through advocacy and strong capacity building in multiple sectors (Kim and Umayahara, 2010). It is our hope that some of the recommendations outlined in this document can be prioritized, with a sense of urgency and based on strategies for specific national priorities and needs.


----. The Economics of Investing in Early Childhood. Presentation given at The Nifty Conference. Sydney: University of New South Wales, 8 February 2006.


---. Policy and System Indicators. Draft Progress Note on ECCD. 2010b.


Annex 1: Subregions and countries covered by the End of Decade Notes on Education for All

- **Central Asia (6 countries):**
  Kazakhstan, Kyrgyzstan, Mongolia, Tajikistan, Turkmenistan, Uzbekistan

- **East Asia (17 countries/territories):**
  Brunei Darussalam, Cambodia, China, Democratic Republic of Korea, Hong Kong (China), Indonesia, Japan, Lao PDR, Macao (China), Malaysia, Myanmar, Philippines, Republic of Korea, Singapore, Thailand, Timor-Leste, Viet Nam

- **Pacific (17 countries/territories):**
  Australia, Cook Islands, Fiji, Kiribati, Marshall Islands, Micronesia (Federated States of), Nauru, Papua New Guinea, New Zealand, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, Vanuatu

- **South and West Asia (9 countries):**
  Afghanistan, Bangladesh, Bhutan, India, Islamic Republic of Iran, Maldives, Nepal, Pakistan, Sri Lanka
## Annex 2: Goal 1: Enrolment in pre-primary education and access to grade 1 of primary education

<table>
<thead>
<tr>
<th>Region</th>
<th>Country or territory</th>
<th>Enrolment</th>
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<th>Net enrolment rate</th>
<th>New entrants to primary education with ECCE experience (%)</th>
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**Asia-Pacific End of Decade Notes on Education for All**

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### EFA Goal 1: Early Childhood Care and Education

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**Note:** Data extracted from the UIS database on October 2011.

**Symbol:**

- **...** No data available
- **** For country data: UIS estimation
  - For regional averages: Partial imputation due to incomplete country coverage (between 25% to 75% of the population)
- * National estimation
- - Magnitude nil
- - Not applicable
- **n** Data refer to the school or financial year n years after the reference year
- **-n** Data refer to the school or financial year n years prior the reference year
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Fax: +977-1-4419-479 and 4418-466