Early Childhood Development

This is one in a series of topical guides developed for PAN:Children that provides key information on the current state of affairs in South Africa related to the topic and highlight practical guidance, lessons learned and case studies (both national and international) that will be helpful in policy development dialogue and knowledge sharing.

1. **International, African and national instruments guaranteeing the right to early childhood development**

State obligations to protect, respect and promote the right to early childhood development are governed by international, African and national legal instruments. These include:

1. The United Nations (UN's) Convention on the Rights of the Child (United Nations, 1990);
2. The UN's General Comment No. 7: Implementing Child Rights in Early Childhood (UN Committee on the Rights of the Child, 2006);
3. The UN's A World Fit for Children (United Nations General Assembly, 2002);
4. The Convention on the Elimination of All Forms of Discrimination against Women (UN General Assembly, 1979);
5. The African Charter on the Rights and Welfare of the Child (African Union, 1999);
6. The Millennium Development Goals (UN General Assembly, 2000);
7. UNESCO's Education for All (UNESCO World Education Forum, 2000);

Early childhood development (ECD) encompasses the holistic emotional, physical, and cognitive development of children aged 0 to 8 years. The realisation of the right to ECD requires that the State adopt a rights-based, multi-sectoral, coordinated, integrated, adequately resourced national ECD strategy that ensures universal access to the full complement of prescribed ECD services listed below. In addition, the strategy must prioritise access for especially vulnerable young children, including those living in poverty, in rural areas and children with disabilities (UN Committee on the Rights of the Child, 2006) (Martin, 2012).

Early Childhood Development or “ECD” services that must be secured for young children include:

1. Family planning and preconception and prenatal education and care
2. Nutritional support for pregnant and breastfeeding women and young children
3. Preventive and primary health care
4. Infant and young child nutrition education, supplementation, feeding and rehabilitation
5. Birth registration, social security, subsidised housing, free and/or subsidised potable water, sanitation and hygiene and other forms of social protection services for the poorest families
6. Protection against abuse, neglect and exploitation
7. Parent education and support to ensure optimal parenting and infant and young child development
8. Early childhood stimulation and education at home and through community and site-based programmes for children from birth


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1. This topical guide was prepared for PAN:Children by Patricia Martin (Advocacy Aid)
ECD service provision is not only a right; it is also a developmental imperative. The evidence is conclusive - the provision of early health care, food and nutrition, learning and stimulation, protection and parenting services, as well as social assistance impacts positively on the health, well-being and cognitive development in the early and later years of the child’s life. Moreover, it is also the strongest antidote for inequality. ECD has unparalleled potential to equalise opportunities and outcomes for children born into adverse circumstances, such as poverty (Walker, et al., 2011) (Engle, et al., October 2011) (Center on the Developing Child, Harvard University, 2007) (Schoon, Jones, Cheng, & Maughan, February 2011) (Naudeau, Kataoka, Valerio, Neuman, & Elder, 2011).

However, in order to realise the potential returns on ECD investments, it is critical that the ECD services and support:

a. Be delivered as a comprehensive and integrated package;
b. Be provided within the home, community and through ECD centres;
c. Be provided as early as possible, preferably from when the foetus is in utero; and
d. Be of a high quality (William K Cummings and James H Williams (eds), 2008) (Gara, Long, & Vargas-Baron, 2008).

Early childhood care and education services (ECCE) are one component of the broader package of ECD services which relate specifically to “services and programmes that provide care and developmentally appropriate educational stimulation for groups of young children in centres and/or in community- or home-based programmes” (Richter, et al., 2012) (UN Committee on the Rights of the Child, 2006).

This guide will focus on ECCE as the other elements of the package, such as infant survival and health, food and nutrition and social assistance are dealt with in a number of other reference guides in this compendium.

2. National policies, laws and programmes

The White Paper on Education and Training (Department of Education, 1995) calls for the promotion of ECD as an essential step towards realising national education goals

The Interim Policy for Early Childhood Development (Department of Education, 1996) sets out the policy priorities for the national ECD strategy, including the correction of past imbalances, the need to provide equal opportunities, universal access and affordability, and documents the ECD model of provisioning.

White Paper 5 on Early Childhood Development (Department of Education, 2001) commits to addressing inequitable provisioning of ECD through universalisation of the Reception year in all public schools.

White Paper 6: Inclusive Education (Department of Education, 2001(a)) establishes procedures for the early identification and remediation of barriers to learning, including disabilities, through the public education system.


The Norms and Standards for Grade R funding (Department of Education, 2008) make provision for pro-poor funding norms for public school and community-based Grade R services.

The Children’s Act (Republic of South Africa, Act No. 382005, as amended), as amended regulates the registration and minimum standards for early childhood development services for children up to school-going age.
**Green Paper on Families** (Department of Social Development, 2011) commits the State to the development of family strengthening programmes, including parenting programmes and the promotion of ECD in disadvantaged communities.

**The National Development Plan 2030. Our Future – make it work** is the national development plan for South Africa which targets the provision of integrated early childhood development, especially for the most disadvantaged children, as essential for the attainment of South Africa’s development goals (National Planning Commission, 2012).

### 3. Situation assessment of ECD in South Africa

#### 3. a Situation assessment of children’s access to ECD in South Africa

Since the advent of democracy the State has made significant progress towards realising its ECD goals and objectives. As a result of a host of pro-poor policies and the national policy recognition of prioritising the holistic needs of infants and young children, the following progress has been made towards ensuring access to ECD services:

- 87% of Households with young children have access to safe drinking water;
- 82% have access to electricity;
- 91% of women deliver their babies with the assistance of a professional;
- 89% of children are immunised by one year of age;
- 83% of births are registered; and
- 78% of children aged 5 years are enrolled in the reception of pre-school year (up from 39% in 2002) (Richter, et al., 2012) (Burns, 2012).

Despite this progress, access to, and the quality of ECD and ECCE services remains problematic, especially for the most marginalised children living in poverty, the very young children under the age of two years, children in rural areas and those living with a disability (Department of Basic Education, Department of Social Development and UNICEF, 2010) (Harrison, 2012) (Biersteker, 2012(a)) (Martin, 2012) (UNICEF, 2011).

Currently there is insufficient safe and affordable child care or sufficient access to early childhood care, education and stimulation services. Only 35% of children aged 0 – 4 attended an ECD centre in 2011, and of these, only 29% attended a centre where ECD activities are provided. The rate is much lower for children living in predominantly rural provinces compared to their urban counterparts. For example, only 29% of children aged 0-4 in the Eastern Cape attended a centre that provided ECD activities, compared to 40% in the Gauteng province (Statistics South Africa, 2012). The very young children (0-2 years), children living in poverty, and children with disabilities are disproportionately represented among those who are excluded from formal ECCE centres. Among the poorest 40% of children the excluded jumps to one fifth, or 20%. Whilst 56% of 3- and 4-year olds have access to out-of-home care, only 18% of children younger than 3, and less than 1% of children with disabilities, enjoy this service (Biersteker, 2012(a)) (Harrison, 2012) (Department of Basic Education, Department of Social Development and UNICEF, 2010).

In addition to the poor rate of access to formal ECD centres and out-of-home care, the current ECD framework does not, as documented below, secure the full complement of ECD rights, service and support:

**Lack of parenting support**

Parents bear the primary obligation for the upbringing and development of the child\(^2\); (United Nations, 1990) (African Union, 1999) (UN Committee on the Rights of the Child, 2006) Where parents lack the knowledge, skills, and resources to meet their obligations, the State is obliged to step in and provide parenting support.

\(^2\) UN CRC, Article 18 (1) and 27 (2); ACRWC, Article 20(1);
social protection services (including grants and access to basic services), and support services for parents in difficult circumstances (UN Committee on the Rights of the Child, 2006) (United Nations, 1990) (UN Committee on the Rights of the Child, 2006).

Early childhood development programmes should thus include the provision of support to the parents and/or caregivers of children. Unfortunately, in South Africa, ECD services tend to be delivered directly to children and little attention has been paid to developing the parenting skills and the resources necessary to enable parents to fulfil their primary early childhood development obligations (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

**Poor quality ECCE services**

Grade R services are reaching scale, but the services provided are of a poor quality (Biersteker, 2010 (a)) (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

ECD services for children aged 0 – 4 are provided by private or community-run initiatives which have resulted in significant variations in terms of access and quality (Biersteker, 2010 (a)). Generally, the quality of early childhood care and education classroom activities is poor. The quality is lower among centres providing services to poor communities and as a result, children living in poverty are likely not to be receiving ECE of an adequate quality to “offset the deprivation they experience at home and in the community” (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

**Inadequate ECCE funding, infrastructure, footprint and learning and teaching materials**

The current funding levels for ECD are too low to secure national ECD policy objectives and goals for children aged 0 – 4 years or to secure quality ECCE inputs and outcomes (Giese, Budlender, Berry, Motlatla, & Zide, 2011) (Department of Basic Education, Department of Social Development and UNICEF, 2010). The current resourcing model for ECD programmes for children aged 0 – 4 (ECD subsidy) is not sufficient to cover even the most basic ECCE inputs, and does not impact positively on the quality of the service provided (Carter, Biersteker, & Streak, 2008) (Biersteker, Dawes, Hendriks, & Tredoux, 2010) (Desmond, 2012) (Desmond, 2012).

As a result of inadequate funding, all ECD centres charge fees, which in poor communities largely goes to the cost of food and other running costs and thus does not improve the quality of inputs and outcomes. Moreover, very few centres exempt poor parents from paying fees, thus excluding the poorest families from accessing this service (Department of Basic Education, Department of Social Development and UNICEF, 2010).

Funding of Grade R has increased substantially over the last few years, but remains inadequate to provide quality infrastructure, teaching and learning material and quality outcomes. Class ratios are in excess of 40 in numerous Grade R classes (Department of Basic Education, Department of Social Development and UNICEF, 2010).

Whilst there are many good NGO piloted home and community-based ECD models, there is little, if any state support for these programmes, and there are no norms and standards for funding these models. This means they cannot go to scale, which is particularly problematic for the most marginalised and vulnerable children that do not, and are unlikely to access services through ECD sites (Biersteker, 2010 (a)) (Giese, Budlender, Berry, Motlatla, & Zide, 2011) (Budlender, 2010).

The current funding model lies at the heart of the perpetual inequity that characterises the ECD landscape in South Africa. ECD programmes and facilities for children aged 0- 4 years are almost entirely initiated by private organisations or individuals who bear the full cost of establishing the programme. Only once it is established can the programme be registered and gain access to the ECD subsidy. The provisioning of ECD sites and programmes thus depends on existing capital within a community. As such it prejudices poor communities. At present there is no obligation on the State to establish facilities in poor and under-resourced communities

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3. UNCRC, Article 27 (3); ACRWC, Article 20(2)(a), (b) and (c); General comment 7, para 20
Low levels of qualifications, insufficient training, professional support and poor working conditions for practitioner’s impacts negatively on quality

Poor qualifications and working conditions among ECD practitioners, especially those providing services to children aged 0-4 contribute to poor quality of ECD programmes and outcomes (Biersteker, Dawes, Hendriks, & Tredoux, 2010) (Department of Basic Education, Department of Social Development and UNICEF, 2010).

Poor organisational and financial management within ECD centres

ECD centres, many of which receive a state subsidy, are poorly managed, both from an organisational and financial management perspective (Department of Basic Education, Department of Social Development and UNICEF, 2010) (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

Insufficient state monitoring of ECD services

The lack of human and financial resources means that the Department of Social Development cannot adequately monitor the quality of services, organisational or financial management in subsidised centres (Biersteker, 2010 (a)) (Biersteker, Dawes, Hendriks, & Tredoux, 2010) (Department of Basic Education, Department of Social Development and UNICEF, 2010).

Poor integration of ECD services

Integration of ECD services and support across sectors and through integrated sites of service delivery is essential for the realisation of a comprehensive ECD package of care and support as well as for reaching the most marginalised infants and young children in South Africa.

Attaining the requisite levels of cross-sectoral coordination is a challenge caused by numerous factors such as lack of dedicated resources, lack of sectoral alignment around common ECD objectives and lack of a common credible national ECD framework and effective coordinating structure with sufficient political and administrative authority (Giese & Sanders, Co-operative Governance Structures Relevant to Children in South Africa, 2008) (Martin, 2012) (Richter, et al., 2012).

In addition, integration of ECD services is poor in ECD centres because of poor capacity and poor referral systems (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

3. b Key innovations necessary to improve ECD services in South Africa

There are a range of innovations necessary to improve universal availability, access and the quality of ECCE services, especially for the most marginalised children living in rural areas, with a disability and/or in poverty. Three of the overarching innovations required are:

1. A revision and expansion of the current privately-driven centre-based service delivery model to include home and community-based models of delivery and to include the provision of formal centres in underserviced poor areas by the State. A state-driven expanded footprint is necessary to reach marginalised children at scale (Biersteker, 2010 (a)) (Desmond, 2012) (Richter, et al., 2012) (Biersteker, 2012(a)) (Giese, Budlender, Berry, Motlatla, & Zide, 2011).

2. A revision of the current funding model so as to secure sufficient formal centres, infrastructure, quality and teaching and learning materials in marginalised communities, and an increased subsidy to address affordability and quality issues for children living in poverty (Biersteker, Dawes, Hendriks, & Tredoux, 2010) (Department of Basic Education, Department of Social Development and UNICEF, 2010) (Harrison, 2012) (Giese, Budlender, Berry, Motlatla, & Zide, 2011).

3. Stronger regulation, monitoring and evaluation of the qualifications of practitioners, the quality of site management, and the quality of ECD inputs and outcomes (Biersteker, 2010 (a)) (Biersteker, Dawes,
More specifically:

a. Parenting support, awareness-raising and capacity building must be promoted through, inter alia, integrated home and community-based ECD programmes (Biersteker & Richter, 2012 (b)).

b. A national state funding policy and norms should be developed to support and sustain quality home and community-based parenting programmes. (UNICEF, 2007).

c. State spending per child enrolled in ECD services should be increased to provide a minimum quality of care. (Carter, Biersteker, & Streak, 2008) However, only after coverage is expanded. Increasing the current subsidies to existing centres before expanding provision would magnify existing inequities (Desmond, 2012).

d. Improve integration of ECD services at all points of contact with pregnant women, infants and young children (Biersteker & Richter, 2012 (b)) (Richter, et al., 2012) (Martin, 2012).

e. ECD interventions targeting the most vulnerable must be prioritised. (National Scientific Council on the Developing Child, Harvard University, 2007) This requires pro-active provisioning and the development of a policy and funding framework for state provisioning of ECD services for children with disabilities, in rural areas and living in poverty (Martin, 2012) (Richter, et al., 2012).

f. The State must develop, strengthen and resource its ECD monitoring and evaluation systems. It should develop an ECD scorecard against which it regularly measures progress against core early childhood development indicators (Richter, et al., 2012) (Biersteker, 2010 (a)).

g. Guidelines and advice on the design, implementation, monitoring and evaluation of policies and programme interventions to early childhood development

Investing in Young Children: An Early Childhood Development Guide for Policy Dialogue and Project Preparation was developed to facilitate policy dialogue around ECD and guide policy choices on the best ECD investments. It provides information on the economic argument, the survival and health argument, and the school readiness argument for ECD investments. The guide provides support to policy makers and programme developers under a number of thematic areas, including:

a. A conceptual framework for ECD
b. The reasons for, and cost effectiveness of ECD investments
c. Assessing needs, measuring outcomes, and establishing ECD policy frameworks
d. Strategic entry points for ECD interventions
e. Costing and financing of ECD programmes (Naudeau, Kataoka, Valerio, Neuman, & Elder, 2011).

A Science-Based Framework for Early Childhood Policy provides a framework to guide policy makers as to the best choices to make to address the needs of young children and their families. It draws on current neuroscience and the results of multiple evaluations of ECD programmes to assist policy makers to navigate the multiple choices about which strategies can in fact improve children’s life chances (Center on the Developing Child, Harvard University, 2007).

Changing the Conversation about Home Visiting: Scaling up with Quality reviews the evidence in support of investments in the delivery of parenting and other ECD services through home visiting. The review concludes that both “the scientific evidence and expert opinion support the view that home visiting in general is a promising strategy for helping parents and promoting the growth and development of young children.” The report provides guidance to policy and programme developers on steps necessary to ensure the scaling up of
effective community-based practices and programmes so as to guarantee quality and reach (Harvard Family Research Project, 2006).

The Western Cape Department of Social Development 2009 Audit of Early Childhood Development Facility Quality provides evidence, based on an audit of the quality of ECD services provided in sites in the Western Cape, of the determinants of quality care and learning environments. It provides guidance on the inputs necessary to improve the quality of site-based ECE for children aged 0-4 (Biersteker, Dawes, Hendriks, & Tredoux, 2010).

The National Early Learning and Development Standards or Children Birth to Four Years (NELDS) provides guidance for ECCE programme and curriculum developers on “early learning standards expressed as desired results, indicators and competencies of expected learning achievements for young children in a designated age range.” It also provides guidance on appropriate early learning activities best suited to realise the desired learning outcomes (Department of Basic Education and UNICEF, 2008).

Addressing Exclusion and Invisibility in Early Childhood Years: Report on promising practices in working with young children in South Africa provides guidance for policy and programme developers on essential elements to be incorporated into holistic programmes providing care for especially vulnerable young children. The evidence is drawn from 6 successful integrated home, community and centre-based programmes ECD programmes providing comprehensive care to young children in South Africa living in poverty, affected by HIV and AIDS and children with disabilities (Save the Children & Bernard van Leer Foundation, 2011).

Funding the Future: Strategies for Early Childhood Investment, Costing and Financing provides evidence that serves as a foundation for increased investments in ECD. It provides information on the different models of financing, the sustainability of different ECD models, as well as the interface between private and public sector financing of early childhood development (The Consultative Group on Early Childhood Care and Development, 2008).

Development of a subsidy model for home- and community-based early childhood development services for children aged 0-5 provides guidance on the development of appropriate funding models and mechanisms for home- and community-based early childhood development programmes, and provides insight into the nature and size of the cost of delivering ECD services through these models of delivery (Budlender, 2010).

Child and Caregiver Outcome Indicators for ECD Programme Monitoring provides a “minimum set of health and psychosocial outcome indicators and measures for children and caregivers that can be used in monitoring the situation of children 0 – 4 years (including the antenatal period).” The paper provides a set of core indicators that must be incorporated into national ECD monitoring and evaluation systems to assess the impact of ECD programmes (Dawes, 2008).

The ECD Scorecard offers a summative monitoring and evaluation tool which can be used by the State in assessing progress towards attainment of a comprehensive set of core ECD indicators aligned with international and national ECD objectives and goals (Gwele, Biersteker, & Dawes, 2009).

5. Case studies

UNICEF’s Rapid Assessment and Analysis of Innovative Community and Home Based Childminding and Early Childhood Development Programmes in Support of Poor and Vulnerable Babies and Young Children in South Africa provides an overview of community and home-based programmes in South Africa delivering integrated ECD services to poor and otherwise vulnerable infants and young children. It provides an indication of the features of the programmes aligned with national ECD policy objectives, features that render
the various programmes successful in meeting ECD objectives, as well as guidance to policy and law-makers and programme developers – at national, provincial and local level - as to what is required to scale up or massify the programmes to expand their reach to include all poor and vulnerable young children (UNICEF, 2007).

**Scaling-up early childhood development in South Africa** provides a detailed review of the case of scaling up of Grade R in South Africa. It documents the progress that has been made, further developments that are necessary to ensure universal access to quality ECD services, and documents the lessons learned through the universalisation of Grade R for use by policy makers in scaling up integrated ECD services for children aged 0-4 in South Africa. The review provides insight into policy and programmatic developments that are necessary for improving the quality of Grade R, including policy changes, human resource capacity development, qualifications and salary, and materials, resource and physical infrastructure development that is necessary to secure the necessary levels of quality (Biersteker, 2010 (a)).

**Childcare Service Expansion in Chile and Mexico: for Women or Children or Both?** Reviews the expansion of early childhood care and education services in two middle income countries with similar gender and inequality dynamics to South Africa, namely Chile and Mexico. The report documents Mexico’s Federal Daycare Programme for Working Mothers and Chile’s “Chile Crece Contigo” programme and assesses whether the two benefit children and women, and whether they mitigate, or entrench existing gender and class inequalities in these two countries. The review shows that the different policy designs have significant implications for the opportunities created for women and children from low income families and the mitigation, or aggravation of existing gender and class inequalities (Staab & Gerhard, 2010).

**Costing Centre-Based Early Childhood Development Programmes for Children under Age Five: Case Studies from the Western Cape** documents the outcomes of an investigation into options for rapidly scaling up quality early childhood development services for poor children under the age of five. Based on a study of 21 centres in the Western Cape, the report provides information on the cost to meet quality ECD needs for five different levels of ECD centres, ranging from a “Shack in the Yard”, to “The Edutainer”, to “The Home-Based Centre”, to “The Evening Star”, and finally, “The Established Centre.” (Carter, Biersteker, & Streak, 2008). The case studies show that centres need additional resources to enable them to meet and maintain minimum standards.

### 6. References


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