

Early Childhood Care and Education in Ghana and Maharashtra

EdQual Policy Brief No. 9

November 2010

Quality Early Childhood Care and Education helps provide the best start for young lives



Research shows potential for attaining quality early childhood care and education (ECCE) provision while tackling wider issues of inclusion. But there is still some way to go in developing links between ECCE and education.

A new discourse for ECCE—in which care, development and health are all a part of education— was suggested in UNESCO's 2007 Global Monitoring Report (GMR). The research review outlined here indicates that this holds potential for the development of quality education provision through the tackling of wider inclusion issues featured in the 2010 GMR. However, our analysis of country-level case study material on ECCE in Ghana and Maharashtra also shows that in both locations maintaining the link between education and ECCE is proving problematic, although for different reasons.

The 'arrival' of ECCE on the international agenda

Early childhood has been on the international agenda for some time now. Education For All (EFA) reports (Jomtien, Delhi, Amman, Dakar), neuroscience research, longitudinal studies on children who received early childhood intervention, global mandates of child rights, the Millennium Development Goals, and a 2007 GMR devoted to ECCE all serve to demonstrate the view that the topic has 'in a sense, arrived' (Myers 2010).

Whilst coverage rates are increasing worldwide, at national levels good quality early childhood services remain inaccessible to the majority of the world's children (UNESCO 2010), particularly those in the poorest countries and the most disadvantaged in such countries.

Discourses of and approaches to ECCE

The new discourse suggested in the 2007 GMR (UNESCO 2006) is based on the idea that the scope of ECCE lies beyond the confines of schooling and pre-schooling since young children have multiple needs. As such, it opens up possibilities to influence wider educational contexts - such as home, family and community - to facilitate the best start in life for children. Hence, it is suggested that quality ECCE can contribute to the first five MDGs, which concern poverty reduction, nutrition, education, gender equality and health.

However, in both Ghana and Maharashtra, India, the discourses underpinning the development of ECCE policies raise questions about the relationship between primary education and ECCE for the best possible start in young lives.

Why focus on education quality?

EdQual's research focuses on how to improve the quality of basic education. Education quality is key to attracting and retaining learners in basic education and ensuring education contributes to other areas of development.

Key Policy Messages

Strategies or policies creating a clear link between ECCE and Education and focused on the multiple needs of young children will give them the best start.

Policies and programmes that draw upon the influence of wider educational contexts—like home, family and the community—will facilitate the link between education and ECCE and the development of learning for young children and their families from the start.

Early childhood policies that aim to enhance children's active involvement in learning situations will enhance outcomes for children's development.

Research findings at a glance

- There is potential for attaining quality ECCE provision while also tackling wider issues of inclusion.
- Maintaining the link between education and ECCE is proving problematic in Ghana and Maharashtra.
- Inequalities in school readiness occur before staring school (Woodhead 2009; UNESCO 2006, 2010; Govinda & Bandyopadhyay 2008) and increase with age (Woodhead 2009).
- ECCE may reinforce rather than combat inequalities (Woodhead 2009).

Maintaining links between education and ECCE is challenging

Maharashtra, India

Despite India's 2009 'Right to Education' Act, which entitles children from 6-14 to a quality education that is free and compulsory, ECCE is not compulsory, although the state endeavours to provide it for all children through their first six years of life (Kaul and Sankar 2009). ECCE provision is available through the Integrated Child Development Service (ICDS), which began in 1974 and is an integrated package of services addressing education, health, nutrition and family support for young children through the capability of mothers. It serves the multiple needs of children and operates throughout India for the most disadvantaged groups via the *anganwadi* system (integrated children's centres).

In 2006, responsibility for ECCE in India was transferred from the Department of Education (Ministry of Human Resource

ECCE to enhance children's learning competencies can only happen through their active involvement.

Development) to the Ministry for Women and Child Development (MWCD). This now has the mandate to 'universalize ECCE along with other services for children, with quality' (Kaul and Sankar 2009).

In this process, Datta (2001) argues that the link with primary education is lost and the significance of early education to enrolment, retention and school

readiness may also be lost. There is also a danger of double disadvantage through this decision because the pre-school component of the ICDS is limited and weak (Govinda and Bandyopadhyay 2008; FOCUS 2006). This supports the view that the start for the psychological, physical and social development of vulnerable children will remain inequitable.

In Maharashtra, child care workers (anganwadi workers) devote just one hour of the three hours per morning to engage children in some meaningful activity (Datta 2001). Early childhood programmes should help to enhance learning competencies in children, but this can happen only if the active involvement of children is present, not only their nurturance (Swaminathan 2000). Considering the very important role of ECCE in learning and education, the inability to engage with quality preschool education may act as a first 'Zone of Exclusion' from the goal of education for all (Lewin 2007).

Ghana

The development of ECCE in Ghana is at a relatively early stage. Again a discourse beyond 'schooling' is envisaged, but for 0-3 years; from ages 3-5 there is a clear 'pre-school' discourse in operation. Policy inception for ECCE in Ghana occurred in 1994. The ten years between 1994 and 2004 was characterised by indecision about which ministry would be responsible for the topic. At the time there was a lack of clarity as to where governance for ECCE would be located (Aidoo 2008; Boakye et al 2008). The ministries of Education and Social Welfare had joint responsibility for early childhood facilities. With the establishment of the Ministry of Women and Children's Affairs (MOWAC) in 2001, responsibility for policy-making with respect to children has shifted.

MOWAC's policy focus is on ensuring the holistic development of the child and it aims to protect the child's right to develop to its full cognitive, emotional, social and physical potential. At the same time, ECCE services in Ghana have expanded to include the child's right to good health services, such as immunization, weighing and nutrition. Various departments have been brought on board to promote quality ECCE in Ghana.

A pre-school class attached to a primary school



The policy has been established to ensure Ghana meets the tenets of international conventions she has ratified - for example the UN Convention on the Rights of the Child (UNCRC), the African Charter for the Rights and Welfare of the Child (ACRWC) and EFA - and to help in poverty reduction. The comprehensive steps to ensure success outlined in the policy serve as a clear indication of the special recognition that the government of Ghana is giving to ECCE. Institutional frameworks have been set up to implement the policy; national, regional and district level committees on children have been put in place. Roles and responsibilities have been assigned to various ministries.

In 2004, a ratification of the new discourse was demonstrated through the integrated policy. This addresses health, nutrition, water and sanitation, basic care, stimulation, learning, and family and community empowerment, so that young children have the best start to develop to their fullest potential. Alongside this integrated policy, there has been an extension of primary schooling to begin from three years old (KG), rather than six (Boakye et al 2008). This pre-school component has occurred through the free compulsory universal basic education (FCUBE) programme, designed to improve access and enrolment.

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Advocacy for the implementation of KG began in 2006. Each primary school is expected to have a pre-school (KG) by 2015. MOWAC is currently responsible for registration and the maintenance of standards in all crèches and day care centres for children aged 0-2, while the Ghana Education Service is responsible for curriculum development for children aged 3-5. ECCE activities have, however, been constrained by lack of collaboration and coordination

between these two principal agencies of governance (UNESCO 2006).

In both Ghana and Maharashtra, the discourses underpinning the development of ECCE policies raise questions about the relationship between primary education and ECCE for the best possible start in young lives. We know that inequalities in school readiness occur before starting school (Woodhead 2009; UNESCO 2006) and inequalities increase with age (Cueto 2008). ECCE may reinforce rather than combat inequalities (Woodhead 2009). Overcoming this problem requires clearer links between ECCE and education, with a focus on the multiple needs of young children.

POLICY RECOMMENDATIONS

Develop strategies and policies that create a clear link between ECCE and Education which focus on the multiple needs of young children to give them the best start in life.

Child outcomes from ECCE programmes

Child outcomes are an important part of quality programmes that take account of the context in which they are situated.

- Outcomes relate to development, which includes health, nutrition, learning and care.
- Learning and development can be promoted through ECCE programmes with immediate, short and long term effects (UNESCO 2006).
- Learning: What, and to what end children learn may vary.
 Research identifies certain conditions and criteria that enhance effective early learning (Siraj-Blatchford 1999;
 Sylva et al 2004).
- The quality of the structure, organisation and processes in programmes has an effect on outcomes for children from all backgrounds, but particularly for the least advantaged.
- Organised pre-school care and education, with some material resources and with qualified teachers giving children stimulation and some choice of activities, seems to lead to better cognitive and social development later in life than an absence of this does (UNESCO 2006).

Tackling wider national issues of inclusion

Quality ECCE provision focused on wider educational contexts, especially parents' capabilities, can potentially facilitate social capability and in turn affect the outcomes for young children's development in terms of health, nutrition, learning and care.

POLICY RECOMMENDATIONS

- Develop programmes that view ECCE as an important strategy for larger issues such as inclusion and poverty.
- Governments need to tackle inequalities in access to early childhood care, especially if it is based on income or parental education e.g. educated mothers have better access to antenatal care (GMR 2010).

Reaching the Marginalised Maharashtra, India

The Integrated Child Development Service (ICDS) is a community based program located in the community and expecting community participation through the provision of physical space there, the appointment of an *anganwadi* worker (childcare worker) from the community, and community involvement in service monitoring. This also helps in addressing contextual issues and in seeking community support for service delivery. Women's role in the ICDS is important. Self-help groups are encouraged to participate by taking responsibility for procuring food grains and providing cooked nutrition supplements to ICDS centres. These initiatives have been important in enhancing the quality of services in the ICDS.

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One of the objectives of the ICDS is to enhance mothers' knowledge of child development. Within the ICDS there are various initiatives, such as the mother-

child card, which is given to mothers by *anganwadi* workers and is used for the counselling of child health, nutrition and milestones. The *anganwadi* worker is the central person who brings women together for literacy, family planning, and income generation activities. In Maharashtra, capability is a strong element of the ICDS programme. It is focused on community as something in which parents, especially women, can become change agents. In this respect, the existing ICDS is a good creator of social capability. This is strongly evidenced in studies within other parts of India, such as Himachel Pradesh (FOCUS 2006).



Ghana

In Ghana, the ACRWC and the UNCRC provide the human rights approach rationale for linking ECCE and national development because it gives relevance to issues concerning young children in context (Aidoo 2008). Ghana also plans to integrate ECCE into its revised versions of Poverty Reduction Strategy Papers (PSRPs/national development plans) (ibid).

A pre-school class in Ghana

ECCE issues in Ghana include:

- Gaps exist between the standards formulated by the Ghana Education Service and reality
 at the implementation level. E.g. the conditions and situation in rural areas are completely
 different from urban areas.
- Gaps exist between policy standards and supervision and monitoring, public and private schools, curriculum expectation and teacher training, research and practice.
- Practitioners set up and run ECCE depending on their beliefs and values and how they perceive children.
- Parents support schools that are highly curriculum-centered and focus on English-only policy as opposed to mother tongue education at the early stages.

POLICY RECOMMENDATIONS

Investigate how the MDGs demand new thinking for developing quality ECCE intervention programs.

The MDG goals are not specific to ECCE, but the first five combine education, health, nutrition and family support for young children. Targets involve:

- Halving the percentage of children who suffer hunger (MDG 1);
- Reducing by two-thirds the rate at which children under the age of 5 are dying (MDG 4):
- Decreasing by threequarters the ratio of maternal deaths to live births (MDG5);
- Providing all children with the opportunity to complete primary education, and eliminating gender disparities in schooling opportunities (MDGs 2 and 3).

About the Research

EdQual's research has focused on the basic education cycle of primary and secondary education. Learning achievement in primary education has been shown to be strongly influenced by participation in ECCE programmes, especially for the most socio-economically disadvantaged learners.

Dr Kafui Etsey, a lecturer in pre-school education at the University of Cape Coast in Ghana, Professor Vrinda Datta, a specialist in the Indian Integrated Child Development Service (ICDS) at the Tata Institute of Social Sciences in Mumbai, and Dr Rita Chawla-Duggan, a lecturer in early childhood education at the University of Bath, UK, set out to identify the current issues highlighted in the country literature that relate to the development of and participation in quality ECCE and the basis of those issues in Ghana and Maharashtra, India.

This was achieved through a review of country level case study material on early childhood care and education (ECCE) for children and families in these two contexts.

This policy brief was written by Dr Rita Chawla-Duggan with Dr Kafui Etsey and Professor Vrinda Datta.

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EdQual is a consortium of six higher education institutions in the UK and Africa funded by the UK Department for International Development (DFID) to carry out a five year (2005-2010) programme of research on education quality mainly in low income countries, focusing on sub-Saharan Africa.

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