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The RISE Institute

Review of policy and planning indicators in early childhood

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The views and opinions expressed in this publication are those of the authors and do not necessarily reflect the official position of UNESCO.

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Acronyms

CBO	Community-Based Organisation
CCT	Conditional Cash Transfer
CDI	Child Development Index
CEDAW	Convention on the Elimination of all Forms of Discrimination against Women
CPMIS	Child Protection Management Information Systems
CRC	Convention on the Rights of the Child
CT	Cash Transfer
DHS	Demographic and Health Survey
ECCD	Early Childhood Care and Development
ECCE	Early Childhood Care and Education
ECD	Early Childhood Development (or Early Child Development)
ECDMIS	Early Childhood Development Management Information System
ECE	Early Childhood Education
EFA	Education for All
EMIS	Education Management Information System
FBO	Faith-Based Organisation
GDI	Gender-related Development Index
GDP	Gross Domestic Product
GHI	Global Hunger Index
GMR	Global Monitoring Report
GPI	Gender Parity Index
HI	Hunger Index
HECDI	Holistic Early Childhood Development Index
HDI	Human Development Index
HDR	Human Development Report
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
HMIS	Health Management Information System
IDB	Inter-American Development Bank
IECCD	Integrated Early Childhood Care and Development
IECD	Integrated Early Childhood Development
IFSP	Individualised Family Service Plan
IIEP	Institute for International Educational Planning
LAMI	Lower and Middle-Income (countries)
MDG	Millennium Development Goals
MICS	Multiple Indicator Cluster Survey
MIS	Management Information System
MoE	Ministry of Education
MoH	Ministry of Health
MoSP	Ministry of Social Protection
M&E	Monitoring and Evaluation
NGO	Non-Governmental Organisation
OVC	Orphans and Vulnerable Children
PERT	Programme Evaluation and Review Technique
PRS	Poverty Reduction Strategy
PRSP	Poverty Reduction Strategy Paper
SP	Strategic Plan
UIS	UNESCO Institute of Statistics
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNICEF	United Nations Children's Fund
WB	World Bank
WHO	World Health Organisation

Review of policy and planning indicators in early childhood

1. Introduction

At the World Conference on Early Childhood Care and Education (ECCE) held in Moscow from 27 to 29 September 2010, UNESCO announced its intention to develop the Holistic Early Childhood Development Index (HECDI) in collaboration with other international agencies and UNESCO member states.

Since then, UNESCO has forged partnerships with other organisations to develop the HECDI, including United Nations and multilateral agencies such as the Organisation for Economic Co-operation and Development (OECD), UNICEF, the World Bank, the World Food Programme (WFP) and WHO. UNESCO has also included NGOs or foundations working in early childhood including the Bernard van Leer Foundation, Consultative Group on Early Childhood Care and Development, Human Early Learning Partnership, International Children's Centre, RISE Institute, Save the Children and Un Kilo de Ayuda as well as leading international ECD specialists from all world regions.

To contribute to the HECDI and also assist countries to consider their options regarding policy indicators for early childhood development (ECD), this study identified ECD indicators in 51 ECD policies and strategic plans found in 39 countries.

This study seeks to answer leading questions regarding indicators for ECD policy planning in all world regions:

- What ECD indicators are countries attempting to measure?
- What topics/categories do the indicators address?
- What clusters and sub-clusters of indicators can be discerned?
- Which ECD indicators and clusters of indicators are most frequently used?
- What is the quality of the indicators?
- Have countries established targets for their indicators?
- How do countries propose to develop systems to gather data for measuring, analysing, interpreting and reporting on indicator databases?
- Which indicators for ECD policy planning and service development might be included in the HECDI?

The indicators that will be selected for use in the HECDI are expected to impact national policy planning and programme development for early childhood development (ECD) as well as international monitoring of country and regional progress. It is also anticipated that most national ECD planners will decide to include HECDI indicators in their national ECD policies, strategic plans¹ and monitoring and evaluation (M&E) plans, in addition to other indicators that pertain more narrowly to specific national needs, structures, processes, and service inputs, outputs and outcomes² related to children and parents.

¹ A national ECD policy is a high-level plan that is officially adopted. It is not time-limited and it contains key elements, such as a vision statement, main goal, objectives, strategies, activities as well as an organizational framework, investment plan, policy advocacy and social communications plan and a partnership plan. The "umbrella" ECD policy is essential for providing elements to be included in a national ECD strategic plan that is time-limited, highly operational, and contains an action plan for implementing the ECD policy.

² For definitions of outputs and outcomes, see **Annex 4: Definition of Terms**.

It is highly likely that the list of international ECD indicators will affect what countries attempt to do to expand and improve their services for young children and their parents. In this regard, the HECDI may become an advocacy tool. In collaboration with other initiatives, some HECDI indicators may succeed in helping to increase national and international investments in children.

It is also expected that HECDI indicators will be related to each nation's ability to meet international and national goals, objectives and targets for:

- Education for All (EFA) Goal One and other EFA goals;
- Convention on the Rights of the Child (CRC);
- Millennium Development Goals (MDGs);
- Poverty Reduction Strategy Papers (PRSP);
- Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW);
- Hunger/Malnutrition Reduction and Food Security Plans;
- Health and Sanitation Sector Policies and Plans;
- Education Sector Policies and Plans;
- Protection Sector Policies and Plans;
- National Development Plans (NDP); and
- Other national sectoral and multisectoral official instruments related to early childhood.

Several challenges lie ahead for the HECDI. International early childhood indicators must fit within current or planned national systems for data gathering, not only for measuring sectoral outcomes *per se* but also for assessing progress related to multisectoral and integrated service planning, reporting, accountability, human resource development, pre- and in-service training, and financial planning. Designing and establishing adequate M&E systems for ECD may continue to be a major challenge for most countries.

Given these considerations, the promotion of an international index with ECD indicators promises to be very useful for national early childhood planners and programme specialists as well as for measuring national, regional and international progress in expanding and improving ECD.

Objectives of this study

A detailed list of study objectives is provided In **Annex 1: Terms of Reference**. The guiding objectives of this study are to:

- Identify enabling environments that are critical to ensuring the provision of holistic services for young children (ages 0 to 8);
- Identify and address the challenges in developing a global monitoring tool for assessing national ECCE policy and programme development;
- Consider how crosscutting issues such as gender, cultural differences and HIV/AIDS can be addressed in the HECDI;
- Provide case studies or information on how Member States plan to monitor ECCE policy and programme development, according to their policy statements, selection of indicators, and proposed M&E systems;

- Suggest possible qualitative and quantitative indicators to monitor the extent to which countries are adequately developing and implementing holistic ECCE policies and programmes; and
- Outline gaps at national and international levels that need to be filled to develop an HECDI.

This study does not attempt to evaluate the implementation of ECD policies and plans. To do so would require a large-scale field research project.³

What is our domain? The problem of nomenclature

The problem of nomenclature in the early childhood field has become extreme. Many terms are currently in use, and this situation is confusing many people. Current terms include “early childhood development (ECD),” “early child development (ECD),” “integrated early childhood development (IECD),” “integrated early childhood care and development (IECCD),” “early childhood care and education (ECCE),” “early childhood care and development (ECCD),” “early childhood education and development (ECED)” and other variants. Early childhood education (ECE) usually pertains only to early childhood services of the education sector from birth to primary school transition, although they may include health and nutrition services provided through IECCD Centres, preschools and reception year and other transition services.

International agencies, early childhood specialists and planners continue to debate vigorously the advisability of using various terms.⁴

In a sense, “ECD” can be used interchangeably with “ECCE” because ECCE, as employed by UNESCO, also refers to multisectoral and integrated policies, plans, and services for children and parents provided during the period from preconception and/or pregnancy to the child’s sixth or eighth birthday. A few countries extend the period up to the 10th birthday in order to eliminate the gap between early childhood and youth policies. However, in some countries, ECCE still refers exclusively to preschool education, leading to considerable confusion with respect to the multisectoral approach to early childhood and the growing mandate of education ministries to assist with improving child development and learning from birth to primary school entry.

“ECD” is used in this study because it is the term most frequently found in the literature and it has been selected as the national early childhood term of most countries in the world, often with the word “integrated” placed in front. The term “ECD” permits the use of an integrated and/or multisectoral approach for achieving holistic child development from preconception/pregnancy to primary school transition and entry. Furthermore, most readers are familiar with the term, and they understand it even though they may use another term in their country.

³ The RISE Institute is planning to conduct such an ECD policy implementation study in the near future.

⁴ Examples of the usage of various terms include the following: “early childhood development (ECD: used by the ADEA/ECD Network and many countries and agencies throughout the world; “integrated early childhood development” or the “integrated approach to ECD” (IECD: Mongolia); “early childhood care and education” (ECCE: UNESCO; Kenya); “early childhood care and development” (ECCD: Cambodia; Consultative Group on ECCD); “integrated early childhood care and development” (IECCD: Lesotho); “early childhood education” (ECE: United States; Viet Nam; Brazil); and “early and preschool education” (EPE: Montenegro). In French the contrast is usually between *développement de l’approche intégrée de la petite enfance* (DIPE: Haiti; Mauritania; Senegal; Burkina Faso), *développement de l’approche intégrée du jeune enfant* or *développement intégral du jeune enfant* (DIJE: Cameroun; Central African Republic). In Spanish, the term *desarrollo de la primera infancia* (DPI: Honduras; Colombia; Chile; UNICEF) is occasionally rivaled by *desarrollo infantil temprano* (DIT: Panama; and occasionally used by the World Bank).

Definition of ECD

In this study, “ECD” is defined as including sectoral, multisectoral and integrated services and activities for the period from preconception to the 6th or 8th birthday in the domains of education, health, nutrition, sanitation and protection. ECD services vary from country to country in accordance with national needs, cultures, policies and resources. ECD services generally include:

- Preconception and prenatal education and care;
- Parent education and early childhood stimulation through home visits and/or classes;
- Preventive and primary health care;
- Nutrition education, supplementation, feeding and rehabilitation;
- Early child care and development services (nurseries and crèches);
- Early childhood intervention services for children with developmental delays, malnutrition, chronic diseases and disabilities;
- Community-based Integrated ECD Centres;
- Home and centre potable water, sanitation and hygiene;
- Preschool education;
- Reception year and transition services from home or preschool to primary school;
- Juridical (legal), social and child protection; and
- Protective services for children with special needs, such as orphaned children, children infected by HIV/AIDS, and children affected by conflicts, abuse, neglect, severe poverty, famine, trafficking, and other difficult situations.

People in most countries are now accustomed to using a specific term for the field of early childhood development in their policies and other official papers. They are unlikely to change the term they use, especially because it has been used in legally adopted documents. Furthermore, it often reflects cultural norms and priorities as well as technical approaches.

Consultants and international organizations usually recommend certain ECD terms to countries. Of course, national leaders are the final decision makers regarding the term they will use. This decision is

often made early during the ECD policy planning process. National leaders usually select the term that is currently in use in their countries and that they believe will best meet their needs for policy making, influencing key decision makers, and communicating effectively with the public. Increasingly, countries are employing the terms “integrated” or “integrated approach” to promote a range of activities related to multisectoral participation, coordination and service integration. This decision appears to be linked to goals for developing more cost-effective and higher-quality services through consolidating administrative functions and ensuring services take a holistic approach to child development.

Need for research on ECD indicators

Because only one small study exists on the panorama of ECD indicators actually used in ECD policies and planning, this study attempts to begin to fill this gap (Vargas-Barón, 2005). For the book *Planning Policies for Early Childhood Development: Guidelines for Action* many sectoral and multisectoral policies that included ECD-related indicators were identified and listed (See Annexes XII and XIII, *Ibid.*). Since 2005, additional ECD policies and strategic plans have been drafted and adopted providing a much larger pool of indicators selected by national ECD planners.

In addition, several important international databases and other resources exist that include a wide array of ECD-related indicators that have been carefully vetted by the organisations or agencies of origin. The data for them can easily be used in ECD policies and plans; however, they are usually from two to five years out of date by the time they are published or put on-line in agency websites. As a result, countries and a few international agencies tend to use more recent statistics that they have collected from national statistics agencies and/or household surveys. Often these data have not yet been reported outside of the country.

International databases that have ECD-related indicators include the following. (See **Annex I: Bibliography** for the websites for each of the sources listed below.)

- United Nations Educational, Scientific and Cultural Organisation (UNESCO)
 - UNESCO Institute for Statistics (UIS): indicators on pre-primary and ECD services
 - Education for All (EFA) Global Monitoring Reports (GMR): 2007 report on ECD
 - International Institute for Educational Planning (IIEP): website with Education policies, EFA plans and a few ECD policies
- United Nations Children’s Fund (UNICEF)
 - The State of the World’s Children
 - Country indicators on each country webpage
 - Multiple Indicator Cluster Surveys (MICS) (household surveys)
 - Innocenti Centre: Innocenti Report Card
- United Nations Development Programme (UNDP):
 - Human Development Report (HDR)
 - Human Development Index (HDI) (included in HDR and website service also provided)
- World Health Organisation (WHO) and Pan American Health Organisation (PAHO):
 - Country indicators on health, nutrition and sanitation on WHO and PAHO websites
 - World report on Disability (prepared in partnership with the World Bank)
- World Bank (WB):
 - Millennium Development Goals (MDG) annual country reports on indicators and targets
 - Poverty Reduction Strategy Papers and Reports (PRSP)
 - Country data on WB website
- Organisation for Economic Co-operation and Development (OECD)
 - *Starting Strong II*, which includes many indicators

- Several special statistical studies in ECD fields
- European Commission (EC):
 - Various indicators studies in ECD fields
 - Babies and Children indicators
- USAID and MACRO (household surveys)
 - Demographic and Health Survey (DHS)
- Save the Children:
 - Child Development Index
 - State of the World's Mothers
- Global Hunger Index (GHI)
- Gender Parity Index (GPI)
- Gender-related Development Index (GDI)

Introduction to following sections

The following sections include a brief discussion regarding enabling environments for ECD policy and programme development. A review of issues and challenges follows regarding the advisability of developing national monitoring and evaluation systems for ECD. The methodology for this indicator review is presented followed by an assessment of indicators used in all of the ECD policies and plans that could be obtained for review. Finally, recommendations are presented for the design of national monitoring and evaluation systems in order to secure reliable data for ECD and the HECDI, and to select core indicators related to ECD policy and planning structures, processes and input.

2. Enabling Environments for ECD Policy and Programme Development

For nations to develop effective integrated and multisectoral ECD policies and programmes, eight essential enabling factors were identified as a result of an extensive review of the literature (Vargas-Barón, for publication in 2012).

Equity and rights

Vulnerabilities related to ethnicity, language, gender, socio-economic status, conflicts, disabilities, HIV/AIDS and other diseases need to be addressed, and child and parental rights must be realized. Therefore, indicators pertaining to these areas should be included in national ECD policies and/or strategic plans.

Multisectorality: integration and coordination

Well-integrated and coordinated ECD services should be established to ensure children's holistic development. As possible, indicators should be included for integrated services, multisectoral services and coordination, and sectoral services for young children and parents.

Governance: participatory ECD policy development and structures

ECD policies should be developed in a participatory manner, and structures for effective policy implementation should ensure policy objectives are achieved. Policy indicators for organisational structures and processes for ECD services should be selected.

Legislation, standards, regulations and inter-agency agreements

Legislation, service standards, regulations and inter-institutional agreements should be established to achieve system-wide quality assurance, and indicators for these activities and their results should be included.

Quality improvement and resource development

Systems should be created to develop culturally and linguistically appropriate, high-quality ECD curricula, educational materials, methods, media, and pre- and in-service training for services. Operational indicators should include inputs, outputs and outcomes related to ECD services.

Accountability: ECD monitoring and evaluation systems

Unified M&E systems should be implemented, and child data systems using unique codes, case management, referrals, tracking and interagency coordination should be developed. Indicators for M&E with respect to inputs, outputs and outcomes should be included as well as indicators related to establishing and managing child registration and tracking systems.

Investment and systemic issues for going to scale

ECD investments should be increased to expand service coverage, improve services, and ensure they are sustainable, high in quality and cost-effective. Indicators measuring investments as inputs and their outputs and outcomes should be included.

Policy advocacy and social communications

Policy advocacy and ECD media campaigns should be conducted to inform and sensitise national leaders, parents and communities to requirements for expanding and improving ECD services. Indicators regarding outputs and outcomes resulting from policy advocacy and social communication should be specified with respect to the support of leaders for ECD and parental knowledge gain and behavioural change.

These factors provide a framework within which nations develop their ECD policies and plans and the indicators that will enable them to be accountable and monitor the implementation of policy instruments, including their effectiveness in achieving stated objectives.

3. Issues and Challenges for National ECD Monitoring and Evaluation Systems

This chapter reviews major issues and challenges that will affect the development and implementation of the HECDI.

Management information systems and structures

In most countries, the two main ECD sectors of education and health (often including nutrition and sanitation) have developed statistical management information systems (MIS). In addition, all countries have some form of statistical bureau, agency or institute assigned to collect, manage and analyse such information. Alternatively, some countries place this work in the ministry of planning. Many of each nation's best-trained planners work in these statistical agencies and departments, and they often help with ECD statistical issues. The statistical units for education and health, nutrition and sanitation usually are placed in their respective ministries. These sectoral MIS are always rich sources of indicators and data for ECD. However, many additional ECD indicators will be needed in each country in order to monitor and evaluate progress in achieving ECD inputs, outputs and outcomes.

Core national indicators

With the guidance of UN agencies and other international agencies, such as the World Bank and regional development banks, core demographic and economic indicators are used in virtually all countries. (See **Annex 1: Bibliography** for website information). National exercises to develop national indicators and annual country reports to assess the attainment of targets for the MDGs and Poverty Reduction Strategy Papers have further expanded the range of national indicators. These data gathering activities have been very costly but they have helped national statistics bureaus, planning ministries and line ministries to develop their statistical databases as well as their capacity to process data and prepare quite reliable reports.

Education indicators

Educational management information systems (EMIS) gather key data on education systems from early education to tertiary education. Most of them include data on formal preschool education, or at least those public preschools that are attached to primary schools. However, few EMIS gather data on services for children from birth to 3 years or on parent education services, IECD Centre services or early childhood intervention services. Furthermore, few national EMIS gather data or comprehensive data on non-public sector ECD services, which are sometimes larger than public ECD systems.

The UNESCO Institute for Statistics (UIS) gathers data from its member states, and it then collates and reports on a small number of core indicators for formal early education. The UIS focuses mainly on preschool, reception year, and primary school indicators. As yet the UIS has not made a concerted effort with nations to expand the core list of early education indicators. Thus, even EMIS are deficient with respect to the types of indicators and data that are required to monitor and evaluate comprehensive ECD systems from birth to six years of age, even in the area of child development and learning.

Health, nutrition and sanitation indicators

Health management indication systems (HMIS) gather data regarding many indicators for health, nutrition and sanitation. These indicators are highly developed and virtually universally used. However, some indicators tend to be less used in highly developed nations, such as "rate of stunting," and instead "rate of obesity" is increasingly being used. As with demographic and economic indicators,

major investments have been made in developing HMIS. The World Health Organisation, Pan American Health Organisation, World Bank, OECD, UNICEF, regional banks, and others have helped to hone the core health, nutrition and sanitation indicators gathered and analysed by each nation. As a result, in some countries the health sector is more advanced than the education sector in gathering key data on selected indicators. Still there are some countries in which data are missing regarding key health and nutrition indicators, such as low birth weight rates. Furthermore, trend lines need to be reported more consistently.

Protection indicators

The protection sector lags behind the education and health sectors in developing indicators and also in gathering, collating, analysing and reporting data. A limited number of child protection management information systems (CPMIS) have been established in highly industrialised nations but few have been developed in lower and middle-income (LAMI) countries. As a result of this and other factors, few indicators are consistently employed for social and child protection, child and parental rights and related areas. An array of experimental indicators exists for the protection field but no concrete set of indicators has been implemented widely. The field of ECD covers three major areas of protection, and indicators are needed for each of them.

- (1) **Juridical protection**, also referred to as legal protection, includes children's codes, laws and regulations.
- (2) **Social protection**, often called "social welfare," provides conditional cash transfers (CCT), cash transfers (CT) without conditions, and an array of family-related services, supports and regulations, only some of which are related to ECD.
- (3) **Child protection** includes many preventative and treatment services for child abuse and neglect, children with developmental delays and disabilities; child trafficking, children affected by conflict and demilitarisation, children affected by diseases such as HIV/AIDS, orphaned and vulnerable children (OVC), children in the streets, children engaged in abusive child labour, living in severe poverty, affected by substance abusing parents, living in prisons or affected by the incarceration of a parent, children of commercial sex workers and others.

ECD indicators and the need to develop national ECD monitoring and evaluation systems

A few well-developed ECD management information systems (ECD MIS) exist but they are found mainly in industrialised nations (such as in Australia, Canada, Scandinavian countries, and the United States of America). In some instances, institutes or cross-provincial networks manage ECD MIS. They tend to focus on a limited array of indicators that are mainly appropriate for highly developed research and data management systems, for example, the European Commission's indicators on children and families, UNICEF Innocenti Centre's Report Card, Australia's ECD indicator system, and a state-level indicators project that involved selected states in the USA.

In order to assess progress in ECD policy planning and services, and the status of child and family development, ECD monitoring and evaluation systems should be established to gather, analyse and report additional ECD indicators in all countries, and most especially in LAMI countries. Through phased planning and investment, it may be possible to develop national ECD monitoring and evaluation systems, and ultimately ECD MIS, in most LAMI countries. Similar special MIS have been developed for reporting on other multisectoral topics, such as HIV/AIDS, poverty reduction, and the Millennium Development Goals.

Advocacy will be needed in most nations to expand and complete data collection for key health, nutrition, sanitation and education indicators dealing with young children. At a minimum, countries can develop a system to collect existing data from HMIS, EMIS and CPMIS for placement in the national ECD monitoring and evaluation system or the ECD MIS, depending upon the decisions of each country. This should help to avoid a duplication of effort and reduce costs.

It should be fairly easy for ECD implementing agencies to gather and analyse annual data for selected indicators pertaining to ECD structures and governance processes. Indicators on child development and parenting inputs, outputs and outcomes could be gathered consistently through reliable household surveys, as they are in several countries. Critical indicators for the protection sector should be selected and data collected on a consistent basis, in line with national issues regarding children, mothers and parents. This is, perhaps, the most challenging area.

Designated national ECD implementing agencies or departments could produce annual reports to help ensure follow through and support for the attainment of key objectives of the ECD policy, strategic plan and legislation. They could also provide data to measure indicators on a consistent basis. Finally, they could function as the “single point of contact” for international and regional assessment efforts, such as the HECDI. This topic will be addressed again in the recommendations presented in Chapter 6.

National statistics and household surveys

Several issues exist regarding the contrasts between nationally gathered statistics and household surveys. Most national statistics are gathered on a consistent basis regarding selected indicators. They usually represent universal data, and if gathered faithfully, they can be highly reliable. However, they are not always gathered and analysed consistently for many reasons, including technical errors, poor definitions, inadequately trained data-gathering systems and personnel, poor data entry and collation, inadequate data cleaning and double-checking, poor statistical analyses, and faulty or inaccurate data interpretation and reporting.

National level household surveys include the (1) Demographic and Health Survey (DHS) provided by MACRO and USAID in 70 countries, and (2) Multiple Indicator Cluster Survey (MICS) sponsored by UNICEF in 65 countries. Both surveys use stratified random samples and interview questionnaires. They are usually nationally representative and quite accurate. Although they share some of the same indicators, each survey also has unique indicators. The DHS focuses especially on reproductive health and selected diseases, and it has a component for men. The MICS emphasises children’s issues and child protection and it has a component for children less than 5 years of age.

Both systems are needed in the countries where they are conducted, and they play different and complementary roles. It is often said that the DHS is more technically reliable but that the MICS is more sensitive to national needs and programming. Also, the DHS tends to be more costly than the MICS. One example of collaboration between the DHS and MICS is occurring in gathering data in post-earthquake Haiti. It would be valuable for such collaborations to be conducted in other countries as well.

Additional household surveys have been developed to collect national level data related to early childhood development. They include the World Bank’s Living Standards Measurement Survey (LSMS) that is conducted in 35 countries and features indicators on health care access, preschool and

primary education, and costs;⁵ the Core Welfare Indicators survey and the Health Facility Survey;⁶ and the RAND Family Life Surveys.⁷ Individual countries have also begun to develop country specific surveys such as Botswana's Family Health Survey, Cameroon's Household Survey and South Africa's Demographic and Health Survey.

It must be noted that some authors who use data gathered through household surveys do not understand the differences between the DHS and the MICS and between them and other national household surveys. In addition, some authors do not understand the differences between household survey data and nationally gathered "universal" statistics. When inevitably data from different instruments differ regarding the same indicators, some authors do not know how to present and interpret the data.

It is of concern that some national planners and political leaders have rejected the findings of household surveys because they do not approve of the results. Furthermore, in the national statistical systems of a few countries, planners have been directed to alter data files and reports to cast their countries in a more favourable light. These are realities that ECD monitoring and evaluation systems will need to deal with as they develop their methods for data gathering, analysis and interpretation.

If the HECDI uses data from the DHS and/or the MICS, it will be important to consider the following caveats: not all countries are served by the DHS and/or the MICS; the selected indicator may be absent or cast in a different manner depending upon which survey is used; and these surveys are not gathered annually but rather every 4 to 5 years in each country.

Single Points of Contact

During an earlier project by the main author to develop an International ECD Progress Report, it was found that no "single point of contact" for ECD data exists in most countries. Although lead ECD agencies usually had been designated, they had not secured relevant ECD data from EMIS, HMIS, national statistics bureaus and other sources. They only had ECD data from their own ministry or organisation. This experience raised many questions about which entity in each country would be the best "single point of contact" for data concerning multisectoral and integrated approaches to ECD. Questions also arose about how that point of contact might best function.

A single point of contact whose data has been reliably collected and is universally trusted will be essential to the development of the HECDI. This single point of contact will not always be the EMIS of the national Ministry of Education. Therefore it will be essential for countries to indicate which agency will be responsible for providing data on ECD indicators to international, regional agencies and others.

Implementation of ECD policies and strategic plans and the development of "single points of contact"

Usually ECD policies and/or strategic plans designate a government or semi-autonomous agency to conduct annual ECD planning, coordinate services, implement the ECD policy and plan, and to conduct specific activities, M&E, policy advocacy and social communications. This entity reports to the National ECD Multisectoral Technical Committee and/or Council. Currently, ECD implementing agencies are found in many different places - ECD departments in prime ministers' offices, ministries

⁵ See: <http://go.worldbank.org/WK0XNZV3X0>

⁶ Both surveys are available at <http://www.ihsn.org/>

⁷ See: <http://www.rand.org/labor/FLS.html>

of planning, education or health, a variety of family ministries - or they may function as an inter-agency office. The implementing agency is sometimes a semi-autonomous agency (executive agency), as is the case in Colombia.

It appears that the establishment or designation of an ECD implementing agency or entity is essential to ensuring that ECD policies and plans are implemented. It also appears that an implementing agency is more successful if it is located close to the seat of government power, has strong convening ability, and is led by a person with leadership abilities and strong organisational, coordination and negotiation skills. An international study is required to assess these points fully.

Because this entity is usually also in charge of national ECD M&E systems, it could also be the “single point of contact” and provide up-to-date data to the HECDI and other international organisations, upon request. It would gather relevant data from existing data sets and be in charge of setting up systems for surveys and studies to gather the other data required under their ECD policies and strategic plans and additional data that may be requested by the HECDI. Thus, developing an ECD monitoring and evaluation systems will be intimately linked to policy decisions and the structures that countries develop to assess their ECD progress and needs.

Advocacy and accountability for ECD indicators

In each country, it will be essential to address the roles of national ECD Multisectoral Councils and/or Technical Committees in calling annually for the ECD implementing agency to conduct M&E activities. Furthermore, the Councils and/or Technical Committees should be the first bodies to receive and review M&E reports.

This process should help LAMI nations address advocacy and accountability issues more consistently and thoroughly as they also provide international data for the HECDI. In addition, these annual exercises should be very helpful for nations to prepare their Annual ECD Action Plans in line with their ECD policies and strategic plans and in light of progress made and challenges faced during the previous year.

Selection of indicators

Many factors, agencies and specialists influence the selection of national ECD indicators for policies and plans. They include the following:

- Scientific evidence;
- National and international evaluation research results;
- Strategies selected and activities listed under each strategy;
- Policy planning processes that include consultation workshops and interviews;
- The prior existence of indicators used in each nation that has MIS systems for data collection, collation, analysis and reporting;
- Lists of indicators used by international and regional agencies; and
- Interests of specific policy and political leaders (or a lack thereof as has been observed when some or virtually all indicators are deleted from a policy or a strategic plan).

Some observers posit that only “evidence-based” indicators should be used. However, as will be seen below, many indicators pertain to structures, processes, inputs, outputs and outcomes for which relatively little scientific evidence is as yet available. Other issues influence the selection of indicators, such as policy and political strategies for ECD and related sectors, requirements to assess structures and processes called for in ECD policies, etc. An initial list of criteria for selecting indicators is presented in Chapter 6.

Since there is no international list of indicators to be gathered in all countries, no universal guiding framework is currently available. A list of core indicators, such as the ones that will be proposed for inclusion in the HECDI, is needed but it must be flexible and enable countries to add indicators relevant to their national context.

Planning for data gathering, processing and reporting

The HECDI should ask each ECD implementing agency that is designated as a national single point of contact to provide an annual ECD M&E Plan, including the list of indicators selected. Although a general list will exist, countries frequently change their indicators in response to changing needs, circumstances and requests from policy leaders. Indicator lists should conform to an established format for data management, including the list of indicators along with their definitions, specific measures, base lines, trend lines (if available), and targets.

The annual ECD M&E Plan should include a Gantt chart or Programme Evaluation and Review Technique (PERT) chart noting activities and dates for data collection, collation, cleaning, analysis and reporting. The process and procedures for submitting annual reports to the Council or Technical Committee should be presented as well as the timetable for the provision of data to the HECDI.

Data gathering, cost and sustainability

In collaboration with the UIS and other partner agencies, it will be essential for UNESCO and the HECDI team to work closely with national ECD-related ministries to address issues regarding not only the designation of the “single point of contact,” but also the annual M&E plan, list of indicators with definitions, measures, baselines, trend lines and targets, and methods for data gathering, processing and reporting. Issues of the cost and sustainability of ECD data gathering and management must also be discussed and resolved. When the World Bank and others developed multisectoral PRSP, MDG and HIV/AIDS data gathering systems, they invested in country training and the establishment of systems for data gathering, analysis and reporting. The cost of maintaining such systems could be substantial for individual countries and cost projections will be needed in each nation.

Clearly, in addition to national budgets, coalitions of support from international agencies will be essential to ensure that developmental and recurrent operational costs of ECD monitoring and evaluation systems are met.

Special country needs

Of necessity, some individual HECDI indicators will pertain only to certain countries where specific socio-cultural, health, nutrition, sanitation, economic, environmental or governance situations exist. Over time, it should become apparent which indicators will be useful in sub-sets of countries. For example, HIV/AIDS indicators will be essential for countries such as Lesotho, South Africa and Tanzania but far less so in Bosnia and Herzegovina and Korea. For purposes of enhancing comparability of data, the HECDI should both encourage countries to contribute to the international list of indicators, and to the extent possible, use commonly agreed international indicators for their country

sub-set of indicators. Care should be taken to ensure that indicators and the data gathered to assess them are comparable from country to country and region to region.

4. Methodology for the Review of ECD Systems and Indicators

This chapter presents the methodology used to review existing ECD M&E systems and identify indicators that countries selected to include in their ECD policies and plans.

This chapter focuses on systems that have been developed for ECD monitoring and evaluation, and on indicators used to assess ECD services and activities conducted pursuant to the adoption of an ECD policy or strategic plan. It was decided to include all indicators in sectoral indicator areas, including education, health, nutrition, sanitation and protection as well as in integrated ECD services.

Review methodology

Initially, an extensive review was conducted of international and national databases regarding ECD sectors and their indicators, including systems developed by the World Bank, UNICEF, UNESCO, WHO, USAID/MACRO/DHS, the European Commission, Innocenti Centre, OECD and other international agencies. In addition, a series of international indices were considered in some depth. This review resulted in the listings provided in the Bibliography (Annex (2)) and the consideration of various issues regarding the identification and selection of indicators, and challenges and issues that countries and the HECDI will face.

A worldwide search was conducted to secure copies of ECD policies and strategic plans. The main author already had a large number of the documents but lacked others. Because of this, several weeks were dedicated to contacting ECD colleagues in nations, ECD networks, and international agencies. Especially helpful were colleagues in countries included in this study, UNESCO, UNICEF, Red Primera Infancia of Latin America, the evolving Caribbean ECD network, International Step by Step Association, and the ADEA Working Group for ECD. Despite all efforts, a few of the instruments reported to exist proved impossible to obtain in time to be included in this study. Nonetheless, with a total of 51 ECD policy instruments, analyses could be conducted and salient conclusions made.

Realising how difficult it is to secure these instruments, in the near future the authors plan to place ECD policies and plans that have been officially adopted on the website of The RISE Institute in order to make them fully accessible to all countries and to all other international agencies and researchers. Agencies will be invited to link to the RISE institute's website.

Types of official instruments reviewed

The ECD policies and strategic plans gathered had either been officially adopted in their nations or completely drafted and validated but not yet officially adopted. The few remaining instruments are expected to be officially adopted soon. It was decided to include them even though they had not yet been adopted because they have a rich array of indicators.

The official instruments that were reviewed were multisectoral ECD policies and/or strategic plans. No early childhood education (ECE) sections of national education policies or plans were reviewed because they are not multisectoral. Specifically, they lack the involvement and agreement of ministries of health and protection, at a minimum. It was tempting to include some rich ECE strategies, such as Montenegro's Early and Preschool Education Strategy, because it includes health and nutrition dimensions, participation by the Ministries of Health and protection, and many indicators. However, to include one is to include all, and therefore that exercise will be left to a future study.

Analysis of ECD policies and plans

Once most of the ECD policies and strategic plans that could be found had been obtained, a matrix was developed. A synthesis of this matrix is presented in **Annex 5: Chart of ECD Indicator Categories and Sub-Categories by Country**. This matrix presents the 39 countries across the horizontal axis and the indicator categories and sub-categories down the vertical axis. A total of 673 indicators were found in 51 policy instruments.

Many indicators were used repeatedly in various country policies or plans. In all, 283 discrete types of indicators were identified.⁸ The categories and sub-categories were developed after an extensive review of the 283 discrete indicators. They reflect the types of indicators that national ECD planners believe to be required for the monitoring and evaluation of large-scale national ECD systems.

The categories are:

- (1) Demographic and Economic Indicators
- (2) ECD Structures and Governance
- (3) ECD Inputs
- (4) Processes for Implementing ECD Services
- (5) ECD Outputs
- (6) ECD Outcomes

Definitions used with respect to salient terms such as inputs, outputs and outcomes are presented in **Annex 4: Definition of Terms**.

⁸ For purposes of consistency, certain very similar indicators across countries were reworded. This also includes the indicators that were translated from French or Spanish to English.

5. Analysis of Indicators Used in ECD Policies and Plans

Overview of countries included in this study

The chart presented below is based on a review of ECD policies and strategic plans, officially adopted or validated and close to adoption, in 39 countries. The chart presents an overview of the 51 ECD policies and plans that were reviewed for this study:

Chart of ECD Policies and Strategic Plans Reviewed for this Study

Country	Policy adopted	Plan adopted	Policy not adopted as yet	Plan not adopted as yet
Australia	X (2 sections)			
Belize			X	
Benin	X			
Bosnia and Herzegovina	X			
Botswana	X			
Burkina Faso	X			
Burundi	X			
Cambodia	X			X
Cameroon			X	X
Central African Republic	X	X		
Chile	X	X		
Colombia	X	X		
Dominica			X	
El Salvador	X			
Eritrea	X			
Ethiopia	X			
Gambia	X			
Georgia		X		
Ghana	X			
Guatemala	X			
Guinea	X			
Jamaica		X		
Jordan	X			
Kenya	X	X		
Malawi	X			
Maldives	X			
Mali	X			
Malta	X			
Mauritania	X	X		
Montserrat	X			
Namibia	X			
Nepal		X		
Niger	X			
Nigeria	X	X		
Philippines	X (an Act)			
Rwanda	X	X		
Senegal	X	X		
South Africa	X	X		
Uruguay	X	X		
Totals				
39 countries	33	13	3	2

Of the 51 ECD documents reviewed for this study, 33 were adopted policies, 13 were adopted strategic plans, and 3 policies and 2 strategic plans have been validated but not officially adopted as yet.

In **Annex 3: List of Policies and Strategic Plans**, a complete list of countries is presented, together with the titles of their ECD policies and plans, dates of official adoption, and comments on the status of country policy planning activities. As will be noted, in addition to the countries included in this study, several other countries are reported to have ECD policies or plans or to be developing them. Readers who are able to access additional adopted ECD policies or plans are requested to send them to the authors.

After considerable enquiry and during the preparation of Annex 3, the following list was composed.

List of Countries with ECD Policies or Plans Adopted or under way as of August 2011

Countries with adopted ECD policies or strategic plans that are reviewed in this study: 35 (The countries are listed above.)

Countries reported by reliable sources to have adopted ECD policies and/or plans but which are as yet unavailable: 13

- Albania
- Antigua and Barbuda
- Azerbaijan
- Comoros
- Djibouti
- Estonia
- Grenada
- Latvia
- Mauritius
- Pakistan
- Saint Kitts and Nevis
- Sri Lanka
- Turkmenistan

Additional countries reported to have adopted an ECD policy and/or plan, but the report is as yet unconfirmed: 7

- Barbados
- British Virgin Islands
- Kosovo
- Palestine
- Russian Federation
- Slovakia
- South Korea

Countries that have validated but not adopted their ECD policies and/or plans as yet that have been reviewed in this study: 4

(The countries are listed above.)

Additional countries with ECD policy planning under way; some close to adoption: 23

- Angola
- British Virgin Islands
- Cape Verde
- Chad
- Côte d'Ivoire
- Democratic Republic of the Congo
- Guyana
- Haiti
- Honduras
- Indonesia
- Lesotho
- Liberia
- Madagascar
- Mozambique
- Republic of the Congo
- Saint Lucia
- Saint Vincent and the Grenadines
- Sierra Leone
- Suriname
- Swaziland
- Tanzania
- Turks and Caicos Islands
- Uganda

In summary, as of August 2011, the status of ECD policies and plans is as follows.

Countries with ECD policies and/or strategic plans

36/5 Countries adopted ECD policies or strategic plans that were reviewed⁹

13 Countries are reported to have adopted ECD policies and/or plans; copies unavailable

7 Countries are reported to have these documents but reports are unconfirmed

56 Countries that have or may have an ECD policy and/or plan

Countries without adopted ECD policies and/or plans and whose work is under way

3/4 Countries with validated but not adopted ECD policies and/or plans that were reviewed

23 Countries with ECD policy planning under way, with some close to adoption

⁹ Cambodia has an adopted policy and an ECD National Action Plan that has been validated but not adopted as yet. Thus it falls under both headings in this list.

82 Countries with ECD policy planning completed or under way

Additional countries may currently be developing ECD policies and/or strategic plans, and the authors would appreciate receiving notification from those countries.

Presentation of taxonomy of indicators

A series of ECD Categories and Sub-Categories were derived from the indicators identified during the review of the 51 policy instruments.

The complete list of indicator categories is presented below. See also **Annex 5: ECD Indicator Categories and Sub-Categories by Country**.

Taxonomy of Indicator Categories and Sub-Categories

Indicator Categories	Sub-Categories	
Demographic and Economic Indicators	Demographic	
	Economic	
ECD Structures and Governance	Structures/Infrastructure	
	Governance issues	
ECD Inputs	Human Resources	
	Services/Service Infrastructures	
	Financial	
Processes for Implementing ECD Services	Service Implementation and Coordination	
	Policy Advocacy and Social Communication	
	Monitoring and Evaluation	
ECD Outputs	Maternal, Prenatal and Post/Neonatal	
	Parent Education and Support	
	Early Childhood Intervention Services	
	Education	
	Child Health	
	Child Nutrition	
	Sanitation, Water and Hygiene	
	Child and Social Protection	
	Pre- and In-Service Training	
	ECD Outcomes	Maternal, Prenatal, and Post/Neonatal
		Parent Education and Support
Child Development, Delays and Disabilities		
ECD and Preschool Services and Centres		
Education: Primary School		
Education: Secondary School		
Child Health		
Child Nutrition		
Sanitation, Water and Hygiene		
Child and Social Protection		

Rather than representing an ideal list of ECD indicators or categories, this taxonomy of categories and sub-categories reflects what was found in ECD policies and strategic plans.

With respect to the numbers of indicators per type, the following general results were found:

6	Categories
29	Sub-categories

673	Total number of indicators reported by all countries
283	Discrete types of indicators identified
17	Countries had only 1 to 2 indicators in their ECD policies and/or plans
22	Countries presented 3 or more indicators
1 to 82	Range of number of indicators per country
17	Average number of indicators per country, counting all countries
29	Average number of indicators for the 22 countries with 3 or more indicators

The 17 countries (44% of all the countries reviewed) that had only 1 or 2 ECD indicators had only prepared an ECD policy (with the minor exception of Kenya that placed standards and guidelines in its plan but without any policy indicators). It is interesting to note that several of these ECD policies should be characterised more as brief “policy statements” than as comprehensive ECD policies. In several of these countries, the national template (format) for policies is very general, and operational details are left to strategic plans that are adopted at ministerial rather than cabinet levels.

Those countries that had prepared both an ECD policy and a strategic plan, which is strongly recommended, tended to place their indicators in the strategic plan. Only four countries that prepared an ECD policy and not a strategic plan included indicators in their policies. Therefore, it may be stated that policy indicators are usually found in ECD strategic plans rather than in ECD policies, although there are some exceptions.

General observations on the indicators

The taxonomy of indicators covered policy planning structures and processes, program-related topics, and demographic and economic indicators. As was expected, relatively few of the latter types of indicators were found.

The taxonomy of indicators that was developed includes a mix of structural, processual, life-cycle, and sectoral listings. It was decided to abandon an early effort to use the life-cycle approach for services because data for several of the indicators already exist in countries in sectoral databases. For most countries, data for many of the indicators can be secured from statistics bureaus or institutes, national ministries of planning or sectoral HMIS in health ministries, EMIS in education ministries, and where they exist, in CPMIS in protection ministries.

The authors decided that if the indicators were presented mainly in sectoral sub-categories and sub-sections, it should prove easier for national ECD planners to utilise sectoral data that are already gathered by other agencies. However, not all indicators neatly pertain to sectors and many of the indicators are uniquely used in the ECD field. Thus, several categories are clearly multisectoral, and they are relatively new to the panorama of commonly used indicators. These multisectoral indicators are especially found under the following sub-categories: maternal, prenatal and post/natal education and care; parent education and support; early childhood intervention services; child development, delays and disabilities; and pre- and in-service training.

A rich array of indicators was found. However, a few important indicators were notably absent, such as indicators related to access and utilisation of services on the part of ethnic and linguistic minorities, child rights, and other topics. Some of these gaps are noted in the comments below. Missing indicators for topics related to ECD policy planning and implementation will be added to the recommended list of indicators for ECD strategic plans for countries and the HECDI.

With a total of 283 discrete types of indicators found during the review of ECD policies and plans, it is clear that countries cannot and should not try to include all or even most of them. With a range from 1 to 82 indicators per instrument, the average number of indicators per instrument was 29.

Many of the indicators were directly related to structural, cultural, health, nutrition, sanitation, and protection issues pertinent only to specific countries or clusters of countries. Some of these indicators could be considered for a list of “optional indicators” that countries might decide to adopt or reject, depending upon their circumstances. These types of indicators will be discussed in the recommendations in Chapter 6.

Many of the indicators were assessed as “very useful” or “useful.” However, a few of them were vague or close to impossible to measure while others were double indicators that needed to be teased apart. Some double or triple indicators remain in the list, even though they were vague and relatively unusable because they permit the reader to perceive the need for training and technical guidance. It is clear that ECD planners in many countries require definitions and good technical guidance with regard to indicators, measures, baselines, trend lines, and targets.

In some instances, it was difficult to categorise certain indicators. For example in some countries indicators that are usually output indicators have become outcome indicators. Therefore, it was decided to make some arbitrary decisions in order to present, to the extent possible, the differences between the two types of indicators.

In some cases, only a few countries selected some of the most valuable indicators. This should not dissuade ECD planners from using these indicators. Due to the fact that ECD policy planning is a very young field, countries have often overlooked some of the best indicators for their ECD policies and plans. In some instances, international agencies and consultants have suggested effective and appropriate indicators to country ECD planners. However, for reasons of policy and political realities and/or the difficulty or cost of gathering data to measure certain indicators, the countries did not select them.

Review of indicators

Most ECD planners did not provide comprehensive charts with lists of indicators and other essential details in their ECD strategic plans. They usually left them for inclusion in M&E manuals. In some cases, they clearly called for M&E plans and manuals to be prepared as core activities under a policy strategy for M&E.

The comments provided on the indicators below provide observations regarding ways to make certain indicators more useful. The comments section of this review assesses each discrete indicator according to the following attributes:

- Very useful indicator
- Useful indicator
- Less useful indicator
- Vaguely worded indicator
- Inadequately worded or double/triple indicator

- Country or regionally specific indicator

In some cases, an indicator has more than one designation.

Following is an overview of the indicators found in ECD policies and strategic plans, listed by category and sub-category of the taxonomy.

Category: Demographic and Economic Indicators

Only 5 countries included demographic and economic indicators in their ECD policies and/or plans, and some of the most important indicators of this type were not specified. Arguably these indicators are not needed in the list of ECD indicators because other national and international agencies usually gather these data. These indicators are, in the main, available from national statistics bureaus, institutes or departments in ministries of planning. They can be used for cross-tabulations when needed. However, countries have differing circumstances, and for some nations the inclusion of such indicators may be very important to demonstrate the policy relevance of ECD for reducing poverty, achieving the MDGs, and attaining a variety of national social and economic goals. The topics of indicators found under this category were related to populations, population growth rates, numbers of children at various ages, incidence of disabilities, HIV prevalence, life expectancy and adult literacy rates.

Indicator Categories	Sub-Categories
Demographic and Economic Indicators	Demographic Indicators
	Economic Indicators

Sub-Category: Demographic Indicators

Indicators	Comments
Number of children (at various ages)	Very useful indicator. These data are useful for calculating the percentage of children potentially eligible for ECD services.
Population growth rate	Useful indicator. These data are useful for projecting future service needs per geographic region.
Percentage of population with a disability	Very useful indicator. This indicator helps to ensure that the appropriate proportion of children with disabilities is being identified, assessed, and served by means of early childhood intervention services. Many countries lack these data or the data are unreliable.
Prevalence of HIV in population	Useful indicator. This indicator helps to project the general national HIV infection rate.
Prevalence of HIV in women 15-49	Very useful indicator. This indicator is more useful for projecting ECD and HIV service needs.
Life expectancy	Less useful indicator for ECD. This indicator complements child mortality measures but is not essential for ECD. It

	can be used in situation analyses to demonstrate trends.
Adult literacy rate	Very useful indicator. Because many research results show that maternal literacy and level of formal education is highly correlated with positive child development outcomes, it might be best to substitute “maternal literacy rate” for “adult literacy rate.”

Sub-Category: Economic Indicators

Indicators	Comments
National GDP	Useful indicator. This indicator is a necessary element for calculating the percentage of GDP devoted to ECD. However, it is not necessary to include this indicator in an ECD policy document because it is widely available for analytic purposes.
National GNP	Less useful indicator. This indicator is less used for ECD investment calculations.
Unemployment rate	Less useful indicator. This indicator is not really essential for an ECD indicators list. It is useful for an ECD situation analysis.

Some economic and social indicators were not found that are useful for ECD policy planning. Poverty rates by type and location and ethnic breakdowns by numbers and location are especially important for reasons of service equity, mapping, and developing service targets and projections. With respect to poverty and ethnicity, the following indicators could be considered:

- Extreme poverty: Percentage of population living on less than US \$1/day
- Severe poverty: Percentage of population living on less than US \$2/day
- Percentage of population living in poverty-stricken rural areas
- Percentage of population living in poverty-stricken urban areas
- Percentage of ethnic and linguistic groups
- Numbers of ethnic and linguistic groups by location

These indicators could be used to assess whether or not certain populations are being targeted adequately.

Category: ECD Structures and Governance

Indicator Categories	Sub-Categories
ECD Structures and Governance	ECD Structures/Infrastructure
	ECD Governance Issues

Indicators on ECD structures, infrastructure and governance are prominently featured in national ECD policy instruments. All 39 countries included one or more indicators regarding ECD structures but only 7 countries listed governance indicators. More attention should be given to governance issues to ensure good policy implementation.

ECD structures and governance are a “grey area” where some specialists define structures, such as organisations, agencies, entities, councils and committees, as a part of governance. Governance usually includes processes or acts of governing that occur within an organisation, such as conducting ECD policy planning, providing guidance, preparing reports, and other activities related to ECD decision making and management. The decision to present structures and governance processes separately is recognised to be arbitrary. However, national ECD planners often find it useful to focus first on setting up ECD organisational frameworks and separately on their functions and governance processes.

Sub-Category: ECD Structures/Infrastructure

Nations were found to focus especially on multisectoral organisational frameworks that lead, coordinate and promote multisectoral coordination and integrated ECD services at community and district levels. In some countries, structures and processes for integrated coordination are also found at the provincial level. At the national level, integration between health and protection ministries is frequently found. Increasingly, education ministries are supporting integrated approaches at the national level, especially for maternal/neonatal services, parent education and support, IECD centres that are promoted at the national level, early childhood intervention services for children with developmental delays or disabilities, and health and nutrition services in IECD centres and preschools. However, education and health ministries are rarely combined, whereas health and protection ministries are often consolidated.

The array of indicators selected for ECD structures was appropriate. They included: identification of the lead government agency for ECD; establishment of a national ECD implementation agency; creation of an ECD council or committee and the number meetings held; and the establishment of central and regional ECD resource centres, inter-agency partnerships and agreements, legal frameworks, standards and coordination, and terms of reference for ECD organisational structures.

An indicator could be added regarding the establishment of an ECD Multisectoral Council and/or Technical Committee. In some nations these structures have not functioned adequately in part because of the lack of a national ECD implementation agency or department, roles and responsibilities, strong leadership or regular monitoring of committee activities. To assess the situation fully, a comprehensive follow-up study is needed on the implementation of ECD policies and plans.

Indicators	Comments
Lead governmental agency for ECD identified	Very useful indicator.
National ECD implementation agency or group established to implement ECD plan	Very useful indicator. An additional indicator might be “National ECD implementation agency or group is fully functioning.” (Criteria for “fully functioning” would be provided in text.)
Number of ECD committees created	Less useful indicator as worded. Indicators of the following types could be considered: (1) National Multisectoral ECD Council established; (2) National Multisectoral ECD Council met at least twice a year; (3) National Multisectoral ECD Technical committee established; and (4) National Multisectoral ECD Technical Committee met at least bimonthly.
Number of ECD committee meetings held	See comment above. Specify type and ensure

	target is stated.
National ECD Resource Centre established	Very useful indicator if the country decides to establish such a centre. If so, a second indicator would be needed to assess whether or not it is fully functioning according to established criteria.
National and decentralised ECD Centres for Learning Resources, Demonstration and Training designed and implemented	Very useful indicator where appropriate for country. Criteria and targets will be needed to assess adequacy and extent of implementation and rate of expansion throughout the country.
Partnerships and agreements established	Very useful indicator. Countries are beginning to formalise their ECD inter-agency agreements and partnerships to ensure long-term service sustainability. The wording should be as specific as possible, for example (1) Designated ECD partnerships among government, civil society and private sector organisations signed; (2) Inter-agency agreement between the ministries of education, health and protection signed to establish programme policies and procedures for early childhood intervention services.
Legal frameworks, standards and coordination established	Very useful indicator. The specific legal frameworks, standards and coordination systems should be clearly identified in the wording. This indicator could be split into separate indicators, as needed and advisable.
Terms of Reference (TOR) for ECD structures created	Very useful indicator. The types of TOR and structures must be specified.

Sub-Category: ECD Governance Issues

Key ECD governance issues are emerging in relation to structural components for multisectoral and integrated approaches to ECD. Countries included the following indicator topics: annual work plans prepared; number of females involved in ECD governance; stakeholder participation; and passage of laws or acts to meet ECD plan and child rights requirements.

Indicators	Comments
Executive management strategy for the ECD Plan established	Useful indicator. However, it could be more useful to reword it to fit country circumstances. For example, "Annual work plan for the ECD implementation agency established."
Number of females involved with governance of the ECD Plan	Useful indicator. This indicator could be critically important in some countries but less so in others. Often there are many women and not enough men in ECD!
Number of stakeholders who are in agreement with the ECD Plan	Less useful indicator. This indicator would be very hard to measure. It may be best not to use it, and instead include a strong indicator for policy advocacy.

Number of laws passed to assist with ECD Plan implementation	Less useful indicator as it is stated but very useful when each law needed is explicitly listed. It is not the number of laws but rather the types of laws that are passed. An indicator could be added to assess whether or not specific laws, guidelines or regulations are developed in order to implement the ECD plan.
Number of laws specifically addressing the rights of the child	Same comment as above. The types of laws should be clearly listed in the indicator.

Additional key ECD governance issues could be addressed. For example, some indicators regarding reporting, planning and budgeting could be added. Indicators such as the following could be used:

- Annual ECD report and plan submitted by districts and provinces to ECD Implementation Agency
- Annual report on ECD progress and challenges submitted to Multisectoral ECD Technical Committee
- Annual ECD action plan and budget drafted by ECD Implementation Agency and submitted to ECD Technical Committee.
- Annual report, ECD action plan and budget reviewed and adopted by Multisectoral ECD Committee (or Council).

Given major differences in institutional cultures around the world, many governance indicators will be relevant only to certain countries. National ECD planners should add those governance indicators that they feel they need in order to implement their ECD policies and plans well.

Category: ECD Inputs

ECD inputs usually include: human resources; services and service infrastructures; pre- and in-service training; and financial resources. However, indicators for training inputs were stated as outputs rather than inputs. In this section, the indicators would describe the current pre- and in-service training capacity. Under outputs, indicators regarding a national training plan would list pre-and in-service training activities to meet the requirements and demand of services for trained personnel. Indicators for the planned expansion and improvement of the pre- and in-service training system(s) could also be provided.

The lack of input indicators related to pre- and in-service training may be due to inadequate ECD pre- and in-service training systems in some countries, or to a lack of knowledge about the existing capacity of pre- and in-service training resources. In many cases, surveys of training capacity have not been conducted for the full range of types of training needed for preparing the ECD workforce.

The three areas of ECD inputs found are listed below.

Indicator Categories	Sub-Categories
ECD Inputs	Human Resources
	Services/ Service Infrastructures
	Financial

Sub-Category: Human Resources

The types of ECD human resources will differ somewhat from country to country, yet some indicators will be common to all countries and will give ideas to national ECD planners for establishing useful indicators regarding inputs.

The following topics for indicators were found: workforce development and expansion; and the numbers of teachers, preschool teachers in madrasas, trained community educators, community facilitators, and trained and certified child caregivers and teachers.

Percentages by type of role are also needed. Indicators for human resources should deal with all major inputs related to the ECD workforce. A list of the major types of professionals, paraprofessionals and volunteers required for the provision of ECD services should be provided. If this information is unavailable, then an indicator may be needed for conducting a baseline workforce development study, with recommendations for training. In general, far greater specification is required for human resource inputs, to ensure that indicators are measurable and useful.

Indicators	Comments
Investments in education/workforce development	<p>Less useful indicator that is vaguely worded. A more useful wording would be:</p> <p>(1) "Plan for ECD workforce expansion developed, costed and adopted."</p> <p>(2) "Workforce plan implemented."</p> <p>Criteria and targets should also be provided in a chart or the text.</p>
Number of teachers	<p>Very useful indicator that is vaguely worded and needs to specify early education teachers. This indicator requires greater specification, such as:</p> <p>(1) "X number of certified preschool teachers (or ECD facilitators) employed in preschools."</p> <p>(2) "X number of teachers employed in Y number of preschools."</p>
Number of madrasas with personnel trained for ECD services	<p>Very useful indicator. Increasingly, madrasas are adding preschool education to Koranic teaching activities. This indicator would be useful in Moslem countries where preschool activities are included in madrasas for children from 2.5 years to primary school entry. Another indicator wording could be:</p>

	“Number of madrasa personnel trained in preschool education contents and methods.”
Number of ECD centres with trained community educators	Very useful indicator. Like the item on teachers, this indicator should specify both the number of trained community educators and the number of services they give annually.
Number of community facilitators	Very useful indicator. Same comment as above.
Number of caregivers and preschool teachers trained and certified	Very useful indicator. It probably should be divided into two: one for child centre caregivers and one for preschool teachers. The percentage could also be requested. A mirror output indicator could also be provided in a later section.

Sub-Category: Services/Service Infrastructures

Some input indicators for the establishment and implementation of services were found in strategic ECD plans. Various input indicators for services were found but they did not cover the full range of ECD services usually found in countries. Indicator topics that were found included: the distances of health and birthing services from homes; the numbers of preschools, primary schools and ECD centres; the number of ECD centres with electricity; and primary schools with blackboards, student desks and chairs.

No input indicators were found with respect to many other typical types of service and their contents, such as educational materials, learning toys, toy and book libraries, equipment and supplies. Input indicators for services are expected to vary greatly country by country. Greater attention should be paid to ECD service inputs.

Indicators	Comments
Percentage of population within 5/10 km radius to health centre	Very useful indicator. This indicator is very important for rural populations living in dispersed villages and hamlets. In some cases, this indicator is an output.
Distance to birthing centre/number of inhabitants per health centre	Very useful indicator. Same comment as above.
Number of preschool centres	Very useful indicator.
Number of ECD centres with electricity	Very useful indicator but it is country or regionally specific.

<p>Number of primary schools with blackboards</p>	<p>Less useful indicator. This is a very limited indicator for ECD because it relates only to primary schools, and should be optional. It is country specific to those nations with very limited school supplies.</p> <p>Indicators could be added with respect to preschools and IECD centres. Indicators could note the presence or absence of educational materials, learning toys, toy and book libraries, equipment and supplies. These indicators were not found in the policy instruments.</p>
<p>Number of primary schools with student desks and chairs</p>	<p>Less useful indicator for an ECD plan. This indicator may be useful for some countries regarding transition years from home or preschool to the first few grades of primary school.</p> <p>It would be useful to include an indicator related to IECD centre and preschool furniture. The types of school furniture might be specified.</p>
<p>Number of primary schools</p>	<p>Useful indicator. This indicator has a direct relationship to reducing over-age children in preschools. It is also useful for countries including the transition years within their ECD policies and plans.</p>

Sub-Category: Financial Resources

The measurement of financial inputs is essential to help ensure investments in ECD grow over time and to help maximise the use of available and future resources. Some of the indicators selected by countries are required as a basis for conducting service projections and simulations. Indicator topics selected included: sources of funding; financial targets; establishment of a national fund for ECD; percentage of GDP invested in ECD; percentage of education, health and protection budgets devoted to ECD services; targets for fee for services; public expenditures for preschool pupils as a percentage of GNP per capita; cost sharing modalities; and expenditures per child.

Specific investment targets were sometimes missing from the indicators used, and they are needed in each country. Targets should be stated regarding the percentage of GDP and the percentages of ministerial education, health and protection budgets that should be devoted to ECD services. Several countries are establishing national ECD funds or ECD trust funds, fee structures, taxes, vouchers and subsidies for specific services and to the extent possible, targets should be established for them.

Greater attention should be given to calculating costs and expenditures per capita (child/parent), per class or cohort or per service as a basis for preparing projections and simulations.

Indicators	Comments
Main source of funding identified	Potentially very useful indicator. The indicator should be expanded to state: "Main sources and amounts of investment in ECD identified." Usually this should occur during the situation analysis, and input indicators should seek to increase the amounts given by each source.
Financial targets established	Very useful indicator but the types of funds and their targets should be specified.
National Fund for ECD established	Very useful indicator for countries establishing such a fund. More detail would be welcome on the target for fundraising and the income sources for the National ECD Fund.
Percentage of GDP Invested in ECD, early education, and maternal-child health	Very useful indicator. This indicator is now widely used. However, it is exceedingly difficult to calculate and countries require guidance to use it. A target is also needed. Targets vary from 1% to 2% per country, rising in phases from a baseline.
Percentage of Ministry of Education's (MoE) budget devoted to ECD	<p>Very useful indicator. Countries are increasingly gathering data for this indicator. It is included in the UIS database. However, it usually refers strictly to the percentage of the education budget that is devoted to preschool (pre-primary) education, whereas the intention of this indicator is to count all early-years services provided by the MoE, including IECD Centres, parent education, early childhood intervention services, nurseries and crèches, etc.</p> <p>The generally recommended target is from 10% to 14% of the total MoE budget should be devoted to ECD services from birth to primary school entry, increasing in phases from a baseline. Some planners advocate higher targets and a few others say that in countries with aging populations and relatively fewer children, the percentages should be lower. However, some of the CEE/CIS countries have very low rates of</p>

	ECD services at present, and they need to increase the investments of their MoEs in early education.
Percentage of Ministry of Health budget devoted to Maternal-Child Health (MCH)	Very useful indicator. Fewer countries gather this information in their HMIS. Sometimes it is very difficult to calculate MCH levels because they are often subsumed under institutional budgets, i.e., hospitals, clinics, health posts, etc. Nonetheless, it is important to pursue these data and for countries to establish targets. The generally recommended target is that 10% to 14% of the MoH budget should be devoted to MCH. Compelling reasons exist for increasing these percentages in countries where children are malnourished, chronically ill or suffer from diseases.
Percentage of Ministry of Social Affairs, Veterans and Youth Rehabilitation budget devoted to Child Rights and Protection	Useful indicator for protection ministries. It appears that as yet no country has established a target for this indicator. It is usually difficult to calculate given the budget categories and systems of protection ministries but it should be attempted where possible.
Targets for fee for services established	Useful indicator where fees are instituted by law. More detail would be welcome regarding which services and levels of fees. Many countries cannot establish sliding scale fees due to an inability to verify income; therefore, population-based fee levels might be needed. If so, it should be specified which populations would pay (i.e., urban non-poor, middle-income sectors of cities, towns and specific rural areas). Fees for ECD services usually function as an exclusionary device and they tend to promote existing socio-economic inequities.
Current public expenditure per preschool pupil as a percentage of GNP per capita	Very useful indicator. This indicator is useful for projecting future preschool coverage.
Cost sharing modalities developed	Useful indicator. However, this indicator needs greater specification. Which populations? What type of cost sharing modalities? What levels of cost? This information could be provided in the text.
Expenditure per child	Very useful indicator. Data on cost or expenditure per capita, per class and per

	<p>service are essential for planners to calculate future budgetary needs through preparing projections and/or simulations.</p> <p>Special attention should be given to developmental, capital, recurrent and in-kind costs.</p>
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Category: ECD Processes for Implementing Services

Operational indicators for service implementation are essential to measure a country’s progress in achieving stated service outcomes. Each country requires special indicators that will fit national situations, yet it is expected that some types of process indicators will be common to most countries. Basically, each country’s indicators for service implementation and coordination must relate to the strategies, activities and tasks of its ECD policy and strategic plan.

Indicator Categories	Sub-Categories
ECD Processes for Implementing Services	Service Implementation and Coordination
	Policy Advocacy and Social Communication
	Monitoring and Evaluation

Sub-Category: Service Implementation and Coordination

Indicators for service implementation and coordination should be included in each ECD Strategic Plan in order to ensure that implementation proceeds as planned. An array of indicator topics was found in this sub-category: numbers of reports, meetings held, follow-up sessions; mechanisms for certification and accreditation; types of functions of decentralised guidance systems; vertical and horizontal coordination; development of partnerships of care; and strategies to reach disadvantaged children.

In general, the process indicators that were found appeared to be quite useful. However, some were vague, in part because they lacked accompanying definitions and criteria. Service processes will vary greatly by country mainly because each country’s ECD policy and plan include different organisational structures, services and activities. In general, it is advisable to include at least one process indicator for each major type of structure and service.

Indicators	Comments
Number of sites that have produced at least one required report	Very useful indicator if revised. The type of report and the time period should be specified. For example, “Number and percentage of sites that have produced timely quarterly and annual programme

	and financial reports.”
Number of sites that have held at least 50% of the required meetings to support implementation	Very useful indicator. This indicator should be linked to specific guidelines stating the number of required or expected meetings. The target, as expressed, seems to be very low.
Number of follow-up sessions held to coordinate the implementation of the ECD plan	Very useful indicator. However, the entity should be specified, and a target for the number of sessions should be provided.
National and sub-national mechanisms for the provision of certificates or recognition letters developed	Useful indicator where the ECD plan calls for such activities.
Decentralized guidance system implemented and fully functioning	Very useful indicator. The criteria and guidelines describing the decentralised guidance system should be included in the text, and reference should be made to them in a note attached to the indicator. Criteria for the term “fully functioning” also need to be provided.
Vertical and horizontal coordination fully functioning	Very useful indicator if criteria are provided to assess “fully functioning.” Also definitions of vertical and horizontal coordination and guidelines should be provided in the text or attached to an indicators chart.
Partnerships of care developed	Very useful indicator, if detail regarding the number and types of partnerships and a target are provided.
Strategies across health and education sectors coordinated to reach disadvantaged children	<p>Less useful indicator as worded. This indicator is laudable but vague. Detail regarding the types of strategies and the types of disadvantaged children should be provided. For example:</p> <p>(1) “Number and percentage of children from minority ethnic groups enrolled in IECD Centres through education and health outreach services.”</p> <p>(2) “Number and percentage of developmentally delayed and disabled infants and children enrolled in early childhood intervention services that are jointly provided by the education and</p>

	health sectors.”
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Sub-Category: Policy Advocacy and Social Communication

For ECD policies and plans to gain support, be effective over time, and provide large-scale reinforcement of key national ECD messages, policy advocacy and social communication are required. Policy advocacy and social communications indicators that were found in ECD policies and strategies included the following topics: establishment of ECD policy advocacy and social communication services; planning and holding an Annual ECD Forum; number of media messages and awareness campaigns provided; number of community advocates trained; impact of advocacy and communications initiatives measured; and advocacy for ECD parent education and support programmes launched.

ECD policies and strategies should include more indicators regarding policy advocacy and the impact of policy advocacy and social communications than were found. Every ECD policy and/or strategy should include a few indicators for policy advocacy and social communication.

Indicators	Comments
ECD policy advocacy and social communication services established	Very useful indicator. Greater detail would be welcome regarding the types and numbers of services.
Annual ECD Forum planned and held	Very useful indicator for those countries that decide to hold an Annual ECD Forum.
Number of media campaigns on key messages prepared and implemented	Very useful indicator. A time period should be specified, such as annual.
Number of awareness campaigns created	Less useful indicator because it is vague. It could be absorbed into the indicator above or it could be made more specific regarding the types of awareness campaigns.
Number of community advocates trained	Very useful indicator. The target and geographic areas might be specified in the text or a chart.
Impact of advocacy and communications initiatives measured	Very useful indicator. However the types of impact and the measure(s) to be used should be specified in the indicators chart or in the text.
Advocacy for ECD parent education and support programmes launched	Very useful indicator. It could be complemented with the reason for this. For example: (1) “Advocacy for parent education and support programmes launched to increase parent participation.” (2) “Messages for parent education and support

	<p>programmes launched to reinforce parenting skills taught in IECD centres.”</p> <p>The specific types of parents might be mentioned. These statements would also permit the measurement of outcomes.</p>
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Sub-Category: Monitoring and Evaluation

Each ECD policy and/or strategic plan should include a chapter or a detailed and specific strategy on M&E. The ECD strategic plan should include an indicators chart and the organisational structure and processes required to manage and implement the full ECD M&E system. Interestingly, many indicators were found regarding the monitoring and evaluation of policy and service implementation, as well as service inputs, outputs and outcomes.

In addition, the structure and processes for the M&E system should be monitored. Interestingly, several indicators were also found in this area, including the following indicator topics: M&E of the ECD policy and strategic plan and their implementation; M&E system including indicators and targets; annual M&E planning; annual action research planning; comprehensive child identification, assessment, databases, case management and tracking services; internal M&E systems for major ECD programmes; M&E report preparation; national child development surveys; and a variety of mapping studies.

However, many ECD policies and strategic plans did not provide a description of the organisational framework and processes required to conduct an ECD M&E system. It is recommended that such a description be included, along with indicators for the design, implementation and functioning of the system itself.

Indicators	Comments
ECD policy and strategic plan monitored, evaluated and revised annually	Very useful indicator. The annual action plan should be revised, and not the policy (which is not time limited) or the strategic plan (which is usually time-limited, from 3 to 5 years).
ECD policy, Strategic Plan and Annual Action Plan implemented effectively	Very useful indicator but it is vaguely worded. Criteria and a plan for assessing the effectiveness of implementation are required.
A functioning monitoring system including ECD indicators and targets developed	<p>Very useful indicator. This is an essential indicator especially if the M&E system is not included in the policy or plan (and they rarely are).</p> <p>The indicator should call for an M&E manual with instruments and guides to be designed, implemented and quarterly and/or annual reports to be</p>

	prepared.
Annual ECD M&E Plan implemented	Very useful indicator. However, more detail and criteria are needed regarding the process for planning and implementing the annual ECD M&E plan.
Annual ECD Action Research Plan developed and used	Very useful indicator. Most countries should have a modest ECD research plan focused on high priority topics.
Comprehensive child identification, assessment, case management and tracking services implemented	Very useful indicator. This topic is critically important. The text and/or the indicator chart should provide the types of agencies involved, activities to be developed (design, field testing, revision, piloting, M&E, expansion), results expected and the time line.
Internal M&E system included in each major ECD service	Very useful indicator. The major ECD services selected should be specified in the text or in the indicator chart.
Monitoring plan is developed and implemented	Useful indicator but it needs more specifics regarding what is being monitored and how to measure implementation.
Quarterly and Annual M&E reports prepared and shared	Very useful indicator. The types of services and reports (programme, financial, planning, etc.) should be stated.
Annual review for past fiscal years included mapping of ECD parent education and support programmes	Useful indicator. It is very specific and it is useful for those countries implementing wide-scale parent education and support services.
A survey to secure unavailable data developed	Vaguely worded indicator that requires more detail to be useful. The types of surveys should be stated and the data needed should be listed in the text.
Mapping study on existing ECD M&E and coordination conducted	Useful indicator. However, this might be difficult for some LAMI countries to conduct well. If conducted, the results could be most useful for future M&E planning.

A nationally representative survey of child development implemented	Exceedingly useful indicator. This indicator is clear, concise. The time period should be specified, along with goals for repeat surveys in a stated period of time, such as each 5 years.
Database on children under six years with special needs developed	Very useful indicator. The types of special needs should be specified. This should be linked to the tracking system listed above.
Database for realistic and sustainable responses to ECD issues created	Very vague indicator although the topic is important. Greater specification is needed.
Highest risk groups defined and mapping conducted	Very useful indicator. The purpose for this information might be added in the indicator or the text (i.e. to target high-risk groups for Integrated ECD centre services).

Category: ECD Outputs

Outputs are units of service provided by ECD programmes, such as the number of different types of children, parents or others who are served by a specific service. Outputs also include indicators such as the number of activities each person participates in, the number of books or materials produced or given to participants, and other numerical counts related to ECD services. Outputs do not include outcomes, benefits or other results that participants achieved as a result of participating in services. They only reveal the numerical counts of programme participants or services provided. Although this definition appears to be quite clear, it can be challenging to categorise some outputs because they are also function as outcomes for specific ECD services, for example, “Grade repetition in primary school reduced” as a result of participating in one or more ECD activities. In these cases, an arbitrary decision was made with respect to placement. This particular indicator was placed in outcomes because it is often a medium-term outcome from children’s participation ECD services.

The following output sub-categories were found in the ECD policies and strategic plans:

Indicator Categories	Sub-Categories
ECD Outputs	Maternal, Prenatal and Post/Neonatal
	Parent Education and Support
	Early Childhood Intervention Services
	Education (various sub-headings)
	Child Health

	Child Nutrition
	Sanitation, Water and Hygiene
	Child and Social Protection
	Pre- and In-Service Training

Sub-Category: Maternal, Prenatal and Post/Neonatal

This sub-category focuses on the beginning of the life cycle. It is presented separately also because of its multisectoral nature, even though it contains some mainly sectoral activities in order to give special attention to preconception, prenatal and neonatal/postnatal education and health and nutrition care. The indicator include the following topics: preconception and prenatal education; family planning; materials distribution; prenatal health care; home visits for high-risk pregnancies; place of deliveries; presence of training birthing personnel; postnatal services for infants and mothers; postnatal screenings; and incidence of maternal depression.

Indicators	Comments
Strategy for ECD prenatal education and care approved	Very useful and concise indicator.
Family planning expanded and improved	Very useful indicator. Some countries include preconception education and family planning in their array of ECD services. This indicator needs more detail regarding the amount of expansion and the types of improvements. This information could be included in an accompanying text. However, an indicator is needed for preconception education, such as: "Preconception education component developed, field tested, revised and implemented for adolescents, recently married couples and others requesting services."
Number of pregnancy materials distributed	Useful indicator. This is a precise but optional measure because it does not assess impact in any way, and according to research, reading is not a very effective way to achieve behavioural change.
Number of women receiving prenatal care	Very useful indicator. It is usually nuanced as follows: "beginning before

	<p>the end of the first trimester.”</p> <p>Another indicator could specify the number of prenatal health care visits each pregnant woman should receive. WHO recommends a minimum of 4 prenatal visits. Many countries offer more, especially to high-risk pregnant adolescents and women.</p>
Percentage of high-risk pregnancies with home visits	Very useful indicator.
Percentage of women giving birth at a birthing centre	Very useful indicator. It often also includes: “at a birthing centre, hospital or health clinic.”
Percentage of women receiving postnatal services	Useful indicator. However, it should include the nationally recommended number and periodicity of postnatal services. These should be included in the text or in an indicators chart.
Number of infants receiving postnatal medical visits	Same comment as above.
Number of children under 2 months whose mothers receive postnatal mental health service/screening	<p>Very useful indicator. The percentage should also be included.</p> <p>This indicator would help to identify maternal depression and related issues that negatively impact child development.</p>
Number of children under 6 months whose mothers receive postnatal mental health service/screening	Same comment as above.

Sub-Category: Parent Education and Support

Ministries of education often lead integrated parent education and support services. However, ministries of health usually also contribute strongly to parent education with respect to health, nutrition, hygiene/sanitation and safety. Ministries in charge of child protection also collaborate regarding child and parental rights and responsibilities, child protection, and services for vulnerable and marginalised children and children with special needs. Parent education services are multisectoral, and usually they are integrated. All of the responsible agencies should be noted in indicator lists.

Output indicators for parent education and support included the following topics: parent education and support strategy developed; parent education standards and accreditation system established; rates of

accreditation; amounts of home visits and parenting classes provided; parenting education quality assessed; amount of partnerships for parent education established; numbers and rates of parents participating in parent education and support services, and receiving specific components; and rate of parental involvement in child development and learning activities.

Indicators	Comments
Strategy for parent education and support finalised	Very useful indicator. The age range should be noted (i.e. from birth to 36 months or up to 60 months, transition years, etc.). Ideally parent education should begin during prenatal education and continue strongly during 0 to 36 months and beyond to the preschool and transition years.
Strategy for ECD parenting education and support for children aged 4 to 6 years approved	Useful indicator. However, this indicator focuses only on the later preschool years. Such parent education may include tutoring for parents who want to learn how to conduct preschool activities in the home setting, possibly in playgroups. More details are needed if this is the case.
Standards and accreditation for early childhood parenting education and support programmes approved	Very useful indicator. The time line for the developmental process should be outlined in the text or in the indicators chart.
Number of home visits conducted	Very useful indicator. This is an important area because home visits are more effective than group sessions for parent education. The expected number of home visits should also be specified in the text and/or in the indicators chart. However, other information is needed: type of home visit; type of population; expected duration of each home visit, etc.
Number of children whose parents attended at least 4-6 sessions on specific child development training	Less useful indicator. This is a very minimal level of parental participation, and undoubtedly prepared for a very brief programme. However, this type of indicator listing more sessions would be useful.
Percentage of early childhood parenting education and support programmes that provide quality services	Very useful indicator. However, criteria regarding quality and the measures to secure the data for this indicator should be specified in the text and/or the indicators chart.
Partnership opportunities and state programmes identified to expand outreach of parent education and support services,	Very useful indicator. However, it needs to be reworded and targets should be added regarding public/non-public partnerships for

particularly to the most vulnerable	parent education and support.
Percentage of ECD parenting education and support programmes that are accredited	Very useful indicator. If no accreditation system exists as yet, then an indicator would be needed regarding the development of such a system.
Number of parents receiving parent education and support services	Very useful indicator. More details are needed regarding the types of parents and services and targets by year.
Rate of parents receiving parent education and support	Same comment as above. This indicator complements the indicator above. It will be essential to ensure the population base is available for calculating the percentage of parents receiving services.
Number of parents receiving education on child health and nutrition	Same comment as above. This is more specific regarding the type of education.
Number of parents receiving child development education	Same comment as above.
Number of households where parents are engaged in their children's learning and school readiness	Very useful indicator. The measure (evaluation instrument) should be specified in the indicators chart and a rate should be calculated given the cohort base.

Sub-Category: Early Childhood Intervention Services

The field of early childhood intervention services (ECI) for children with developmental delays, malnutrition, HIV infection, disabilities and atypical behaviours is expanding rapidly from industrialised countries (Europe, the Americas, Australia and New Zealand) to Eastern Europe, Africa and Asia. Countries with high levels of poverty and malnutrition especially require these individualised and intensive services but due to perceived barriers regarding costs and human resources, this essential category of ECD services has been left for last in many LAMI countries. Now these countries are adding indicators for specialised ECI services that are in line with national ECI programme policies and procedures and the often dramatic and urgent needs they face with respect to child status and development. Children falling into these categories often amount to as much of 45% of the population of children from birth to 6 years of age in countries with high levels of poverty, natural disasters, chronic illnesses and/or conflict.

Output indicator topics relating to ECI services included: types of ECI services; ECI service expansion; availability of specialised personnel to train, supervise, monitor and provide services; numbers and rates of children served; amount of screening services provided; rate of home visits per child; and types of children receiving ECI services.

Indicators	Comments
Preventive health care services and early childhood intervention services for special needs children, 0 to 3 years expanded	Very useful indicator. A baseline and targets are needed. Specification of “special needs” should be provided in the indicator or the text.
ECI Services designed and implemented	Very useful indicator. An implementation target should be placed in the indicators chart.
Number of regional health authorities with at least one child development therapist per parish to address the needs of children with special needs	Very useful indicator. It will need to be adapted by countries to include an array of professionals such as early interventionists, types of therapists, supervisors, nurses, social workers and others depending upon availability and training programmes provided.
Percentage of children aged 0 to 3 years monitored and screened for risks	Very useful and essential indicator. In addition to risks, the indicator should state that children should be assessed for developmental delays, malnutrition, HIV infection (depending upon the country), disabilities and atypical behaviours.
Percentage of health centres that provide high quality child well-being services, including screening of children and households to determine those at risk and provide early childhood intervention services	Useful indicator but it should be divided into two indicators, with more specifics given, including: number of well-child check-ups with screenings of children with suspected developmental delays or disabilities, etc. A second indicator could assess the rate of appropriate referrals to ECI services, and subsequent rates of assessments, eligibility and enrolment in ECI services.
Ratio of home visits completed for children with developmental delays or disabilities to the total number of developmentally delayed or disabled children	Very useful indicator.
Number of disabled children receiving early childhood intervention services	Very useful and important indicator to assess ECI services, and to identify the rate of child disability. A timeline should be provided. The rate should be provided as well.
Number of children under the age of 2 receiving specialised services for child development	Very useful indicator. However, the type of specialised services should be stated clearly as well as the types of children served. The percentage should also be calculated.
Ratio of children receiving home visits who demonstrate specific vulnerability to total	Very useful indicator, although usually home visits are limited mainly to children who are at-risk, high-risk, developmentally delayed,

number of children receiving home visits	malnourished, HIV infected or disabled.
Number of children receiving services for high risk conditions	Vague indicator. The high-risk conditions and the types of services should be specified in the indicator and/or the text.
Percentage of children with developmental delays or disabilities receiving specialised services	Very useful indicator. The types of specialised services should be named or described in the text.

Sub-Category: Education

These indicators are arrayed across the life cycle because education targets are usually defined by age. They range from ECD and preschool services to adolescent youth that, while not strictly related to ECD planning, may be included in some countries' ECD policies and/or plans to assess youth outcomes or to quantify youth-centred activities aimed at improving future parenting. Many indicators referred to trained professionals, paraprofessionals and preschool and school pupils.

Indicators in education were arrayed by the following sub-headings:

- Integrated ECD services, centres and community support (children 0 to 6 years)
- Preschools (3 to 6 years)
- Primary schools
- Child, youth play and leisure
- Youth or adult services

Given that the policies and strategies focus on ECD, the last two categories were surprising.

Education indicators included the following topics: types of services; service expansion targets; enrolment rates per service and per type of child, youth or adult; quality improvement of services; professional status of personnel; service registration and accreditation or licensing; type and amount of community participation and especially oversight; and types of additional services found in ECD programmes.

Indicators	Comments
<i>Integrated ECD Services, Centres and Community Support (Children 0 to 6 years)</i>	
Early childhood care and development services, 0 to 6 years, expanded	Useful indicator but too vague. It would become useful if the types of services and targets for expansion were to be provided. This indicator should be broken down by age range and by type of service.
Enrolment in ECD Centres increased	Very useful indicator if a baseline is provided along with a target.
Community Integrated ECD Centres expanded and improved	Very useful indicator if greater specification is provided regarding expansion and improvement. In countries with community

	IECD Centres, this is a key indicator.
ECD programmes for survival, growth and development of children aged 0-8, especially in rural and urban poor communities expanded increasingly by 2020	Useful indicator area but this one is too general unless it is used as a “cap” indicator for many more specific indicators. The services should be specified along with their targets for expansion. The targeting should be presented in phases until 2020.
Percentage of early childhood institutions that are fully registered and licensed	Very useful indicator. The types of institutions should be clearly specified. (This indicator should also be used for preschools.)
Percentage of early childhood practitioners that are licensed	Very useful indicator, especially for countries that have developed licensing systems. If they have not done so, an indicator should be added regarding the development of a licensing system.
Percentage of early childhood practitioners receiving subsidies	Less useful. Usually subsidies are provided to establishments rather than to practitioners. Therefore, this may not be a generally useful indicator. If it were to be changed to “salaries” of certain levels and the development of salary scales, then this type of indicator would be more useful.
Percentage of ECD centres for children aged 3 with trained teachers	Very useful indicator. The level of training should be specified. This indicator should also pertain to formal preschools.
Number of ECD centres built	Very useful indicator. It should also include “built, equipped and functioning according to basic criteria.” Another related indicator could deal with sustainability.
Number of community groups for ECD formed and mobilised	Very useful indicator. It is especially useful for community-based ECD centres.
Guidelines for parent-community oversight of ECD Centres prepared	Very useful indicator. Research has shown that community oversight is an essential element for achieving long-term sustainability.
Percentage of villages with a Village Development Association	Very useful indicator. This indicator should state that the VDA plans, implements and oversees local ECD services. Otherwise it would appear not to be pertinent.

Preschools (Children 3 to 6 years)	
National policy on preschool education developed and published	Very useful indicator. A target date is needed.
Preschools expanded and improved	Potentially a useful indicator but it is vague. Targets are needed, and for many countries, the types of preschools should be specified as well as the criteria for improvement.
Number of children 3 to 6 served by ECD Centres	Very useful indicator. In addition the percentage of children 3 to 6 years served should be specified.
Preschool and ECD curriculum and materials designed	Very useful indicator. However, it would be important to add: "field-tested, revised, produced, distributed and used in pre- and in-service training."
Number of ECD centres or preschools, which provide services for children with learning disabilities increased	Very useful indicator. More countries should include similar indicators for inclusive preschool and primary education.
Primary Schools	
Number of children receiving primary school nutrition services	Very useful indicator. It should note the types of children or populations served. A similar indicator should be provided for ECD centres and preschools.
Number of children who access primary school health services	Very useful indicator. This indicator should extend to all children and the types of services should be specified. A similar indicator is needed for ECD centres and preschools.
Child/Youth Play and Leisure	
Number of play/leisure centres for preschool children	Useful indicator. However, it is unclear as to whether these are playground centres or play activity centres in preschools. Greater specification is needed.
Rate of use of play/leisure centres for preschool children	Same comment as above.
Number of children/adolescent youth who receive recreational, leisure or sport activities	This indicator is vague and unspecified. Countries need to assess the priority of this output for young children.

Youth or Adult Services	
Number of villages with youth or adult literacy programmes	Possibly useful indicator for some countries. Some ECD services include youth and adult literacy services so this indicator might be useful. However, the indicator should note that the literacy programme is related to one or more ECD services. If not, it is not a legitimate output for ECD services.
Number of villages with a micro-credit programme	Same comment as above.
Number of adolescent youth who receive conflict resolution training	Same comment as above. This may or may not be related to an ECD service. Greater specification is needed. Young children, their parents and teachers can profit from conflict resolution and education for peace services. This indicator could be changed to address such services.

Sub-Category: Child Health

Child health outputs should be robust and comprehensive because they measure a country's investment in child health. More indicators need to be added to the ones listed regarding the numbers of children receiving essential preventive and primary health services. These output indicators were surprisingly incomplete. They included the following topics: numbers and rates of children receiving immunisations, treatment for malaria, and services to combat parasites.

Indicators	Comments
Number of infants receiving all vaccinations	Very useful indicator. Greater specification regarding immunisations is needed and the proportion of children receiving them is also essential.
Number of infants receiving treatment for malaria	Very useful indicator if the country has malaria, and if the indicator is revised to say, "Number of infants/young children diagnosed as having malaria receiving appropriate treatment."
Services to combat parasites increased	Very useful indicator for specific tropical countries. Additional indicators could be listed regarding specific major diseases, worms, and other health conditions found affecting young children in each country, such as diarrhoea and respiratory illnesses. A baseline is needed to assess the

	increase in services.
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Sub-Category: Child Nutrition

Child nutrition is critically important because many mothers and families in LAMI countries are malnourished and lack adequate nutritional services. To the extent possible, these and other nutrition output indicators should be standard across all countries, depending upon need for each specific indicator.

Child and maternal nutrition indicators included: numbers of women and children receiving services; types of nutrition and stimulation services provided; and service expansion.

Indicators	Comments
Number of women receiving nutritional services	Very useful indicator. However, greater specification is needed regarding the types of women and of nutritional services and the rates of women needing and receiving nutrition should also be provided.
Number of infants and young children receiving nutritional services	Very useful indicator. However, the types of infants, children and nutritional services need to be specified.
Nutrition rehabilitation and stimulation services expanded	Very useful and important indicator because it combines two essential services for overcoming malnutrition. A baseline is needed in order to assess expansion. The proportion of malnourished children served with both components (as opposed to only nutritional rehabilitation) should be secured.

Sub-Category: Sanitation, Water and Hygiene

These indicators reflect investments in improving services and expanding access to potable water, good waste management and parent education in hygiene. They should pertain to a variety of settings including especially homes, ECD centres and schools. Indicator topics included the presence of village water pumps and wells, and the rate of access to clean water. More indicators are needed with regard to waste management and hygiene.

Indicators	Comments
Number of villages with a water pump/well	Very useful indicator.
Rate of population with access to clean water	Very useful indicator. It would also be important to specify access to latrines or toilets for ECD centres and

	preschools.
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Sub-Category: Child and Social Protection

These output indicators refer to services that countries have developed to protect their most vulnerable children and mothers. Each country will have indicators for protection issues that are unique to its socio-economic, cultural and governance circumstances. To the extent possible, some core protection indicators should be used across countries with respect to birth registration, protective services, family preservation, and services for orphaned children (especially from birth to 3 years of age) through placement with caring guardians, foster or adoptive parents.

The indicator topics included: improvement of birth registration systems; numbers of children registered; organisation and coordination of child protective services; types of protective services implemented; screening of children in conditional cash transfer programmes; services regarding gender-based and domestic violence; protective services for at-risk population groups; services for orphaned children, especially at early ages; rate of judicial sentences related to domestic violence; developmentally appropriate services for young children requiring protective services; services for children affected by conflict; and the training of civil servants regarding child rights.

Indicators	Comments
Number of Civil Registry Offices for birth registration established	Very useful indicator for countries that lack good birth registration systems. Other indicators are usually used, such as the following one.
Number of children with birth registration (urban and/or rural)	Very useful indicator. Number and proportion of registered children by age are needed. The urban/rural breakdown is useful. Often indicators give a time limit, such as “Number of children with birth registration within one month of birth.” Also “rate of birth registration” is an important indicator.
Coordination, organisation and provision of protective services for children 0 to 6 improved	Useful indicator but it is too general. Greater specification is needed regarding the types of protective services and the criteria required to assess improvement.
Number of family preservation, therapy and counselling services implemented	Very useful indicator.
Number of orphans	Useful for assessing the reduction of the rate of orphans placed in institutions. Greater specification is needed.
Percentage of households benefiting from a conditional cash transfer programme that are screened for child development risks	Very useful indicator. In addition to child screening, for countries with CCTs, it would be advisable to have an indicator to measure the use of specific ECD services that are conditions

	for receiving a CT.
Key services for young children and mothers affected by gender based violence improved	Very useful indicator. However, the services need to be specified. Criteria of improvement should be provided in the indicator chart or text.
Number of vulnerable/at-risk population receiving ECD services	Very useful and critically important indicator with additional specifics provided. The proportion should be also requested and the ECD services specified.
Protective services for orphaned and vulnerable children 0 – 6 expanded	Very useful indicator. A baseline and target are needed.
Number of judicial sentences against perpetrators of violence against pregnant women	Less useful indicator. This is a very specialised indicator that may or may not be useful for reducing violence against pregnant women. The rate in relation to the number of cases known to law enforcement agencies and/or brought to court may be more important than the number.
Number of judicial sentences against perpetrators of infanticide	Same comment as above. This depends upon the incidence of infanticide in the particular culture and an assessment of what will reduce or end it.
Rate of youth with criminal records, and of youth in rights-based rehabilitative services for those with records	This indicator is not directly useful for ECD services. It may be useful for longitudinal studies but those are rarely included in ECD strategies.
Developmentally appropriate services provided for children living [on the streets or] in prison	Useful indicator. However, indicators for street children and children living in prisons should be presented separately. This indicator appears to pertain mainly to young children living in prison.
Children and partners of ex-combatants can access ECD services	Very useful indicator for countries affected by conflict. The types of ECD services should be specified. An indicator for the rate of service utilisation should be added.
Number of orphanages	Potentially useful indicator for specific countries seeking to reduce the number of orphanages and in countries overwhelmed with HIV-affected orphans. Major efforts are being made internationally to ensure all orphans from 0 to 3 years are placed in family or foster homes. This is a specialised indicator, and more details should be provided to understand the context. It would also be useful to include indicators on the rate of placement into orphanages and the average length of stay in an orphanage. The

	status of an orphaned child should also be provided: "social orphan;" HIV-affected orphan; orphan due to conflict, etc.
Number of civil servants trained in child rights	Useful indicator related to child rights but the baseline should be defined to assess the proportion of persons trained, and the types of civil servants should be specified.

Sub-Category: Pre- and In-Service Training

These output indicators reflect investments in workforce development. They include both pre- and in-service training, and they should cover all major types of professional, paraprofessional and volunteer ECD personnel in each country. The diversity of ECD workers and of indicators pertaining to them reflects the extent to which countries recognise the multisectoral nature of ECD policy planning and programme development.

The output indicators related to pre- and in-service training include: numbers and types of specialists receiving pre-service training; provision of evidenced-based training; improvement of pre- and in-service training programmes and/or systems; training and certification systems; numbers and rates of teachers and ECD facilitators, other paraprofessionals and midwives trained; required amounts of annual in-service training per type of personnel; and training of educators in the contents of the ECD policy and plan. Many other topics could be considered depending upon the types of ECD services and personnel found in each country.

Indicators	Comments
Number of specialists trained (pre-service training in health, nutrition education, ECD, etc.)	Very useful indicator that needs greater specification. Indicators are needed for the development and/or improvement of pre- and in-service training systems. This indicator requires better specification of the types of specialists who need pre-service training and the annual training target, as a minimum.
Evidence-based ECD curriculum implemented in the university syllabuses for undergraduate students	Very useful indicator and a good indicator topic. An assessment would be needed.
Pre- and in-service training improved	Very useful indicator if criteria for improvement are provided. The indicator should be split into pre-service and in-service training, and potentially by type of training and by type of trainee.
Number of care givers and teachers trained and certified	Very useful indicator. However, the types of training should be specified and classified as pre- or in-service training. Requirements for maintaining certification or for recertification should also be the subject of an indicator, as

	appropriate.
Number of ECD facilitators trained	Very useful indicator. The types of training, duration and competencies should be specified.
Number of ECD facilitators trained in health and nutrition	Very useful indicator but several indicators will be needed if training areas are to be listed separately.
Number of midwives trained	Very useful indicator. The type of training should be specified.
Number of hours of in-service training provided per teacher	Very useful and essential indicator. The type of training should be specified. Variations regarding credits or days may be used in some countries. Teacher standards or regulations should stipulate the requirements for in-service training for all ECD personnel.
Percentage of teachers and community educators trained	Same comment as above. This indicator could be linked with the prior indicator.
Number of educators whose training included aspects of the ECD National Plan in their training and curriculum	Useful indicator for promoting and improving ECD services in line with the national plan.

Category: ECD Outcomes

ECD outcome indicators are intrinsically the most important area of indicators. The EFA Goal One calls for nations to expand and improve child development, especially for the most vulnerable and marginalised populations. Many outcome indicators were found in the policy instruments collected for this study. They are arrayed as follows:

Indicator Categories	Sub-Categories
ECD Outcomes	Maternal, Prenatal, and Post/Neonatal
	Parent Education and Support
	Child Development, Delays and Disabilities
	ECD and Preschool Services and Centres
	Education: Primary School
	Education: Secondary School and Youth
	Child Health

	Child Nutrition
	Sanitation, Water and Hygiene
	Child and Social Protection

Sub-Category: Maternal, Prenatal and Post/Neonatal Outcomes

Maternal and infant outcomes are very important for assessing the results of preconception education, prenatal education and care as well as of postnatal and neonatal services. Many countries are now giving special attention to this area.

The topics of indicators under this sub-category include: rates of contraceptive use; fertility and birth rates; increased access to prenatal education and care; maternal malnutrition rate; weight/BMI of pregnant women; malaria prevention; rate of provision of minerals, vitamins and immunisations; rates of adolescent pregnancy and of types of high-risk pregnancies; rates of HIV and STDs in pregnant women; and incidence of domestic abuse affecting pregnant women.

Indicators	Comments
Rate of contraceptive use	Very useful indicator.
Fertility rate	Very useful indicator but it depends on country needs.
Birth rate	Same comment as above.
Increased access to prenatal care and education for all pregnant women	Very useful indicator. A baseline is needed.
Rate of maternal malnutrition	Very useful indicator. The type of malnutrition should be specified in a chart or in the text.
Percentage of women with normal body mass index in the first trimester	Useful indicators but perhaps not the best. Although useful and predictive, BMI is also important in the second and third trimesters.
Percentage of women receiving anti-malaria medication during pregnancy	Very useful indicator for countries with malaria.
Rate of TB vaccination (during pregnancy)	Not a good indicator. Although TB vaccination is given to pregnant women in many LAMI countries, it is not recommended for pregnant women. This vaccination should be given several months before pregnancy.
Percentage of women receiving a tetanus toxoid vaccine during pregnancy	Very useful indicator. This vaccine can be given safely during pregnancy.
Percentage of women receiving Vitamin A	Very useful indicator, especially in countries

supplements	where women register low intake of Vitamin A.
Rate of maternal anaemia	Same comment as above.
Rate of teenage pregnancy	Very useful indicator especially in countries with high levels of adolescent pregnancies, which usually are high risk.
Prevalence of sexually transmitted infections (STI) in adolescent girls	Very useful indicator for countries with high levels of STI.
Prevalence of HIV in pregnant women	Very useful and essential indicator for all countries.
Rate of mother-to-child transmission of HIV	Same comment as above.
Percentage of hospitalisations due to high-risk pregnancy	Very useful indicator.
Percentage of medically attended births	Very useful indicator.
Percentage of deliveries accompanied by husband/family members	Useful indicator but not critically important in terms of survival. It is important for paternal bonding with the infant and it can be valuable for the mental health of the mother.
Percentage of mother and infants receiving health services in the first 7 days after birth	Very useful indicator.
Maternal mortality rate	Very useful indicator.
Mortality rate for HIV infected infants and children	Very useful indicator.
Rate of women exposed to domestic violence/abuse	Useful and important indicator topic but it is hard to measure. “Rate of women affected by domestic violence or abuse” is a better wording but still hard to measure.
<i>Rate of reported deprivation in women (no definition provided in text)</i>	This indicator not useful because it is vague and confusing. It probably refers to poverty and is not necessarily amenable to change rapidly solely through ECD services.

Sub-Category: Parent Education and Support

Outcome indicators related to parent education and support, including the assessment of home environments, are increasingly being used in ECD policies and strategic plans. This is reflected in the

large number of inputs and outputs pertaining to parent education that were found in the ECD policies and strategic plans secured for this study. A word of caution: the tendency to interpret major results from single, very limited indicators needs to be given careful scrutiny. Often a complete instrument with at least face validity should be used rather than just one indicator taken from that instrument (such as single items from the Caldwell HOME).

Outcome indicators for parent education and support include the following topics: improvement of parenting knowledge, skills and behaviours; parental confidence and abilities; Improvement of stimulation levels of the home environment; cultural and linguistic appropriateness of the parent education and support services; and improvement of home environments in various dimensions due to parenting services.

Indicators	Comments
Improved observed parenting skills and behaviours	Very useful indicator. A reliable observation measure should be used.
Improved maternal knowledge of child development and care giving	Same comment as above.
Rate of improvement of care givers to handle children appropriately	Same comment as above. A baseline is also needed.
Extent to which families are confident and have the capabilities to support their children's development	This indicator should be split into two indicators: one on parental confidence and one on skills in supporting child development.
Number of households with at least 3 books/toys	Useful but limited indicator that is not useful in some countries with strong oral traditions but few commercial toys or books for children or adults. This indicator then becomes a measure of poverty or a lack of participation in market exchange activities. Furthermore to assess the home environment and/or the level of home stimulation, additional indicators in a valid instrument are needed.
Improved home environments for children	Useful general indicator; however, a reliable measure must be used and a baseline is required.
Children's environments are nurturing, culturally appropriate and safe	Same comment as above. Furthermore, additional instruments regarding cultural appropriateness and home and/or centre safety are needed.
Hygiene education expanded	Very useful indicator. However, a baseline is needed and criteria regarding the service should be provided.

Components for sanitation, hygiene, safety, injury prevention and first aid for parent education services improved or developed	Very useful indicator. Specific parent education components should be listed, and criteria for improvement will be needed.
Knowledge of hygiene practices increased	<p>Very useful indicator. A baseline is required. Additional areas of parent education should be listed and indicators provided, depending upon the design of parent education components in the country. Most countries now have a long list of parent education components and culturally and linguistically appropriate materials.</p> <p>An additional indicator is needed to ensure that all parent education and support and other child development services are provided entirely in the mother tongue of the family and community.</p>

Sub-Category: Child Development, Delays and Disabilities

International and national assessments of child development, developmental delays and disabilities are relatively new. This field is growing rapidly in LAMI countries. However, few validated instruments exist that can be used easily and reliably at national levels. Some have been used effectively and new child assessments are being developed that could be considered for international use. It is essential to specify the instrument or measure that will be used in each instance.

The following types of topics were found with respect to outcome indicators on child development, delays and disabilities: rates of children born with disabilities; rates of children who develop delays at specific ages (age bands); rate of child assessments conducted; improved systems for child screening and identification regarding delays and disabilities; rate of achievement of developmental goals (as stated in IFSPs); and parental access to knowledge and services for children with developmental delays and disabilities.

Indicators	Comments
Percentage of children born alive and without disabilities	Reworded, this would be a very useful indicator. It is usually expressed along the following lines: "Rate of infants with disabilities identified at birth."
Ratio of children achieving normal development	<p>Inadequately worded indicator. It would be better expressed as "Rate of children identified as having a developmental delay or disability" mainly because they become the cohort requiring ECI services.</p> <p>"Normalcy" is not used as a term.</p>

Rate of children with development delays	Very useful indicator. However, it could be better stated as “Rate of children identified as having one or more developmental delays.” The assessment instrument selected and the criteria for developmental delay need to be stated.
Proportion of children aged 2 to 9 with at least one disability	<p>This indicator is also inadequately worded. To be more precise, “Percentage of children from 24 months to 9 years identified as having at least one disability.” Most attention is now being given to children from birth to 36 months in order to improve early development. Therefore, the following indicator might best be used: “Number of children identified as having one or more disabilities from birth to 36 months of age.”</p> <p>An additional indicator is needed to assess the rates of services for such children. For example: “Percentage of children identified as having one or more disabilities (and/or developmental delays) and in receipt of ECI services.”</p>
Number of children assessed by Early Childhood Intervention (ECI) Services	Very useful indicator. A more complete indicator would be: “Number of children who are believed to have a developmental delay or disability who are assessed by ECI services within 30 days of identification.”
Systems of early detection improved	This indicator is vague. More specific indicators and criteria are needed. Two indicators may be needed: “A system for early detection of infant and child developmental delays and disabilities designed and implemented” and when baseline data are obtained, “System of early detection is improved (and/or expanded).” Criteria and measures for improvement should be provided.
Number of children who achieve development goals	This is a useful and appropriate indicator that can be challenging to measure at the national level. Developmental goals for children with disabilities are specified in Individualised Family Service Plans (IFSP). At the service level, IFSPs and assessments would need to be reviewed to ascertain the achievement of goals on the part of children enrolled in ECI programmes. This could be done on a

	<p>stratified random basis of children served by ECI programmes or only a few ECI services could be sampled.</p> <p>For children with developmental delays, child development assessments would suffice. Developmental goal reviews are needed for children with disabilities because goals are tailored to the expectations of their parents and service providers rather than to the ranges of expected and/or typical levels of child development.</p>
Proportion of families with disabled children who have access to knowledge about specialised services	Useful indicator although it is hard to measure it.
Children have the knowledge and skills required for life and learning	This indicator is quite vague. An appropriate instrument would be needed in certain areas for probably six-year-old children regarding self-regulation, numeracy, pre-literacy or literacy, and other cognitive and language abilities.

Sub-Category: ECD and Preschool Services and Centres

Several preschool outputs are listed by the UIS. However, relatively fewer outcomes have been included to date undoubtedly because they are harder to assess. Nonetheless, in the policy instruments that were reviewed a series of indicators were proposed for preschool outcomes. More could be added.

The outcome topics for ECD and preschool centres included: curriculum use; improvements in infrastructure, equipment and supplies; qualifications of teachers, health personnel and other care givers of children; improvement of various types of preschool education; expansion of enrolments; and benefits to children.

Indicators	Comments
Number of educational centres utilising a new integrated curriculum	Useful indicator. If possible, results should be assessed in terms of teacher competencies and learning on the part of the preschool child.
Number of community centres with improved infrastructure	Very useful indicator. The types of improved infrastructure should be described in the text.
Number of preschools with medical kits	Useful indicator.
Qualifications of teachers, health personnel	Very useful indicator. Other indicators could be added regarding measures of the

and other care givers established	attainment of qualification levels.
Home-Based Preschool Education services improved and expanded	Very useful indicator if criteria and targets for improvement and expansion are provided.
Percentage of children enrolled in preschool	Very useful indicator. It should be related to the total cohort of preschool age children as well as by age of the child (3 year olds, 4 year olds, 5 year olds, and if appropriate, 6 year olds). This is often complicated by the fact that private sector and civil society preschool information is not gathered in many countries.
Rate of gross preschool enrolment increased	Very useful indicator. The baseline must be established and a target provided.
Children are engaged in and benefiting from educational opportunities	This indicator is too vague to be of use. An instrument would be needed regarding children's level of engagement and an assessment of child development during the year. Regarding benefit, many countries will not agree to the assessment of young children in preschool classrooms. In those countries, classroom observations and teacher reports may be the only instruments that could be used at the preschool level. An instrument regarding learning outcomes would need to be selected and applied to assess annual preschool benefits to children.

Sub-Category: Primary School

The outcome indicators for primary school are largely output variables. However, they are widely used as outcomes for investments in preschool education. Many studies have shown that the internal efficiency of primary schools is significantly improved when nations invest in large-scale ECD services from birth to primary school entry. Few indicators were found relating to transition from home or preschool to primary school.

Under this sub-category, the following indicator topics were found: presence or absence of previous preschool experience; enrolments with respect to gender and age; performance/achievement in primary school; internal efficiency of primary school in terms of repetition, attrition, achievement and primary school completion rates; teacher/pupil ratio; culturally and linguistically appropriate primary school education; impact on achieving inclusive education; and provision of primary education to orphaned children.

Indicators	Comments
Percentage of children entering primary	Very useful indicator. A set of related indicators is: "Percentage of children with and

education with previous preschool experience	without preschool experience entering primary education who do not repeat grades (achieve well, do not drop out, and do complete primary school)."
Percentage of girls enrolment in primary school	Very useful gender indicator. In some countries, the focus should be on boys (for example: Jamaica, Lesotho, Mongolia).
Percentage of children enrolled in primary school	Very useful indicator. Following is an important related indicator that was not found but should be used in countries with over-age and/or under-age children in primary school: "Percentage of children with previous preschool experience who enrol in primary school at the expected age."
Enrolment in primary school of children aged 6 to 12	Very useful indicator especially if increased enrolments are sought.
Difference in performance between the highest and lowest quintile of students	Very useful indicator. This equity indicator can be very useful in countries with high levels of educational inequity.
Rate of school drop outs	Very useful indicator.
Rate of grades repeated	Very useful indicator.
Ratio of students to teacher per classroom	This is an interesting but not essential indicator regarding primary school education unless it is used as a control variable. It should be readily available from the national EMIS in any case.
Percentage of children receiving culturally and religiously appropriate education	A preferable indicator might be: "Percentage of children receiving linguistically and culturally appropriate education in their mother tongue." Some countries might want to focus on the religious dimension.
Number of children with disabilities enrolled in school	Very useful indicator. This measure of inclusive education can be complemented by other indicators and related to the presence or absence of ECI and ECD services in the country.
Number of orphans receiving primary education or other services	Very useful indicator. An additional indicator might be: "Percentage of orphans receiving primary education who received preschool education services and/or other ECD

	services.”
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Sub-Category: Education: Secondary School and Youth

It was somewhat surprising to find a number of secondary school indicators included in a few ECD strategic plans. It appears that some countries are interested in conducting longitudinal studies on the impact of ECD services in their countries. It is not recommended that indicators on secondary education be included in ECD policies and strategic plans because (1) country EMIS gather data on secondary education, (2) those data can be used when needed for specific longitudinal studies on the long-term impact of ECD, and (3) only a limited number of high-priority indicators can be included in ECD policy documents.

Indicators	Comments
Rate of enrolment in secondary school of youth aged 12 to 15	This is a long-term indicator that countries should have in their EMIS.
Enrolment in school of youth aged 16 to 17	This indicator is not directly relevant to ECD.
School achievement at age 15 in reading and writing	This is a long-term results indicator, and it may not be available in countries.
Rate of youth aged 18 to 20 who have completed basic education	Same comment as above.
Rate of youth aged 21 to 23 enrolled in higher education	Same comment as above.
Percentage of adolescents receiving education on abortion and infanticide	This indicator could be useful if the country has included adolescent education on preconception, family planning and family living in their ECD policy or strategic plan and in their secondary school and non-formal education services for youth.

Sub-Category: Child Health

Most child health outcome indicators have been carefully honed over the years. Care must be taken to select health indicators that are appropriate for the health conditions of each country. The topics included under this sub-category include: infant and child mortality; HIV status of mothers and children; use of ARV; pre-term and low birth weight status of infants; chronic diseases and illnesses (child morbidity); the presence of worms; and the use of impregnated bed nets and dental hygiene.

Indicators	Comments
Children are born healthy and remain healthy	This indicator is too vague for use. It is a good general goal.

Rate of infant mortality	Very useful indicator.
Rate of under 5 mortality	Very useful indicator.
Rate of HIV in infants	Very useful indicator. An indicator on screening at specific ages for HIV infection should be added due to changes in HIV status among many infants over time.
Rate of mortality among HIV-infected mothers and their children	This indicator should be split into two; one for mothers and one for children, as in the next indicator
Rate of mortality among HIV-infected infants and children	Very useful indicator.
Rate of infants receiving ARV	Very useful indicator.
Rate of infants born pre-term	Very useful indicator.
Rate of infants with low birth weight	Very useful indicator and essential indicator. Most low birth weight infants evidence developmental delays soon after birth. Some countries have not gathered these data carefully or at all. It is important to place emphasis upon this indicator because these infants are at high risk of delays and poor health and malnutrition.
Rate of malaria in infants	Very useful indicator for countries with malaria.
Rate of acute respiratory infection in infants	Very useful indicator for all countries.
Percentage of infants suffering from diarrhoea	Very useful indicator for all countries. Usually this indicator is time limited: "Percentage of infants suffering from diarrhoea during the preceding 2 (or 4) weeks."
Percentage of infants receiving treatment for diarrhoea	Very useful indicator for most LAMI countries.
Rate of infants suffering from guinea worm	Very useful indicator for nations with guinea worm.
Percentage of children who received a deworming tablet in the last 6 months	Very useful indicator for relevant countries. Research has shown that the presence of intestinal worms is directly related to the health, learning abilities and developmental levels of young children.

Number of children under 5 who sleep under a mosquito net	Very useful indicator for countries with malaria and/or dengue fever.
Rate of improved dental hygiene	Very useful indicator. Recent research is showing that dental health (presence or absence of caries) is directly related to malnutrition and child development levels.

Sub-Category: Child Nutrition

Nutrition outcomes measured by rates of breastfeeding and measures of height and weight are essential for ECD indicator lists. In addition, malnutrition measures can be used as proxy variables for the incidence of child developmental delays in countries that lack national surveys of child development.

The topics for outcome indicators related to child nutrition include: breastfeeding rates; rates related to micronutrient use or services; and malnutrition rates.

Indicators	Comments
Number of infants who are breastfed	This indicator is too general. The following two indicators are far better.
Percentage of infants who are breastfed within one hour of birth	Very useful indicator.
Number of infants exclusively breastfed until 6 months of age	Very useful indicator but the percentage is also needed.
Percentage of infants suffering from anaemia	Very useful indicator.
Number of children receiving Vitamin A supplements, or other nutrients	Very useful indicator but the percentage is also needed. Separate indicators are often needed for other nutrients, such as iron, iodine, etc.
Percentage of children receiving iodised salt treatment	Very useful indicator in many countries but not all. Some countries have virtually universal use of iodised salt. Often "Percentage of children living in household using iodised salt" is another way to state this key indicator.
Prevalence of children with stunted growth	Very useful indicator. It might be best stated as, "Percentage of children with stunted growth."
Children under 5 who are underweight	Very useful indicator, along with its measure.

Number of children under 5 who are emaciated	Very useful indicator area. Indicators of malnutrition are usually “stunted,” “underweight” or “wasted” (low weight for height). The latter is also known as “acute malnutrition.” Emaciated as a term is rarely used. This indicator could be stated as: “Percentage of children who are low in weight for height (or “wasted”).
Percentage of chronically malnourished children under the age of 5	Very useful indicator, although the term “chronic malnutrition” can vary in meaning and use from place to place.

Sub-Category: Sanitation, Water and Hygiene

A series of proven sanitation indicators are available for use from the international community. They are directly related to indices of infant and child morbidity and safety. The following indicator topics were found in ECD instruments: improved access in homes, centres, preschools and schools to potable water, good hygiene, and waste management; relationship of sanitation to childhood illness; and the use of sanitary latrines.

Indicators	Comments
Incidence of childhood illnesses decreased due to clean water, absence of poor hygiene and waste management	This indicator is slightly misleading and very broad because childhood illnesses can also be reduced by immunisations and other means. A reworded indicator might be: “Provision of potable water and improved waste management and home hygiene is correlated with a decreased incidence of childhood illnesses (morbidity).”
Access to potable water in homes, schools and health centres increased	Very useful indicator. This indicator needs a baseline, and if possible, a trend line.
Personal home and centre hygiene improved	Very useful indicator, although it is very general. A measure and a baseline are essential for this indicator.
Use of sanitary latrines increased	Very useful indicator. It also needs a baseline. It is usable only in countries with many latrines. Toilets may be substituted as a term for other countries.

Sub-Category: Child and Social Protection

Outcome indicators that are related to child and social protection are still quite experimental. Virtually always, data for these indicators are difficult to gather. Nonetheless, they are very important.

Countries have developed some key indicators, and most of them are directly related to specific child protection challenges in their countries.

The following types of child and social protection outcome indicators were found: poverty levels; child and sexual abuse and domestic violence; service integration levels; child abandonment and divorce; mental health screening and services; child and human trafficking; cultural traditions identified as injurious to children; children living or working in the streets; forced servitude and other forms of abusive child labour; orphaned children; and childhood marriage.

Indicators	Comments
Poverty among families participating in ECD centres and programmes reduced	This is not an essential indicator because child development can be improved without a major increase in family income. Such an indicator can foster false hopes of instant poverty reduction from ECD services. Rather, poverty reduction can usually be seen after a generation has passed. This indicator often constitutes a medium to long-term goal, and it needs a baseline.
Rate per 100,000 of children under the age of 5 who are victims of child abuse	Very useful indicator.
Rate per 100,000 of children under the age of 5 who are victims of sexual abuse	Very useful indicator.
Systems of ECD service integration for different target groups improved	Potentially useful indicator. Greater specification of the criteria for improvement of service integration is needed to assess this important indicator. In addition, target groups should be listed in the text.
Rate of children exposed to domestic violence/abuse	Very useful indicator.
Rate of child abandonment	Very useful indicator.
Rate of divorce among young parents	If this indicator is relevant to the specific population and culture, then this might be a useful indicator.
Number of infants/young children receiving mental health services	Very useful indicator under some circumstances. Screening services might be added: "Rate of infants/young children receiving mental health screening services." And: "Rate of children identified as having mental health problems that are referred to ECI services within 30 days of identification."

Number of female victims of human trafficking	This indicator appears to refer to older girls and women and may not be appropriate to an ECD policy. An indicator for child trafficking might be used if relevant to the country, such as: "Number of infants and young children who become victims of human trafficking reduced."
Rate of female genital mutilation by ethnic group	Very useful indicator for affected countries and cultures within countries.
Rate of forced feeding of young girls by ethnic group (<i>gavage</i>)	Very useful indicator for affected countries and cultures within countries.
Number of known "child witches"	Very useful indicator for affected countries and cultures within countries. A baseline would be needed. It would be good to add an indicator such as "Education to prevent the identification of children as "child witches" provided." And, "Identification of "child witches" eliminated in the culture."
Rate of placement of street children into host families	Very useful indicator.
Rate of street children reduced	Very useful indicator.
Percentage of children in forced servitude	Very useful indicator.
Number of children engaged in abusive child labour or the workforce	Very useful indicator but it should specify child age from 3 to 8 years of age.
Percentage of orphaned children living with distant relative	Very useful indicator. Other places where orphaned children live could be added.
Rate of childhood marriage reduced	Very useful indicator.

Frequency of country indicator use

Annex 5: Chart of ECD Categories and Sub-Categories by Country presents the frequencies of country indicators. This chart permitted the authors to conduct an assessment of the overall priority that national ECD planners have given to different types of indicators. The following was found:

Frequency of ECD Indicators by Category

Category	Frequency
ECD Outcomes	294

ECD Outputs	179
ECD Structure and Governance	86
ECD Inputs	51
ECD Processes for Implementing Services	47
Demographic and Economic Indicators	16
Total indicators	673

ECD planners placed the greatest emphasis on establishing indicators for ECD service outcomes and outputs. This demonstrates that planners are sensitive to requests for “results,” and this is an important finding.

The positive focus on results should help to promote the implementation of the HECDI and the development of national ECD monitoring and evaluation systems.

Indicators regarding ECD structure, governance and inputs follow indicators on outcomes and outputs, reflecting the importance of developing and coordinating ECD systems and services. Demographic and economic indicators were the least used.

The types of indicators were then arrayed by specific sub-categories.

Frequency of ECD Indicators by Sub-Category

Sub-Category (Category)	Frequency
Structures/Infrastructure (ECD Structure and Governance)	77
Child Health (ECD Outcomes)	60
Maternal, Prenatal, and Post/Neonatal (ECD Outcomes)	49
Child Nutrition (ECD Outcomes)	43
Education: Primary School (ECD Outcomes)	33
Child and Social Protection (ECD Outcomes)	33
Education (ECD Outputs)	33
Child and Social Protection (ECD Outputs)	28
Monitoring and Evaluation (ECD Processes)	25

Maternal, Prenatal, and Post/Neonatal (ECD Outputs)	25
Pre- and In-Service Training (ECD Outputs)	24
Financial (ECD Inputs)	22
Parent Education and Support (ECD Outputs)	21
Parent Education and Support (ECD Outcomes)	21
ECD and Preschool Services and Centres (ECD Outcomes)	18
Child Development, Delays and Disabilities (ECD Outcomes)	17
Human Resources (ECD Inputs)	16
Child Health (ECD Outputs)	16
Demographic (Demographic and Economic)	13
Services/Service Infrastructures (ECD Inputs)	13
Sanitation, Water and Hygiene (ECD Outcomes)	13
Early Childhood Intervention Services (ECD Outputs)	13
Policy Advocacy and Social Communication (ECD Processes)	12
Service Implementation and Coordination (ECD Processes)	10
Sanitation, Water and Hygiene (ECD Outputs)	10
Governance Issues (ECD Structure and Governance)	9
Child Nutrition (ECD Outputs)	9
Education: Secondary School (ECD Outcomes)	7
Economy (Demographic and Economic)	3
Total	673

This listing reveals that at the sub-category level, major emphasis had been placed on monitoring the establishment of ECD structures, child health, maternal prenatal and post/neonatal outcomes as well as child nutrition, education at the primary school level and protection outcomes.

Yet because of overlaps between and among sub-categories, the analysis was further refined and the sub-categories were clustered as follows:

**Frequency of ECD Indicators
Clusters of Sub-Categories**

Sub-Category (Category)	Frequency
ECD Structures, Governance, Processes, & Service Inputs	
Structures/Infrastructure (ECD Structure and Governance)	77
Monitoring and Evaluation (ECD Processes)	25
Financial (ECD Inputs)	22
Human Resources (ECD Inputs)	16
Services/Service Infrastructures (ECD Inputs)	13
Policy Advocacy and Social Communication (ECD Processes)	12
Service Implementation and Coordination (ECD Processes)	10
Governance Issues (ECD Structure and Governance)	9
Sub-Total	184
Health	
Child Health (ECD Outcomes)	60
Child Health (ECD Outputs)	16
Sanitation, Water and Hygiene (ECD Outcomes)	13
Sanitation, Water and Hygiene (ECD Outputs)	10
Sub-Total	99
Nutrition	
Child Nutrition (ECD Outcomes)	43

Child Nutrition (ECD Outputs)	9
<i>Sub-Total</i>	<i>52</i>
<i>Health and Nutrition Totals Combined</i>	<i>151</i>
Maternal, Prenatal, Post/Neonatal & Parent Education	
Maternal, Prenatal, and Post/Neonatal (ECD Outcomes)	49
Maternal, Prenatal, and Post/Neonatal (ECD Outputs)	25
Parent Education and Support (ECD Outputs)	21
Parent Education and Support (ECD Outcomes)	21
<i>Sub-Total</i>	<i>116</i>
Education and ECD Centres	
Education: Primary School (ECD Outcomes)	33
Education (ECD Outputs)	33
Pre- and In-Service Training (ECD Outputs)	24
ECD and Preschool Services and Centres (ECD Outcomes)	18
Education: Secondary School (ECD Outcomes)	7
<i>Sub-Total</i>	<i>115</i>
Child Protection	
Child and Social Protection (ECD Outcomes)	33
Child and Social Protection (ECD Outputs)	28
<i>Sub-Total</i>	<i>61</i>
Child Development & Early Childhood Intervention	

Child Development, Delays and Disabilities (ECD Outcomes)	17
Early Childhood Intervention Services (ECD Outputs)	13
Sub-Total	30
Demographic and Economic	
Demographic (Demographic and Economic)	13
Economy (Demographic and Economic)	3
Sub-Total	16
Total	673

The clusters above reveal important overall tendencies in the complex sets of indicators that countries used in their ECD policies and strategic plans.

The number of indicators regarding ECD policy planning, including structures, governance, processes and service inputs, ranks highest with 184 indicators or 27.3%.

This demonstrates that the multisectoral organisation of ECD systems is critically important to national ECD planners. In countries with integrated services, indicators on integrated services are nested within multisectoral organisation and coordination.

The second grouping (151 indicators or 22.4%) is a cluster of indicators related to the health sector, including sanitation and nutrition. The importance of the health sector to good child development and the strength and general reliability of health indicators are reflected in this placement.

The third cluster related to maternal, prenatal and post/neonatal as well as parent education and support services (116 indicators or 17.2%). It is virtually tied with education. This cluster is of necessity multisectoral. Nations are increasingly developing multisectoral coordination and integrated services to ensure that services from preconception/prenatal to 36 months are given adequate support and attention. **The large number of indicators for this area demonstrates the priority that countries are beginning to place on child development and parenting services for the foundational period of zero to 3.**

Most policy analysts have thought that ECD indicators would focus mainly on the education sector because education ministries are very powerful, have large budgets, and often lead national multisectoral ECD efforts. However, education is listed third (115 indicators or 17.1%). Education achieved this level only because the education cluster includes preschool, primary school, secondary school/youth plus ECD centres and pre- and in-service training. In some countries ECD centres are integrated and they could have been placed elsewhere. Nonetheless, because they often are guided by the education sector, they were placed here.

Following education, the indicators found related to child protection (61 or 9.1%) and the emerging multisectoral sub-field of early childhood intervention (30 or 4.5%). As expected, demographic and economic indicators received the least attention (16 or 2.4%).

The next chapter presents recommendations for national planning regarding ECD monitoring and evaluation, indicators for EFA measurement, suggestions on crosscutting variables, and indicators related to policy planning that might be considered for use in national ECD monitoring and evaluation systems and in the HECDI.

6. Recommendations regarding Systems and Indicators for the HECDI

This chapter presents a series of recommendations for selecting reliable national policy indicators as well as for selecting indicators for the proposed HECDI. It also presents suggestions for developing sound national ECD monitoring and evaluation systems.

Recommendations are also offered with the objective of helping HECDI specialists to gather reliable and up-to-date national data for HECDI indicators.

Provide positive support for countries to utilise HECDI indicators

The tone and approach of the HECDI will be very important. Some international indices dealing with children's issues have been quite judgemental, and in a few cases even punitive in their approaches. In line with UNESCO's goal of supporting countries as they seek to improve their early childhood policies, plans and services, it would be important to consider the tone and approach that the Index, its database and manual should take. In this regard:

- The HECDI should celebrate the progress of countries rather than "grade" them.
- The HECDI should be a progress report rather than a judgemental report.
- Positive incentives in the form of technical advice, training and financial support for the development and/or improvement of national ECD M&E systems should be included in the HECDI programme.

Create a "single point of contact" for ECD data in each country

To develop the HECDI, it will be essential to have strong, internationally validated ECD monitoring and evaluation systems in each country that will function as "single points of contact." The establishment of these national systems will be challenging but essential. This effort also promises to strengthen national ECD policy planning processes in the future as well as provide more reliable information for international policies and studies on ECD development over time.

It will be essential to develop effective ECD monitoring and evaluation systems in phases, especially in LAMI countries with severe human, technical and financial resource constraints. Stable sources of funding will be required to design, implement and maintain these systems over time. It will also be essential to build strong political support and a mosaic of national and international financial assistance to ensure their long-term sustainability.

Encourage the development of national ECD monitoring and evaluation plans

Most ECD policies and/or strategic plans call for the development of national ECD M&E plans but they provide little detailed information regarding the structures and processes for conducting M&E activities. M&E plans are highly detailed and they require considerable work. M&E plans should not be placed in ECD policy instruments because they are extensive technical documents. However, ECD policies and/or plans should call for M&E plans to be developed, and the activities and tasks for doing so should be provided in the action plan section of the strategic plan.

The action plan should outline activities and tasks for designing and implementing national ECD monitoring and evaluation structures and processes. The strategic plan should also include a chart presenting selected national ECD indicators. Tasks for the development of M&E manuals should be presented, including the preparation of refined indicator lists, timelines, instruments and instrument guides.

Request that nations provide complete information on national ECD indicators

Some ECD strategies provided high-quality, detailed information on their indicators but most of them did not do so. It is recommended that ECD planners be encouraged to present lists of national ECD indicators in their ECD strategies using a format that is similar to the one presented below.

Chart of National ECD Indicators

Indicator	Responsible Agencies or Sources	Measures, Instruments, Criteria	Baseline	Trend Line	Target, Target Date	Budget
Infant mortality rate	MoH	DHS HMIS	1990: 184	1995: 170 2000: 134 2005: 120 2010: 105	2015: 80	\$XXX

Definitions for each indicator should be provided in a separate chart.

Provide technical guidance to national ECD policy planners and statistical personnel

The quality of ECD indicators found in ECD policies and strategic plans varied greatly. Most of them were appropriate to the needs of their countries although many gaps in indicators were found in virtually all countries. Some countries provided a rich array of indicators and others only had a few. Many indicators included in ECD policies and strategic plans were good and important for their countries. Others were notably vague in their wording. Some were double – even triple – indicators, and they need to be deconstructed for use in countries.

Guidance and technical advice and support should be offered to national ECD planners and ECD specialists regarding ECD indicators and setting up ECD monitoring and evaluation systems.

In addition, a manual on indicator development should be prepared that includes guidance regarding topics such as definitions, lists of possible indicators, and typical measures. The manual should also provide instruction on how to form baselines and trend lines and methods for establishing targets.

A second manual will be needed on how to set up an ECD monitoring and evaluation system that is high in quality, accountable and sustainable over time. These systems must serve multisectoral ECD

policy planning processes as well as support the development of integrated ECD systems and services.

Provide training for ECD planners and statisticians on ECD indicators

Once the recommended manuals have been prepared, in-service training workshops could be designed and held for ECD planners and statisticians in many countries, including those with or without ECD policies and/or plans. Training will be essential on how to formulate ECD indicators, gather and collate reliable data, analyse and interpret data, and prepare and distribute annual reports. Training will also be needed on how to develop effective ECD monitoring and evaluation systems.

Some international fellowships might be considered for longer-term graduate training linked to solid commitments to return from studies to work on national ECD monitoring and evaluation systems. For example, the HECDI might offer special training workshops on a regional basis.

Develop indicators and analyses on key crosscutting topics

In addition to the taxonomy presented in Chapter 5, a series of crosscutting indicators should be included for purposes of content focus as well as the analysis of other data. Such indicators must be appropriate to each country's culture, demographic and special circumstances. Allowing for differences, each country's list of ECD indicators might include several of the following crosscutting topics.

Crosscutting ECD Topics
<ul style="list-style-type: none">• Conflict or emergency-affected countries or areas of countries• Developmental delays and disabilities• Linguistic and ethnic groups• Special child and maternal protection issues related to culture• Gender• Geography: region of country• Geography: designation as rural/urban• HIV/AIDS and other diseases (malaria, dengue fever, tuberculosis, etc.)• Poverty level (or income level of families)• Environmental issues (hunger, water, waste management, climate)

In some country documents, national indicators touched upon a few of these crosscutting topics but most indicators were presented without any reference to populations with special needs. It will be very important to ensure crosscutting variables are included in ECD indicators. They should also be used for multivariate analyses and for mapping exercises.

Thus, indicators under these topics can be used both as crosscutting indicators and for purposes of data analysis. For ECD indicators dealing with ECD service inputs, outputs and outcomes, data on the circumstances of populations assessed should also be gathered. These disaggregated data can be clustered for purposes of identifying differences that may be related to these factors. For example, when gathering data on enrolment in preschool at specific ages, data gathering forms could also note the circumstances of the preschool, the children or their parents:

- Whether or not affected by a conflict or another type of emergency;
- Presence or absence of children identified as having developmental delays or disabilities;
- Children belonging to a specific linguistic or ethnic group;
- Gender ratio;
- Geography: note the specific region of country;
- Geography: designate the location as remote rural, rural, town/semi-urban, or urban;
- Presence or absence of HIV/AIDS or other diseases;
- Poverty level and/or income level of families;
- Presence or absence of malnutrition; and
- Presence or absence of potable water and waste management or climate and other environmental issues.

Brief discussions follow regarding each of these crosscutting topics.

Conflict or emergency-affected counties or areas of countries

Very little mention was made of conflict-related situations even though some of the countries included in this study have major community or cross border conflicts. One indicator called for the education of youth in conflict prevention. However, millions of young children in all regions are directly affected by conflict in their communities. Hundreds of thousands of children are internally displaced and many more are refugees. All of them are deeply affected by conflict, and because conflict is highly correlated with the presence of domestic violence, child and sexual abuse, and child neglect, it is essential to include optional variables that will deal with these issues. Under child and social protection, indicators were found regarding the latter. Indicators such as the following might be considered for use:

- Percentage of children (0 to 8 years) affected by conflict, community violence (or IDP or refugee status), who are receiving comprehensive ECD and/or education, health, nutrition and protective services (definition would be provided).
- Percentage of children (3 to 8 years+) and their parents in communities directly or indirectly affected by conflict who receive 10 or more validated peace education modules on appropriate values, attitudes and behaviours including conflict prevention and resolution, communication skills, etc.

Developmental delays and disabilities

Some 28 indicators dealt directly with issues of developmental delay and disability. The topics of malnutrition and HIV infection must be added to these issues because such children virtually always have development delays (Walker et al, 2007; Grantham McGregor et al, 2007). Very few countries have conducted surveys to assess the rates of delays and disabilities. Chile conducted a survey of child development that had a major impact on national child policy (Molina, 2006). Molina discovered that high rates of developmental delay were continuing to occur despite great improvements in child nutrition since the 1970s.

To conduct similar efforts in other countries, national baseline levels for child development need to be established through assessments using a stratified random sample of children from all income levels and all regions. Children could be assessed at three age-bands. If only one age-band could be assessed due to cost factors, the first band listed below would be the most important measure for countries to use as a baseline due to the importance of early brain growth, general child development and the predictive capacity of early assessments (Shonkoff and Phillips, 2000). The second age band would be next in importance.

- 9 to 15 months
- 24 to 36 months
- 48 to 60 months

Indicators that could be considered are:

- Percentages of developmental delays in children from birth to 60 months by geographic region, economic level and possibly ethnicity.
- Percentages of disabilities in children from birth to 60 months by geographic region, economic level and possibly ethnicity
- Percentage of improvement in national levels of child development over baseline (targets would be established by policy planners of each country)

Assessment and cost issues are considered to be major barriers to conducting national level surveys of child development. However, these challenges can be overcome.

A common instrument for assessing child development might be used in all or most countries. However, it would need to be linguistically and culturally adapted for use in each country and with each country's ethnic and language groups. An easy-to-use manual and a set of testing materials would also be needed.

A second option would be to ask each country to select its own assessment tool and require that the tool meet certain standards. Then countries would try to meet their targets with their own instruments.

A third option might be to select a balanced array of questions to ask of mothers. The questions would cover all child development areas: perceptual, fine motor, gross motor, social, emotional, language and cognitive. They would be leading items and developmentally appropriate for each age band. Thus maternal report would replace child assessments. Of course, a child assessment would be preferable because, if well conducted, it would yield more objective results. However, maternal reports on child development are usually quite reliable and interviewing mothers requires less training of interviewers and less time in the field. In addition, they usually cost less. Finally, children could be reliably weighed and measured to secure an assessment of nutritional status at the time of the child assessment and/or maternal interview.

This exercise would help nations to secure reliable and potentially comparable data on developmental delays, malnutrition and disabilities for use in planning and targeting ECD services and systems. Later, depending upon the sampling, the data might also prove to be useful as child development outcome measures across different types of ECD services.

Linguistic and ethnic groups

Abundant research has demonstrated that ECD services should be provided in the mother tongue. Jessica Ball provided a major literature review of this topic for UNESCO (Ball, 2010). This study showed that the mother tongue should be used as the language of instruction not only for ECD services but also for primary school education well into the upper grades in order to improve learning outcomes and help ensure the successful acquisition of second and third languages.

During the review of ECD policies and plans, no indicators were found that were related directly to language, although several policy documents called for the use of the mother tongue for ECD services.

Given the importance of this topic to learning and cultural preservation, the HECDI should include one or more indicators on this topic, such as:

- Percentage of parents from marginalized linguistic or ethnic groups who receive parent education and support services in their mother tongue
- Percentage of children from linguistic minority groups who receive ECD home visits and learn in their mother tongue
- Percentage of children from linguistic minority groups who learn in their mother tongue in ECD centres and preschools
- Percentage of children from linguistic minority groups who learn in their mother tongue through the fourth grade of primary school

Special child and maternal protection issues related to culture

Several indicators were found regarding children who are abused or neglected, family violence especially against women, maternal depression, and abusive child labour. In addition, some indicators were found related to injurious cultural practices, such as:

- Rate of female genital mutilation (cutting) by ethnic group
- Rate of forced feeding of young girls by ethnic group (*gavage*)
- Number of known “child witches”

It is unnecessary to add more culturally specific indicators to this list at this time; however, national ECD planners should be aware of the importance of including such indicators as the need arises in their countries. International ECD specialists should encourage national planners to place adequate emphasis upon these topics that are central to child and maternal rights and good child development in specific countries.

Gender

Interestingly, gender did not overtly appear among the indicators. It is possible that ECD planners expected it to be a crosscutting variable, as is the case with preschool education.

It is important to ensure gender equity is overtly assessed using specific indicators. This is especially the case in countries with the “missing young girls” phenomenon and/or with lower rates of girls served by health centres, nutrition rehabilitation services, preschools and primary and secondary schools. It is

often the case that good gender balances in ECD services, and especially in preschools, help achieve improved gender equity in primary school (UNESCO, 2006).

Indicators on gender should be included in all countries, such as:

- Rate of mortality of young girls from birth to age 6
- Percentage of girls and boys enrolled in comprehensive ECD services (to be listed)
- Ratio of girls to boys in preschool
- Percentage of girls completing at least two years of preschool education
- Percentage of fathers participating in parent education and support services
- Ratio of girls to boys in primary school

Geography: region of country

In many countries, the most vulnerable children are found in remote rural communities, in populations living in severe or extreme poverty, and in low-income urban neighbourhoods. Under economic indicators, recommendations were made to include the following variables:

- Extreme poverty: Percentage of population living under US \$1/day
- Severe poverty: Percentage of population living under US \$2/day
- Percentage of population living in impoverished rural areas
- Percentage of population living in impoverished urban areas

The following variables might be added to focus sharply on the most vulnerable populations living in specific geographic and cultural regions of countries:

- Percentage of children 0 to 6 years of age participating in comprehensive (or specific) ECD services in X regions of the country
- Percentage of children living in extreme (or severe) poverty participating in comprehensive (or specific) ECD services in Y regions of the country

Geography: designation as rural/urban

Several indicators did note the importance of distinguishing between urban and rural populations. This is a critically important designator for social development. Specific indicators could be formulated and a rural to urban continuum might be used, such as: remote rural, rural, town/semi-urban, or urban. The following types of indicators could be considered:

- Percentage of children 0 to 5 years living in remote rural, rural, town/semi-urban, or urban areas who participate in comprehensive (or specific) ECD services
- Percentage of children 5 to 6 years living in remote rural, rural, town/semi-urban, or urban areas who participate in services for preschool and transition to primary school

HIV/AIDS and other diseases (malaria, dengue fever, tuberculosis, etc,)

It was encouraging to find many indicators related to HIV/AIDS and the importance of combining services for early stimulation with health and ARV services. In addition, attention was also given to malaria, tuberculosis, diarrhoea and respiratory infections – all of which contribute greatly to child mortality and chronic morbidity. No additional indicators are needed at this time. However, in certain countries, these indicators should be considered as options for use in ECD policy planning. They will

also be important for regional and cross-regional studies (for example, malaria prevention and treatment as related to child development in Haiti and the Central Africa Republic.)

Poverty

Some countries, such as Colombia and Chile, have developed poverty designators. In Colombia the System for the Selection of Beneficiaries of Social Programmes (SISBEN) categorises populations from level 1 (families living in severe poverty) to level 6 (wealthy families) and it is based on a series of economic and social criteria. The national planning department, municipalities and rural and urban areas use SISBEN to target services and levy taxes (Castañeda, 2005). Few LAMI countries have developed such a system but it would be important to consider options for doing so given the need to target ECD services especially to the most vulnerable and marginalised infants and children. A few indicators referred to poverty in a general manner. However, clearly designated poverty indicators are required, such as:

- Percentage of children 0 to 36 months living in extreme or severe poverty receiving ECD services (type of services to be specified)
- Percentage of parents living in extreme or severe poverty benefitting from parent education and support services
- Percentage of children 37 to 60 months living in extreme or severe poverty who are benefitting from preschool education or ECD centre services

Additional environmental issues (potable water, waste management, biochemical hazards, climate change, etc.)

Several output and outcome indicators regarding sanitation were found. It might be advisable to add optional indicators for hazardous waste and climate change, such as:

- Number and location of children 0 to 8 years identified as affected by hazardous waste
- Percentage of children previously affected by hazardous waste who have received services to protect them from such dangers
- Percentage of families with young children living in famine zones affected by climate change who receive comprehensive services for new agricultural methods, parent education, nutritional rehabilitation and child stimulation

Develop criteria for the selection of ECD indicators

Before ECD planners in countries select policy indicators for ECD, it will be important for them to have criteria to assist them with indicator selection. The following list begins the discourse on criteria for the selection of indicators.

- The indicator is based on scientific evidence, if at all possible.
- The indicator has previously been used successfully in the country.
- The indicator is widely used in the region, several regions and globally, and is recommended by international agencies.

- Data are readily available to measure progress over time, either in the country or from regional or international sources.
- The indicator and the measures (instruments) used to collect data are assessed as reliable.
- It is feasible and relatively easy to collect data to measure the indicator.
- The data for the indicator can be double-checked, if necessary.
- The nation can meet the costs entailed in data gathering, analysis, etc.
- Nations consider the indicator to be useful for country-level ECD policy planning and for annual planning.
- The data will help national financial planners to prepare projections and simulations for increasing investment in ECD services.
- The measures (instruments) selected for gathering data are culturally acceptable and correctly translated and adapted for purposes of comparability.
- The indicator may be gathered in relation to crosscutting indicators.

Select a limited number of high-priority indicators

The number of indicators per policy instrument ranged from 1 to 82, with an average of 29 indicators per country.

It is important to ensure that a nation does not select too many indicators. It is usually recommended that from 40 to 60 indicators be used per ECD policy or plan. More indicators can always be added later in annual M&E manuals. As many as possible of the indicators selected should be indicators for which the country already has on-going data gathering systems.

Formal inter-agency agreements will usually be required for the sharing of up-to-date data, and to the extent possible, this should be called for in ECD policies or plans.

The question of indicator selection becomes all the more important when considering the development of an index such as the HECDI. Indicators will need to be weighted and sequenced to create such an index.

It might be best first to help develop ECD monitoring and evaluation systems in selected countries that would be able to gather reliable data. Then, on the basis of correlational analyses, a sound method for weighting and sequencing the indicators for the index could be developed.

Select a good balance of indicators for the HECDI and national policy instruments

Many factors were considered for this comparative review of indicators found in national ECD policies and strategic plans, including the balance of indicators for measuring ECD progress.

In this study, countries with a good balance of indicators across sectors, categories and sub-categories include: Cambodia, Cameroon, Mauritania, Rwanda, and Senegal. Other countries did not include some policy indicators that are important to helping to ensure good policy implementation and accountability. Many countries omitted key information, such as timelines, targets and the identification of the agency that would collect, analyse, interpret and prepare M&E reports.

In most countries a number of country-specific indicators were selected, such as those related to HIV/AIDS, child trafficking, health and nutrition challenges, and equity concerns regarding ethnicity,

language, poverty and remote rural status. Therefore, an assessment of whether or not a country's strategic plan is adequately comprehensive would need to include a country specific study to determine whether or not the indicators presented accurately reflect the country's major ECD needs and the current status of children.

Establish benchmarks for EFA Goal One within the HECDI

In addition to country level indicators for ECD policy planning and programme development, improvement and expansion, the HECDI could also support the assessment of nations' progress in achieving EFA Goal 1:

EFA Goal One
<i>Expanding and improving comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children</i>

To assess national EFA progress, the HECDI could include national ECD indicators such as the following. Several of these indicators are already in use in several countries.

- ECD policy and strategic plan officially adopted
- A plan for increasing investment in ECD established to attain these targets by 2020:
 - 10% to 14% of the ministry of education budget is devoted to ECD services¹⁰
 - 10% to 14% of the ministry of health budget is devoted to maternal-child health
 - 1% of GDP is invested in ECD sectors¹¹
- Multisectoral ECD Council and/or Technical Committee officially established to coordinate ECD policy implementation
- Central ECD implementation agency, institute or department selected and financially supported to plan, coordinate, manage, monitor and evaluate the implementation of the ECD policy and strategic plan
- ECD monitoring and evaluation system established and functions as the "single point of contact" for ECD data
- Timely and accurate annual ECD reports prepared, submitted and widely distributed
- Timely and accurate reports regarding progress under the Convention on the Rights of Children prepared, produced and widely distributed

¹⁰ It is recognised that in countries with aging populations, this percentage may not be needed, although some, such as Bosnia and Herzegovina, have only 6% preschool coverage and few ECD services. In most countries with large populations of children and low levels of comprehensive ECD provision, the recommended level will be essential.

¹¹ It is very challenging to measure the percentage of GDP across the education, health, nutrition and protection sectors. Nonetheless, this target is also often proposed.

- Services for preconception, prenatal and neonatal education and health and nutrition care accessed by all prospective and new parents
- Parent education services offered to all parents of children from birth to 36 months and beyond, with a focus on vulnerable, impoverished, and marginalised families
- Quality early childhood intervention (ECI) services provided for children 0 to 3+ years with developmental delays, malnutrition, HIV infection or disabilities
- Targets for expanding quality preschool education by 2015, 2020 and 2025 established
- Services for transition from home or preschool to primary school established and serve all children 5 to 8 years and their parents
- Percentage of communities involved in planning, implementing, managing and overseeing ECD services

Link ECD indicators to Millennium Development Goals and

Poverty Reduction Strategies

Although countries select many indicators that fall in the field of ECD for their national MDGs and PRSP documents, little international or national attention has been given to the major need to link these documents and to improve and expand ECD services to attain MDG and PRSP goals and objectives. An informal review conducted by one of the authors in 2006 revealed that from 30% to 74% of PRSP indicators in countries of Sub-Saharan Africa were typical ECD policy indicators.

During this study, it was found that relatively few ECD planners clearly demonstrated the linkages between their ECD policy indicators and indicators included in their national EFA, MDG and PRSP documents.

National ECD planners could be encouraged to include sections in their ECD policy instruments or other documents that would demonstrate positive overlaps among these lists of indicators. This would help them to ensure they include more MDG and PRSP indicators in their ECD policy documents. It would also assist them to show that the indicators they select are also included in national MDG and PRSP documents. Most likely this would also reinforce the use of specific indicators and demonstrate the policy relevance of the ECD sector.

For example, a simple chart such as the following could be used:

ECD Indicator	EFA Indicator	MDG Indicator	PRSP Indicator
Rate of underweight children under 5 years of age	NA	X	X
Proportion of pupils starting grade 1 who reach grade 5	X	X	X

In many countries, national development plans include indicators or they prepare related documents that present indicators. When national development plans include indicators, their indicator chart should include a selection of national ECD indicators.

Recommended Indicators for ECD Policy Planning and Implementation

Following is a list of core and optional indicators regarding ECD policy planning and implementation. Optional indicators are country and/or regionally specific indicators.

These indicators pertain to topics related to the first cluster of indicators that is entitled: ECD Structures, Governance, Processes and Service Inputs.

Recommended Indicators for ECD Policy Planning and Implementation

Indicators	Comments
ECD Structures and Governance	
Structures	
Lead government agency for ECD officially designated	Core indicator.
ECD policy and strategic plan officially adopted	Core indicator.
National Multisectoral ECD Council officially established	Recommended but optional. Depends on national decisions.
National Multisectoral ECD Council meets at least twice each year	Recommended but optional.
National Multisectoral ECD Technical Committee officially established	Core indicator.
National Multisectoral ECD Technical Committee met at least bimonthly	Core indicator.
National ECD Implementation Agency (institute or department) established	Core indicator. <i>Essential for ensuring good ECD policy and plan implementation.</i>
National ECD Implementation Agency assessed as implementing the ECD policy and plan well (including: annual planning, coordination, management, monitoring, evaluation and reporting)	Core indicator.

ECD Monitoring and Evaluation System officially established and functions as the single point of contact for national ECD data	Core indicator.
National ECD Resource Centre established	Recommended but optional. Depends on country.
Provincial (or district) ECD Resource and Training Centres established and implemented according to plan	Recommended but optional. Depends on country.
Formal inter-agency agreements signed by all parties (specify types of agreements and agencies involved)	Recommended but optional
Legal frameworks, standards, guidelines and regulations established (specify which ones)	Core indicator topic.
Terms of reference for all ECD agencies created	Recommended but optional.
Governance Issues	
Timely and accurate annual reports on ECD progress and challenges and annual action plans and budgets prepared, submitted and widely distributed. (Specify agencies and levels: national, provincial, district and municipal)	Core indicator.
Timely and accurate reports regarding progress under the Convention on the Rights of Children prepared, produced and widely distributed	Recommended but optional. Other systems also monitor this activity.
Legislation to support ECD policy and plan prepared and passed by parliament (specify which legislation)	Recommended but optional. Some policies do not recommend many bills.
Percentage of women (or men) in positions of ECD leadership	Optional indicator.
Percentage of municipalities (districts or communities) that have created an active ECD committee	Core indicator.
Percentage of municipalities (districts or communities) involved in planning, implementing, managing and overseeing	Core indicator.

ECD services.	
Percentage of provinces that have effectively implemented horizontal and vertical coordination systems	Core indicator. Criteria of effectiveness needed. Essential for scaling up promising ECD services and ensuring long-term sustainability.
	<i>Other governance indicators could be added to meet country needs.</i>
ECD Service Inputs	
<i>Human Resources</i>	
Number of ECD professionals, paraprofessionals and volunteers identified and human resource needs for ECD services mapped	Recommended but optional indicator.
Number and percentage of trained, certified and non-certified ECD professionals (in all areas)	Core indicator. This would have modifiers regarding types of professionals working in specific types of services.
Number and percentage of trained ECD paraprofessionals (in all areas)	Core indicator. This would have modifiers regarding types of paraprofessionals working in specific types of services.
Number and percentage of trained ECD volunteers (by type)	Recommended but optional indicator. This would have modifiers regarding types of volunteers working in specific types of services.
	<i>Specialised human resources for ECD services could be added, e.g. preschool teachers in madrasas, ECD facilitators or mother guides for ECD centres, etc.</i>
<i>Services/Service Infrastructures</i>	
Number of ECD services provided by type (i.e., preconception and/or prenatal, early childhood home visits, ECD centres, ECI services, preschool, transition, etc.).	Core indicator.
Number of women, parents and children served by ECD services, in relation to the total number in relevant populations identified and mapped (i.e., pregnant women, parents, and children 0 to 3, 3 to 6, 6 to 8)	Core indicator. Wording will vary according to country needs. This indicator is usually divided into separate age bands. For example: Number of children served in preschools in relation to total preschool age population

Number and percentage of planned ECD Centres established and equipped	Core indicator. (Target would be provided in an indicators chart.)
Number and percentage of planned preschool classes established and equipped	Core indicator.
Number and percentage of ECD services (specify type) with planned educational materials, furniture, learning toys, toy and book libraries, equipment and supplies	Recommended but optional indicator. This level of detail could be left to annual ECD plans.
Number and percentage of ECD services (specify type) with potable water, good hygiene and waste management and latrines or toilets	Core indicator.
Number and percentage of ECD services (specify type) with a nurse or access to a nearby health centre	Core indicator.
Number and percentage of ECD services (specify type) providing breakfasts and/or lunches for children (specify type of children)	Core indicator.
Percentage of population within 5/10 km radius to health centre (ECD centre, preschool, school)	Core indicator. Young children cannot walk long distances and some paths are dangerous for them (wolves, hostile individuals, rushing streams, etc.)
Percentage of population within 20 km of a birthing centre	Core indicator.
	<i>Other service indicators will be specific to country circumstances.</i>
Training Resources	
Assessment of ECD workforce conducted and needs identified	Core indicator.
ECD workforce training plan including professionals, paraprofessionals and volunteers developed, costed and adopted	Core indicator.
Pre-service training system(s) assessed and plan developed for strengthening, expanding and improving pre-service training resources	Core indicator.

Pre-service training plan well implemented	Core indicator.
In-service training system(s) assessed and plan developed for strengthening, expanding and improving in-service training resources	Core indicator.
In-service training plan well implemented	Core indicator.
Financial Resources	
Main sources and amounts of investment in ECD identified	Core indicator, if baseline investments have not already been identified.
Amount and percentage of MoE budget invested in ECD and preschool education	Core indicator, with a target of from 10% to 14% over a phased period of years.
Amount and percentage of MoH budget invested in maternal-child health	Core indicator with a target of from 10% to 14% over a phased period of years.
Amount and percentage of MoSP budget invested in child and maternal rights and protection	Core indicator. No international target established as yet.
Percentage of GDP Invested in ECD, early education, and maternal-child health	Core indicator. 1% of GDP.
Percentage of municipal (district and/or provincial) budget invested in ECD	Core indicator for countries with decentralised budgeting. Each nation should propose a target, such as 5% of budget.
Cost per capita and per service calculated for all major ECD services (specify which these are)	Core indicator. Financial projections and simulations must be prepared for planning purposes.
National Fund for ECD established	Optional indicator.
Rates for fee for services established	Optional indicator.
	<i>Countries may add specific indicators, especially for new sources of funding for ECD services</i>
Processes for Implementing ECD Services	
Service Implementation and Coordination	
Number and percentage of services	Core indicator. Targets must be provided

conducted as planned, quarterly and annually (by type of service)	for all of these indicators.
Number and percentage of prospective parents, pregnant women, children 0 to 3, 3 to 6, and 6 to 8, and parents served annually (by type of service)	Core indicator.
System for service certification or accreditation developed and implemented	Core indicator.
Number and percentage of services that meet service certification and accreditation requirements	Core indicator.
Number and percentage of trained supervisors per service and/or personnel (specify type of service)	Core indicator. Manuals and training for supervisors in the fields of in-service training, M&E and supervision need to be provided.
Number and types of in-service training sessions held (by type of training, type of personnel and type of service)	Core indicator.
Number and percentage of professionals, paraprofessionals and volunteers receiving in-service training (by type of service)	Core indicator.
Percentage of partnerships or inter-agency agreements functioning as planned (specify types of planned partnerships or agreements)	Core indicator. Criteria for levels of functioning needed.
Number and percentage of services participating in vertical and horizontal coordination activities on a scheduled basis	Core indicator.
Number of service sites (programme services) that produce timely quarterly and annual programme and financial reports	Core indicator. May need to be shifted to district or provincial levels in some nations.
<i>Policy Advocacy and Social Communication</i>	
ECD policy advocacy and social communication plan and services established	Core indicator.
Annual ECD Forum planned and held	Core indicator.

Rate of participation of targeted parents in parent education and support services increased through community advocacy and outreach services.	Core indicator.
Number of media campaigns on key ECD messages prepared and implemented (specify type of campaigns and numbers of messages per year)	Core indicator.
Social communications activities evaluated for effectiveness	Core indicator.
Number of community advocates trained (specify types of communities and services)	Optional indicator. Depends upon country.
Monitoring and Evaluation	
ECD M&E system and manual, instruments and instrument guides prepared	Core indicator.
Number and percentage of ECD service personnel trained in the use of the M&E manual, instruments and guides	Core indicator.
Number and percentage of ECD services implementing the M&E system for their service according to plan	Core indicator.
ECD policy and strategic plan effectively monitored and evaluated annually	Core indicator.
National ECD action plan revised annually using M&E results	Core indicator.
Nationally representative survey of child development implemented as planned	Core indicator.
Annual ECD action research plan implemented according to plan	Core indicator.
Comprehensive identification, assessment, case management and tracking services designed and manual, instruments and instrument guides prepared, field tested and produced	Core indicator. A special emphasis should be given to tracking children with difficult circumstances, such as developmental delays, malnutrition, HIV infection, disabilities and atypical behaviours (privacy rights must be taught to service providers and parents and faithfully

	observed).
Number and percentage of service sites with all personnel trained in the tracking system according to plan	Core indicator.
Annual or biennial mapping of high-risk populations, parents and children conducted	Optional indicator but advisable if feasible.

Final comments

This exercise has been valuable not only for developing suggestions for the HECDI but also for mapping the usage of ECD indicators in national ECD policies and strategic plans that have been prepared in all world regions.

It has also permitted the identification of some key issues and guidance that would be useful for preparing a manual for countries regarding the selection and use of ECD indicators.

It is recommended that this study be repeated in 2015 to assess progress achieved and identify further challenges facing countries in developing and using ECD indicators.

Annexes

Annex 1: Terms of Reference

National ECCE Policy and Programme Expert

1. In view of developing the HECDI – and specifically within the context of monitoring countries' provision of holistic ECCE policies and programmes – identify and detail those enabling environments that are critical to ensuring the provision of holistic services to young children (ages 0 to 8). These could include, but are not limited to, the legal framework, financing, ECCE governance, intersectoral coordination mechanisms, national policy frameworks (holistic or sector-based), national benchmarks, ECCE curriculum standards, quality assurance, inclusion of social and other public policies affecting young children and their families.
2. Identify and address the challenges in developing a global monitoring tool for assessing national ECCE policy and programme development and degree of holistic implementation. For example, discuss how to create a cross-national assessment, which allows for variations among Member States; for example, how to account for different stages of ECCE policy development or for varying typologies of ECCE governance.
3. Address how such a tool can account for crosscutting issues such as gender, cultural differences and HIV/AIDS.
4. Provide case studies or information on how Member States are monitoring ECCE policy and programme development, according to their policy statements, selection of indicators, and proposed monitoring systems.
5. Suggest possible qualitative and quantitative indicators to monitor the extent to which countries are adequately developing and implementing holistic ECCE policy and programmes. Clearly outline gaps at national and international levels that need to be filled in order to develop an HECDI. Address data-related issues including: data availability, time series possibility, measurement difficulties, international coverage, and availability of data by factors of disadvantage (e.g., gender, location, disability, ethnicity, wealth).
6. Produce these aforementioned results in the form of a draft report to be submitted by 29 August in advance of the two-day HECDI Technical Committee meeting on 12-13 September 2011.
7. Attend the HECDI Technical Committee meeting in September 2011 at UNESCO headquarters to present the findings of the draft report. The final report, for which the expert will incorporate comments received during the Technical Committee meeting will be approved by the chair of the Interagency Quality Assurance and Reference Committee.
8. Participate in the Technical Committee meeting discussions and provide guidance to the Committee on how to address monitoring issues related to ECCE policy and programming in the HECDI.

Annex 2: Bibliography and Resources

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Castañeda, T. (2005). *Targeting Social Spending To The Poor With Proxy-Means Testing: Colombia's SISBEN System*. Washington, DC: The World Bank.

Grantham-McGregor, S., Bun Cheung, Y., Cueto, S., Glewwe, P., Richer, L., Trupp, B. & the International Child Development Steering Group. (2007). "Developmental Potential in the First 5 Years for Children in Developing Countries." *The Lancet* 369: 60–70.

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Vargas-Barón, E. (2005). *Planning Policies for Early Childhood Development: Guidelines for Action*. Paris, France: UNESCO, UNICEF, ADEA, Red Primera Infancia. (Available in English, French, Spanish and Russian)

Vargas-Barón, E. (to be published in 2012). "Building and Strengthening National Systems for Early Childhood Development" in SRCD book yet to be given a title.

Walker, S.P, Wachs, T.D., Meeks Gardiner, J., Lazoff, B, Wasserman, G.A., Pollitt, E., Carter, J.A. and the Early Child Development Steering Group. (13 January 2007). "Child development: risk factors for adverse outcomes in developing countries." *The Lancet*, 369: 145 – 157.

Resources

European Commission (EC): (Various indicators studies)

http://composite-indicators.jrc.ec.europa.eu/articles_books_other.htm

European Commission: Babies and Children indicators

http://ec.europa.eu/health-eu/my_health/babies_and_children/index_en.htm

Gender Parity Index (GPI)

<http://unstats.un.org/unsd/mdg/Metadata.aspx?IndicatorId=9>

Gender-Related Development Index (GDI)

http://hdr.undp.org/en/media/HDR_2009_EN_Table_K.pdf

Global Hunger Index (GHI)

<http://www.ifpri.org/publication/2010-global-hunger-index>

OECD: Organisation for Economic Co-operation and Development: *Starting Strong II: Early Childhood Education and Care* includes many indicators

http://www.oecd.org/document/63/0,3746,en_2649_39263231_37416703_1_1_1_1,00.html

PAHO: Pan American Health Organisation (country indicators on health, nutrition and sanitation)

<http://www.paho.org/Project.asp?SEL=HD&LNG=ENG&ID=378#Databases>

<http://www.paho.org/english/dd/ais/coredata.htm>

<http://www.paho.org/English/SHA/coredata/tabulator/newTabulator.htm>

Save the Children: Child Development Index

<http://www.savethechildren.org.uk/en/7129.htm>

<http://www.savethechildren.org.uk/en/docs/child-development-index.pdf>

Save the Children: State of the World's Mothers

http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.6743707/k.219/State_of_the_Worlds_Mothers_2011.htm

http://www.savethechildren.org/site/c.8rKLIXMGIpI4E/b.6748295/k.BE47/State_of_the_Worlds_Mothers_2011_Statistics_and_Facts.htm

UNDP: United Nations Development Programme: Human Development Report (HDR) and the Human Development Index (HDI)

<http://hdr.undp.org/en/mediacentre/>

<http://hdr.undp.org/en/statistics/>

<http://hdr.undp.org/en/statistics/hdi/>

UNESCO: Institute of Statistics (UIS): indicators on pre-primary and ECD services

<http://www.uis.unesco.org/Pages/default.aspx>

UNESCO: Education for All (EFA) Global Monitoring Reports (GMR): 2007 report on ECD

<http://www.unesco.org/new/en/education/themes/leading-the-international-agenda/efareport/>

http://www.unesco.org/education/GMR/2007/Full_report.pdf

UNESCO: International Institute for Educational Planning (IIEP) (website with Education policies, EFA plans and a few ECD policies)

http://planipolis.iiep.unesco.org/basic_search.php

<http://www.iiep.unesco.org/information-services/publications/search-iiep-publications/information-and-statistics.html>

UNICEF: United Nations Children's Fund: State of the World's Children (see statistical tables)

<http://www.unicef.org/sowc/>

UNICEF Country indicators on each country webpage

<http://www.unicef.org/infobycountry/index.html>

UNICEF: Innocenti Centre: Innocenti Report Card

<http://www.unicef-irc.org/publications/series/16>

UNICEF: Multiple Indicator Cluster Surveys (MICS) (household surveys)

http://www.unicef.org/statistics/index_24302.html

United Nations Statistics Division: Department of Economic and Social Affairs (Millennium Development Goals Indicators)

<http://mdgs.un.org/unsd/mdg/default.aspx>

[http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2011/11-31339%20\(E\)%20MDG%20Report%202011_Book%20LR.pdf](http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2011/11-31339%20(E)%20MDG%20Report%202011_Book%20LR.pdf)

USAID: United States Agency for International Development and MACRO (National household surveys of the Demographic and Health Survey (DHS))

<http://www.measuredhs.com/>

WHO: World Health Organisation (country indicators on health, nutrition and sanitation)

<http://www.who.int/whosis/en/>

<http://www.who.int/research/en/>

WHO with World Bank: World Report on Disability

http://www.who.int/disabilities/world_report/2011/en/index.html

http://whqlibdoc.who.int/publications/2011/9789240685215_eng.pdf

World Bank: Millennium Development Goals (MDG) annual country reports on indicators and targets

<http://web.worldbank.org/WBSITE/EXTERNAL/EXTDEC/EXTGLOBALMONITOR/EXTGLOMONREP2011/0,,contentMDK:22882843~pagePK:64168427~piPK:64168435~theSitePK:7856232,00.html>

World Bank: Poverty Reduction Strategy Papers and Reports (PRSP)

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/0,,menuPK:336998~pagePK:149018~piPK:149093~theSitePK:336992,00.html>

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTPOVERTY/0,,contentMDK:22569498~pagePK:148956~piPK:216618~theSitePK:336992,00.html>

World Bank: Country data

<http://data.worldbank.org/>

Annex 3: List of ECD Policies and Strategic Plans

August 2011

Country	Policy Adopted	Date Adopted	Plan Adopted	Date Adopted	Status
Afghanistan					No ECD policy. ECD Interim Education Policy includes indicators for ECD. Have copy of Interim Policy.
Albania	Yes. (Title unavailable)	Unknown			Lack copy of policy.
Algeria					
Andorra					
Angola					Currently being drafted.
Anguilla					
Antigua & Barbuda	Yes. (Title unavailable)	July 2009			Lack copy. Policy currently being implemented.
Argentina					
Armenia					
Aruba					
Australia	Yes. "Investing in the Early Years—A National Early Childhood Development Strategy". Divided into (1) Australia, and (2) Australia Indigenous.	2009			ECD policy adopted. Have copies of both ECD and ECE policies.
Austria					
Azerbaijan	Yes.	Unknown			Lack copy of policy.
Bahamas					Not in development.
Bahrain					
Bangladesh					
Barbados					Reported to have an ECD policy. ECE also integrated in the Education Policy.
Belarus					
Belgium					
Belize	Not adopted yet. "Early Childhood Development Policy for Belize"	Not adopted yet			Currently in advanced stage of being drafted. Have draft copy.
Benin	Yes. "Politique Nationale de Développement Intégré du Jeune Enfant au Bénin"	2010			Policy adopted. Have copy.
Bermuda					
Bhutan					
Bolivia					

Bosnia & Herzegovina	Yes. (1) "Policy for Early Childhood Development in the Federation of Bosnia and Herzegovina," (2) "Policy for Early Childhood Development in Republika Srpska"	2011			2 entity ECD Policies adopted in the State of Bosnia and Herzegovina. Have copies. Strategic Plans currently are being drafted.
Botswana	Yes. "Early Childhood Care and Education Policy"	2001			Policy adopted. Have copy.
Brazil					
British Virgin Islands					ECD policy reported to have been adopted in 1995. Lack copy of policy.
Brunei Darussalam					
Bulgaria					
Burkina Faso	Yes. "Stratégie Nationale de Développement Intégré de la Petite Enfance au Burkina Faso"	2008			Policy that is called a Stratégie adopted. Have copy.
Burundi	Yes. "Politique Nationale du Développement Intégré du Jeune Enfant"	2008			Policy adopted. Have copy.
Cambodia	Yes. "National Policy on Early Childhood Care and Development"	2010	Not adopted as yet. "National Action Plan on Early Childhood Care and Development 2011 - 2013"		Policy adopted. National Action Plan soon to be adopted. Have copies of both. Need final copy of NAP.
Cameroon	Not adopted yet. "Document Cadre de Politique Nationale de Développement Intégral du Jeune Enfant"		Not adopted yet. "Plan Stratégique 2010-2012 de Développement Intégral du Jeune Enfant"		Policy and Strategic plan completed but not adopted as yet. Have draft copies.
Canada					
Cape Verde					Policy completed, Plan being drafted, neither has been adopted as of 7/2011. Lack copies.
Cayman Islands					
Central African Republic	Yes. "Politique Nationale du Développement Intégral du Jeune Enfant en République Centrafricaine"	2009	Yes. "Plan D'Action de la Politique Nationale de Développement Intégral du Jeune Enfant"	2009	Policy and strategic plan adopted. Have copies.
Chad					Reported to be completed but not adopted. Lack copies.
Chile	Yes. "Chile Crece Contigo"	2009	Yes. Technical papers prepared	2009 - 2010	Policy adopted. Have copy. Have copies of technical

					papers.
China					
Colombia	Yes. "Política Pública Nacional de Primera Infancia: Colombia por la Primera Infancia"	2006	Yes. Technical papers prepared.		Policy adopted plus technical papers Have copies.
Comoros	Yes. Title unknown	2003			Lack copy.
Cook Islands					
Costa Rica					No policy underway.
Cote d'Ivoire					Possibly being drafted.
Croatia					
Cuba					
Cyprus					
Czech Republic					
Dem Republic of Congo					Possibly being drafted.
Denmark					
Djibouti	Yes. Lack title	2006	Yes. Lack title	2006	Lack copies of both EDC policy and plan.
Dominica	Not adopted as yet. "Early Childhood Education Policy"				In draft, before Cabinet. Have draft copy.
Dominican Republic					
Ecuador					
Egypt					
El Salvador	Yes. "Política Nacional de Educación y Desarrollo Integral de la Primera Infancia"	2010			Policy adopted. Have copy.
Equatorial Guinea					
Eritrea	Yes. "Eritrea Integrated ECD Policy: Creating a fair start for children"	2004			Policy adopted. Have copy.
Estonia	Yes.	Unknown			Reported to have an ECD Policy. Lack copy.
Ethiopia	Yes. "National Policy Framework for Early Childhood Care and Education for Ethiopia"	2010			Policy adopted. Have copy.
Fiji					No ECD Policy. Have ECE brief policy, appears to have been adopted 2007.
Finland					
France					
Gabon					
Gambia (The)	Yes. "The Gambia Integrated Early Childhood Development Policy Framework"	2004			Policy adopted. Have copy.
Georgia			Yes. "Early Childhood Development (ECD) 2007 –	2007	Strategic Plan adopted. Have copy.

			2009 National Strategic Plan of Action"		
Germany					
Ghana	Yes. "Early Childhood Care and Development Policy"	2004			Policy adopted. Have copy.
Gibraltar					
Greece					
Grenada	Yes. Lack title.	2002			2002 ECD policy currently Being revised. Lack copy.
Guatemala	Yes. "Política Pública Desarrollo Integral de la Primera Infancia: Guatemala Invierte en el Desarrollo Integral de La Primera Infancia	2010			Policy adopted. Have copy.
Guinea	Yes. "Politique Nationale de la Promotion de L'Enfance"	2001			Policy adopted. Have copy.
Guinea-Bissau					
Guyana					Currently being drafted.
Haiti					Currently being drafted.
Holy See					
Honduras					Currently being drafted.
Hong Kong					
Hungary					
Iceland					No ECD policy as yet. Have copy of Preschool Act, 2008.
India					Have Act but lack policy.
Indonesia					Reported to begin soon.
Iran					
Iraq					
Ireland					
Israel					
Italy					
Jamaica			Yes. "National Strategic Plan for Early Childhood Development for Jamaica"	2008	Strategic Plan adopted. Have copy of charts of Strategic Plan but lack copy of full plan.
Japan					
Jordan	Yes. "Early Childhood Development Strategy in Jordan"	2004			Policy adopted. Have copy.
Kazakhstan					
Kenya	Yes. "National Early Childhood Development Policy Framework"	2006	Yes (standards). "Early Childhood Development Service Standard Guidelines for Kenya"	2006	Policy and standards adopted. Have copies.

Kiribati					
Kosovo					Reported to have ECD policy. Lack copy.
Kuwait					
Kyrgyzstan					
Lao PDR					
Latvia	Yes. Lack title.	?			Reported to have ECD Policy. Lack copy of policy.
Lebanon					
Lesotho					Currently being drafted.
Liberia					Currently being drafted.
Libya					
Liechtenstein					
Lithuania					
Luxembourg					
Macao					
Macedonia					
Madagascar					Currently being drafted
Malawi	Yes. "National Policy on Early Childhood Development: The First Few Years of a Child Last Forever"	2003			Policy adopted. Have copy.
Malaysia					
Maldives	Yes. "ECCD in the Maldives"	1999			Policy adopted. Have copy.
Mali	Yes. "Politique Nationale en Matière d'Encadrement de la Petite Enfance"	2004			Policy adopted. Have copy.
Malta	Yes. "Early Childhood Education and Care"	2006			Policy adopted. Have copy.
Marshall Islands					
Mauritania	Yes. "Projet de Politique Nationale de Développement de la Petite Enfance en Mauritanie"	2005	Yes. "Plan d'action de la Politique Nationale de Développement de la Petite Enfance en Mauritanie"	2005	Policy and plan adopted. Have copies.
Mauritius	Yes. Lack title.	2003			Policy adopted. Lack copy.
Mexico					
Micronesia (Fed States of)					
Moldova					
Monaco					
Mongolia					
Montenegro					Early and Preschool Education Strategy adopted. Have copy. ECD Policy to be prepared.
Montserrat	Yes. "Early Childhood	2011			Policy adopted.

	Development Policy"				Have copy.
Morocco					
Mozambique					Currently being drafted.
Myanmar					
Namibia	Yes. "National ECD Policy in Namibia"	1996			Policy adopted. Have copy.
Nauru					
Nepal			Yes. "Strategy Paper for Early Childhood Development in Nepal"	2004	Strategy adopted. Have copy.
Netherlands					
Netherlands Antilles					
New Zealand					No ECD Policy. Have copy of ECE Strategic Plan 2002 – 2012.
Nicaragua					
Niger	Yes. "Projet de Document- Cadre de Politique Nationale de Développement Intégré du Jeune Enfant au Niger"	2008			Policy adopted. Have copy.
Nigeria	Yes. "National Policy for Integrated Early Childhood Development in Nigeria"	2006	Yes. "National Integrated Early Childhood Development Workplan"	2006	Policy and Plan adopted. Have copies.
Niue					
North Korea					
Norway					
Oman					
Pakistan					Reported to have ECD Policy and Plan. Adopted in 2003. Lack copies.
Palau					
Palestine					Reported to have ECD Policy. Lack copy.
Panama					
Papua New Guinea					
Paraguay					
Peru					
Philippines	Yes. "Early Childhood Care and Education Act"	2000			Policy adopted in the form of an Act. Have copy.
Poland					
Portugal					
Qatar					
Rep of Congo					Reported that ECD policy is being drafted.
Romania					

Russian Federation					Reported but unsure.
Rwanda	"Early Childhood Development Policy"	2011	"Integrated Early Childhood Development Strategic Plan"	2011	
Saint Kitts and Nevis					Reported but lack copy.
Saint Lucia					Currently being drafted.
Saint Vincent & Grenadines					Currently being drafted.
Samoa					
San Marino					
Sao Tome & Principe					
Saudi Arabia					
Senegal	Yes. "Document de Politique Nationale de Développement Intégré de la Petite Enfance au Sénégal"	2006	Yes. "Plan Stratégique pour le Développement Intégré de la Petite Enfance au Sénégal"	2006	Policy and strategic plan adopted. Have copies.
Serbia					
Seychelles					
Sierra Leone					Reported to be under preparation.
Singapore					
Slovakia					Reported to be under preparation.
Slovenia					
Solomon Islands					
Somalia					
South Africa	Yes. "Interim Policy for Early Childhood Development"	2005	Yes. "National Integrated Plan for Early Childhood Development in South Africa"	2005	Policy and Plan adopted. Have copies.
South Korea					Reported to have an ECD policy but lack copy.
Spain					
Sri Lanka	Yes. "National Policy on Early Childhood Care and Development"	2004			Policy adopted. Lack copy.
Sudan					
Suriname					Currently being drafted.
Swaziland					Currently being drafted.
Sweden					
Switzerland					
Syrian Arab Rep					
Taiwan					
Tajikistan					
Tanzania					Currently being drafted.
Thailand					

Timor-Leste					Focus on ECE policy and they are postponing ECD policy.
Togo					
Tokelau					
Tonga					
Trinidad & Tobago					Policy on standards for ECD institutions exists. No ECD policy as yet.
Tunisia					
Turkey					
Turkmenistan					
Turks & Caicos Islands					Policy reported to be underway.
Tuvalu					
Uganda					Currently being drafted.
Ukraine					
United Arab Emirates					
United Kingdom					
United States of America					
Uruguay	Yes. "Estrategia Nacional para la Infancia y la Adolescencia"	2009	Yes. "Plan de Acción"	2009	Policy and Plan adopted. Have copies.
Uzbekistan					
Vanuatu					
Venezuela					No ECD policy.
Viet Nam					
Western Sahara					
Yemen					
Zambia					No ECD Policy adopted as yet. Education policy includes early education.
Zanzibar					Adopted an ECE policy. Lacks an ECD policy.
Zimbabwe					

Annex 4: Definition of Terms

ECD Structures and Governance

ECD structures and governance activities include Multisectoral ECD Councils, Technical Committees and agencies for coordinating and implementing ECD policies and strategic plans. Governance activities include laws and guides related to managing ECD systems and services.

ECD Inputs

Inputs include personnel, capital investments (such as facilities, furniture and equipment), materials and supplies, developmental and recurrent costs, and other resources that are needed to conduct services and activities under each major type of service. Inputs also include in-kind support such as volunteers, facilities, materials, equipment and other resources.

ECD Processes

ECD processes are the activities that ECD services conduct using ECD inputs to meet their participants' needs and attain service objectives. They often include: service outreach, intake, child screenings and assessments, planning activities, home visits, group sessions, counseling, making referrals, transportation, and reporting.

ECD Outputs

Outputs are units of service provided by ECD services, such as the number of different types of children, parents or others served by a type of service. Outputs also include the number of activities each person participates in, the number of books or materials produced or given to participants, and other numerical counts related to the services. Outputs do not include outcomes, benefits or other results that participants achieved as a result of participating in services. They only reveal the numerical counts of programme participants or services provided.

Outcomes

Outcomes are the results, impacts or benefits that participants have achieved as a result of service inputs, activities and outputs. Outcomes are usually measured in terms of knowledge, attitudes, skills and abilities, behaviours or conditions resulting from programme participation.

Outcome Indicators

Outcome Indicators are the measurable achievements toward attaining an outcome target. They are lists of achievements, behaviours, assessment and other results that indicate whether or not participants or cohorts (defined groups) of participants have made or are making progress toward achieving outcome targets. They are often expressed in percentages or rates.

Measures

Measures refer to the specific instruments used to gather data regarding the inputs, service processes, outputs and outcomes of ECD services.

Outcome Targets

Outcome targets are the rate or percentage of services, participants or other results that ECD services seek to achieve in order to attain desired outcomes.

Annex 5: Chart of ECD Indicator Categories and Sub-Categories by Country

ECD Indicators	COUNTRY	* = policy and/or plan reviewed but no indicators identified																																												
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39						
		Australia (AU)	AU indigenous	Belize*	Benin	Bosnia*	Botswana*	Burkina Faso	Burundi	Cambodia	Cameroon	CAR	Chile	Colombia	Dominica*	El Salvador*	Eritrea*	Ethiopia*	Gambia	Georgia	Ghana	Guatemala*	Guinea*	Jamaica	Jordan*	Kenya*	Malawi*	Maldives*	Mali*	Malta*	Mauritania	Montserrat*	Namibia*	Nepal	Niger	Nigeria	Philippines	Rwanda	Senegal	South Africa	Uruguay					
CATEGORY	TOTAL	14	14	2	43	1	1	38	4	48	58	29	21	16	2	1	2	2	9	23	18	1	1	22	1	2	1	2	1	2	59	2	2	14	29	10	8	82	57	2	29					
A) Demographic and Economic	16																																													
*Demographic	13				1			3																								6				1						2				
*Economic	3																														3															
B) ECD Structure and Governance	86																																													
*ECD Structure/Infrastructure	77	1	1	2	2	1	1	2	2	3	1	4	1	2	2	1	2	2	2	5	2	1	1	1	1	2	1	2	1	2	3	2	2	3	2	2	2	4	3	2	1					
*ECD Governance Issues	9	1	1								1									1										1						3						1				
C) ECD Inputs	51																																													
*Human Resources	16	1	1		1		1	1	1	1										2	1									2			2		2			1	1	1						
Services	13				3					2	2		1							1	1	1								3										1	1					
*Financial	22								4	1									1	1	1			3					1					2	1		2	1		2	1	4				
D) Implementing Services	47																																													
*Services Implementation and Coordination	10									4	3									1																							2			
*Policy Advocacy	12									2	1	1								1					1					2												4				
*Monitoring and Evaluation	25									3										6	1			1												2		1		11						
E) ECD Outputs	179																																													
*Maternal, Prenatal and Post/Neonatal	25				1					3	3		6								1			1						3						1	1		1	2			2			
*Parent Education and Support	21				1						2		1							2	2				5				1						1		1			2	3			1		
*Early Childhood Interventions Services	13									1			5	1																												2			1	
*Education	33						2		1	1	3									1	2				4				1					2		2		1		8	3			4		
*Child Health	16				2			2	1	1			1								1				1				2						2	1		1		1	1					
*Child Nutrition	9				2					2																											1				2	2				
*Sanitation, Water and Hygiene	10				1		1	1	1	2																				2							1		1							
*Child and Social Protection	28				1		1		2	5	1	1									1			1					2						2		2			7	2			2		
*Pre- and In-Service Training	24						1		4	3	3										2				1					1						1				1	4	3				
F) ECD Outcome	294																																													
*Maternal, Prenatal and Post/Neonatal	49	2	2		5		3	1	6	6		4	1								1								7							1			7	2			1			
*Parent Education and Support	21	2	2		1		3		2	1																														1		6	2		1	
*Child Development, Delays and Disabilities	17	1	1				1	1			3	1	1																										1			3	3		1	
*ECD and Preschool Services and Centres	18	1	1		1			2	1	1			1							2	1	1							1								1	1		1	2					
*Education: Primary School	33				3		4		1	2	2		1								2	2							1							1	1		2	1	5			5		
*Education: Secondary School and Youth	7	1	1																																							1		4		
*Child Health	60	3	3		7		8		4	7			2								2																8	1		5	3			3		
*Child Nutrition	43				5		4		2	7	1	1	2								2									8						3	1		1	5			1			
*Sanitation, Water and Hygiene	13				1		1			1	1																			3											4			2		
*Child and Social Protection	33	1	1		5		1		1	7	3	1	3																												2	4		2		
TOTAL	673																																													