Introduction

Recent brain research suggests the need for holistic approaches to learning and development, recognizing that children’s physical and intellectual well-being and socio-emotional and cognitive development are all interrelated (Grantham-McGregor et al., 2007). Children’s school readiness depends not only on their cognitive skills, but also on their physical, mental and emotional health and ability to relate to others (Hair et al., 2006). Development in early childhood is a multi-dimensional and sequential process, with progress in one domain acting as a catalyst for development in other domains (Naudeau, Kataoka, Valerio, Neuman, & Elder, 2011). The impact of ECD interventions will be greatest when policies and interventions are multi-sectoral and integrated, providing young children and their families with holistic programming to ensure that all children have an equal opportunity to reach their full potential (Engle et al., 2011).

Yet, the reality for young children in developing countries is concerning. More than 200 million children below
five in low- and middle-income countries are at risk of poor or delayed development due to challenges associated with poverty, including poor nutrition, excessive stress and lack of stimulation (Engle et al, 2011). Risk factors that interfere with children’s development often co-occur and can amplify each other, with poor health and nutrition and lack of school readiness leading to poor school performance. Poor school performance leads to inadequate preparation for economic opportunities and, eventually, the perpetuation of intergenerational poverty cycles (Engle et al, 2007). In contrast, positive interactions with caregivers and early learning opportunities can improve children’s health, educational, and even economic trajectories (Engle et al., 2011).

In response to the challenge of reaching children with holistic interventions, many countries around the world have developed national intersectoral ECD policies and legal frameworks. This paper explores the rise of these polices in Sub-Saharan Africa, a region where an estimated 61% of children below five are not reaching their full developmental potential, largely as a result of poverty, malnutrition, and lack of early stimulation and learning opportunities (Engle et al., 2007). We then specifically compare the status of the ECD policy development and institutional arrangements in four East African countries: Ethiopia, Kenya, Tanzania and Uganda. We conclude with some suggestions for ensuring that policies and laws lead to better results for young children in Africa.

The Rationale for Developing Intersectoral Policies and Legal Frameworks

The entry points to influence young children’s development are diverse and involve multiple stakeholders. The various sectoral policies that affect ECD outcomes include healthcare and hygiene, nutrition, education, poverty alleviation, and social and child protection. These policies can be aimed at the pregnant woman, the child, the caregiver or the family as a whole. Interventions can take place in many environments, including the home, at a preschool or childcare center, a hospital or community centers. Figure 1 presents a summary of the key interventions needed to support young children and their families via different sectors at different stages in a young child’s life.

Many of the interventions described in Figure 1 can be promoted through national ECD policies and a country’s legal framework. In some countries, a specific ECD policy or law is enacted to ensure that all children are guaranteed access to essential interventions to promote healthy development. In other countries, rights and services are guaranteed through laws and policies in separate sectors, which may be connected by an overall policy framework (Vargas-Baron, 2005). National ECD policies typically are comprised of a policy statement covering the vision, goals and key strategies, and a description of institutional structures.
The rationale for creating a national ECD policy or framework is three-fold (Naudeau et al., 2011). First, a national policy presents a country’s vision for its young children, making visible the goals, objectives, and strategies that are needed to make this vision a reality. Surprisingly, the needs of young children are not often addressed comprehensively in other development frameworks or planning documents, including Poverty Reduction Strategy Papers and Education Sector Plans (Aidoo, 2008). Second, a national ECD policy clarifies the responsibilities of different actors or agencies. Given the multi-sectoral nature of the field, there is often confusion or tension regarding which ministry or agency is responsible for which services and interventions. Establishing a lead agency or “institutional anchor” can help coordinate ECD efforts horizontally. It is also important to clarify the roles of national and decentralized levels of government (e.g. provinces, states, local authorities) to support vertical coordination. A national ECD policy can help maximize scarce financial, human, and material resources in order to reduce duplication of effort (Neuman, 2007). Third, an ECD policy,

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**Figure 1.** Essential interventions during different periods of young children’s development. From “Investing early: What policies matter” (The World Bank, 2012).
especially if it is developed in a participatory manner, provides an opportunity to define the respective roles of the public and private sectors in important areas including funding and service provision.

Whether sectoral or multi-sectoral, national ECD policies are generally supported by a legal framework, which comprises all of the laws and regulations that can affect the holistic development of young children. The laws and regulations which impact ECD are diverse because of both the array of sectors which influence ECD and because of the different constituencies that ECD policy must target, including pregnant women, young children and parents and caregivers of young children (Britto, Yoshikawa & Boller, 2011; UNESCO, 2006).

The Rise of National ECD Policies in Sub-Saharan Africa

In the last decade, as countries have increasingly recognized the importance of reaching children during their early years, there has been a proliferation of national intersectoral (or integrated) ECD policies in countries around the world, including those in Sub-Saharan Africa. When the Millennium Development Goals and Education for All Goals were set in 2000, few countries had adopted national ECD policies. According to a review by Torkington (2001), in sub-Saharan Africa, only Mauritius and Namibia had established ECD policies in 2001 (cited in Vargas-Baron, 2008). By 2012, the situation had changed dramatically. A recent review commissioned by

Table 1
Current status of ECD policies in Sub-Saharan Africa

| Status                                   | Name of Countries                      |
|------------------------------------------|----------------------------------------|
| No national intersectional ECD Policy    | Dem. Rep. of Congo                      |
|                                          | Rep. of Congo                           |
|                                          | Equatorial Guinea                      |
|                                          | Gabon                                  |
|                                          | Guinea-Bissau                           |
|                                          | Sao Tome and Principe                   |
| National intersectional ECD Policy       | Somalia                                |
| drafted/or being drafted                 | South Sudan                            |
|                                          | Sudan                                  |
|                                          | Togo                                   |
|                                          | Zimbabwe                               |
| National intersectional ECD Policy       | Angola                                 |
| approved                                 | Cameroon                               |
|                                          | Cape Verde                             |
|                                          | Chad                                   |
|                                          | Cote d’Ivoire                          |
|                                          | Lesotho                                |
|                                          | Madagascar                             |
|                                          | Mozambique                             |
|                                          | Sierra Leone                           |
|                                          | Swaziland                              |
|                                          | Tanzania                               |
|                                          | Uganda                                 |
|                                          | Zambia                                 |

Note: Adapted from “Review of policy and planning indicators in early childhood” (Vargas-Baron and Schipper, 2012)
UNESCO revealed that 23 out of 47 countries have adopted national ECD policies. Another 13 countries have policies under development or drafted, but not yet approved (Vargas-Baron & Schipper, 2012). Table 1 summarizes the current status of national ECD policy development in Sub-Saharan Africa.

Around the world, many stakeholders have supported this growth in national ECD policy development. For example, development partners, including UNICEF, UNESCO and the World Bank, have provided financial and technical support for many national efforts to address the needs of young children and the fragmentation and gaps in existing policies, laws, and programs. In Sub-Saharan Africa, the Association for the Development of Education in Africa (ADEA) Working Group on Early Childhood Development encouraged national ECD policy development in a number of countries, through regional and cross-country assessments, and capacity-building activities (Aidoo, 2008). Specifically, the ADEA Working Group on ECD commissioned case studies of ECD policies in Ghana, Mauritius, and Namibia in 2000-2001 to identify lessons learned for other countries in Africa. Subsequently, in 2002-2003, the Working Group funded technical support to national ECD policy planning in Burkina Faso, Mauritania, and Senegal. Policies in all three countries have since been approved and lessons learned have been shared with other countries (Vargas-Baron, 2008). In addition, a series of four continent-wide ECD conferences organized by ADEA and held in Kampala (1999), Eritrea (2002), Ghana (2005), and Senegal (2009) brought together African and international experts, policymakers, and development partners to help generate support for comprehensive early childhood policies and programs on the continent.

Comparing ECD Policies and Institutional Arrangements in East Africa

Despite the rapid growth in national ECD policies in Sub-Saharan Africa, there is still much to be done to ensure that children’s holistic needs are met. We argue that for most countries, national ECD policies are a useful first step, but not sufficient. For example, although most countries’ ECD policies call for expansion of services across health, nutrition, education, and child protection sectors, the pace of implementation has been slow. Table 2, for example, shows a selection of indicators of child well-being in East Africa. Across the region, more than one-third of all children are moderately or severely stunted and the vast majority of children are not enrolled in preprimary school and have limited access to early learning opportunities. Birth registration is seen as a critical first step to access services throughout life; while 60% of all children are registered in Kenya, the percentage of
children registered in the rest of the region is minimal.

Looking more specifically at changes in enrollment rates in preprimary school in the last five years, we see that while progress has been made, early learning opportunities are far from universal. Figure 2 compares the changes in net preprimary enrollment rates in each country from 2005 to 2010 (for the years for which data are available). Across the region, most children are not enrolled in preprimary school. While the net enrollment rate in Tanzania has reached 33% in 2010, it is only a minimal increase from 27% in 2005. This trend of small increases only- or even decreases- during the five year period is consistent across all four countries.

Despite extensive laws, regulations and policies to promote ECD, outcomes are mixed across countries, even when the legal frameworks may be quite similar. In the next section, we examine the institutional arrangements and status of ECD policy development in the same four countries in East Africa. While each country has a unique context, they also share many common challenges and characteristics in regards to ECD policy and implementation. Table 3 summarizes the status of ECD policy development, adoption, implementation and institutional arrangements in each country.

Different Approaches to ECD Policy

In this section, we provide further description of the institutional arrangements and status of ECD policy development in each country.

Ethiopia. In 2010, the Government of Ethiopia adopted a new policy framework to provide a holistic and comprehensive approach to the development of children from the prenatal period to seven years of age. There is strong ownership of the National Policy for ECD, which was developed through a participatory and multi-sectoral process spearheaded by the Minister of Education, in coordination with the Ministers of Health and Women’s Affairs. A multi-sectoral ECD Task Force coordinated the technical preparations with support from UNICEF, and in coordination with NGOs, civil
The Ministry of Education is the leading institution in the ECD Taskforce. The Ministry of Health is responsible for children age 0-3/4 and the Ministry of Education is responsible for children aged 4-6/7. The ECD Taskforce continues to meet on a regular basis and is beginning to address the issues surrounding implementation of the policy. Each of the three Government Ministries has held initial trainings to build capacity within Ministry staff to address ECD.

To support the National Policy Framework, the Government of Ethiopia has formulated a Strategic Operational Plan with four main pillars: (1) parental education, (2) healthy and early child stimulation from pre-natal to 3 years, (3) preschools and kindergartens for 4-6 years and (4) non-formal school readiness such as child-to-child programs. Though the Operational Plan has been developed, it is not costed, nor does it contain sufficient detail to robustly guide implementation.

Kenya. Kenya’s National Early Childhood Development Policy Framework is a multisectoral ECD strategy, which was developed in 2006. The ECD Policy Framework was preceded by the passage of the Children Act in 2001, which aggregated all laws related to children into one document, intended to serve legal instrument that not only protects children but also advocates for them. The ECD Policy Framework is designed to serve as a coordination mechanism and to explicitly define the roles of various stakeholders, including parents, communities, Government ministries and agencies, development partners and others. A separate document, the Service Standard Guideline was developed in an attempt to operationalize the ECD
Policy Framework. Both the ECD Policy Framework and the Service Standard Guidelines were developed by an intersectoral Technical Committee on ECD Policy. UNICEF and UNESCO provided technical and financial support.

The Policy Framework is intended to address the fragmentation of sectoral initiatives by providing a frame of reference, from which approaches to ECD can be developed or strengthened within individual sectoral policies. The Ministry of Education has been established as the lead Ministry; other key Ministries include: Health, Home Affairs and Gender, Sports, Culture and Social Services. The National Council for Children’s Services has created a National ECD Committee to oversee ECD programs. Responsibility for implementation of the policy and ECD service provision has recently been decentralized, as per the new Constitution- at this time, the exact way in which services will be provided and coordinated in the newly decentralized system is not clear.

Tanzania. Tanzania’s ECD policy, the Intersectoral Early Childhood Development Policy (IECDP), was drafted in 2010 after a multi-year consultative process. It is a holistic policy which includes the sectors of education, health, nutrition and social and child protection. In 2006, three national committees on ECD were established: The National Steering Committee, The National Technical Committee and The National ECD Secretariat. These committees are tasked with: setting policies for ECD, establishing standards for service delivery, monitoring access to ECD services and quality of ECD services and playing a coordination role across different entities and agencies. The Steering Committee meets semi-annually to conduct business and the Technical Committee and ECD Secretariat meeting quarterly. When the Steering Committee approves a policy and/or strategy, it is sent to the Cabinet Secretariat for approval. None of the committees produce periodic progress reports. In addition to the formal mechanisms for coordination, the ECD focal points within each ministry

| Name of Country | Tanzania | Ethiopia | Kenya | Uganda |
|----------------|----------|----------|-------|--------|
| Year Adopted   | Drafted-not approved | 2010 | 2006 | Drafted-not approved |
| Institutional Anchor | Ministry of Community Development, Gender and Children | Ministry of Education | Ministry of Education | Ministry of Gender, Labor and Social Development |
| Implementation Plan | No | No | Yes | No |
regularly communicate and this positive working relationship is noted by development partners as a key factor in the successful intersectoral coordination in Tanzania, relative to neighboring countries.

Despite the notable coordination and process of ECD policy development in Tanzania, the IECDP is awaiting approval from Parliament and, unfortunately, a costed implementation plan cannot be developed until the IECDP is approved. The Ministry of Community Development, Gender and Children (MCDGC) is the coordinating ministry for ECD in Tanzania. Focal points have been established in other key ministries, including: Ministry of Education and Vocational Training (MoEVT), Ministry of Health and Social Welfare (MoHSW), Ministry of Finance (MoF) and Prime Minister’s Office Regional Administration and Local Government (PMO-RALG). There is no ECD-specific budget allocation or dedicated ECD staff within the MCDGC. The infrequency of meetings and lack of progress to pass the IECDP and develop an implementation plan suggest that the MCDGC may not have the resources necessary to fulfill its mandate and serve as a strong institutional anchor.

As with all social sector service provision, the central Government is responsible for the design of policy in Tanzania. The responsibility for implementation and provision of ECD services is decentralized to the local level to District Councils under the supervision of the PMO-RALG.

**Uganda.** The ECD policy development process began in Uganda in 2011 and a policy is drafted, but continues to await finalization and official approval. The National Integrated Early Childhood Development Policy (NIECDP) is a holistic policy that includes the sectors of education, health, nutrition, childcare and protection, and water and sanitation. Its primary objective is to ensure an integrated approach to the implementation and delivery of quality ECD services and to enhance coordination and cohesion amongst the many ECD stakeholders to create a unified ECD system in Uganda. The central government is responsible for the design of ECD policy in Uganda, however, the responsibility of implementation and ECD service provision falls to the local governments.

The Ministry of Gender, Labor and Social Development (MoGLSD) is mandated to lead all activities that affect children in Uganda and coordinated the development of the NIECDP. A multisectoral ECD Task-force was established to develop the policy, comprised of representatives from relevant government Ministries, including: Ministries of Health, Education, Justice, Gender, Agriculture, Internal Affairs and Kampala Capital City Authority. Non-government ECD stakeholders also take part, including representatives from UNICEF, Plan International, National Council for Children, and Uganda Children’s Rights Network.
The Taskforce meets on a quarterly basis and reports to the MoGLSD. No ECD-specific budget has been allocated, however, the MoGLSD has been using funds from its policy development budget to finance the ECD Taskforce’s work.

**What Next? Moving from Policy Development to Implementation**

To some extent, before we can definitively assess the impact of these policies, there may be a need for more time to allow for the policies to be translated into action. As noted earlier, a vast majority of countries have enacted ECD policies within the past 10 years-some as recently as this year. However, we would still expect, given these policies build on existing legal frameworks and sectoral strategies, that some effects should be noticeable relatively quickly. Although several case studies and reviews have looked at the process of policy development (e.g. Garcia, Pence & Evans, 2008), there is much less information on the effectiveness of these policies, including how implementation can be strengthened. In this section, we provide some initial thoughts and identify areas for further research.

**The Need for Policy Adoption**

It is concerning that 13 countries in Sub-Saharan Africa have drafted ECD polices that are still not adopted. In several countries (e.g. Sierra Leone, Tanzania, Zambia, Uganda), after completing the process of consultations and multiple drafts, these policies have been waiting legislative or cabinet (depending on the legal process in that country) approval for several years. In some ways, waiting for a policy to be approved has become an excuse to delay implementation planning, allocation of financial resources, and the scaling up of interventions. Such delays can be major bottlenecks limiting progress in the area of ECD. It is important for early childhood stakeholders in these countries to better understand and seek to address the roadblocks to policy adoption and implementation: Are they political, institutional, financial, or some combination?

For example, the national ECD policy in Ghana took more than 10 years from the start of the process until it was adopted. During this time, there was a change in political leadership, which subsequently led to a shift in the lead agency with responsibility for coordinating ECD. Although the lengthy process helped different stakeholders to work out some issues and ultimately build stronger ownership and consensus around the policy, it was only when the document was approved officially that several other actions for young children could be put into place (Naudeau et al, 2011).

A draft policy can help guide the different stakeholders engaged in ECD, however, the document will not have any ‘teeth’ until it is formally adopted.
The Importance of a Costed, Implementation Plan

In some countries, the existence of a policy is used as proof of progress and government commitment, even though in some instances very little has changed in terms of financial allocations for ECD, coverage levels, etc. for young children. An implementation plan is something more tangible, to which a Government can be held accountable. Indeed, in some countries there may even be a hesitance to develop costed implementation plans because they so clearly spell out the needs and mechanisms for Government action. The development of a costed implementation plan can also help identify the funding gap that needs to be filled. As noted above, most national ECD policies include a vision statement and information on institutional arrangements. Vargas-Baron and Schipper (2012) found in their review that, “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” (p. 22). Of the 51 ECD documents reviewed for the study, 33 were adopted policies but only 13 were adopted strategic plans; in addition three policies and two strategic plans had been validated but not officially adopted. As shown in Table 4, only eight of the 23 countries in Africa with adopted ECD policies have developed implementation plans (also known as strategic plans), which spell out the details of the time frame and specific activities to be implemented, as well as the costs and funding arrangements.

The Role of the “Institutional Anchor”

The selection of a lead agency or institutional anchor to coordinate the policy development and implementation is very contextually specific. In some countries, the choice will be obvious due to long-standing leadership or expertise in areas related to ECD, whereas in other countries several agencies will vie for the responsibility and “turf” struggles may ensue. There is some emerging evidence that a non-sectoral lead agency (e.g. Ministry of Planning or Ministry of Finance) may help resolve this competition. In many countries in Sub-Saharan Africa, the Ministry of Health is typically responsible for children from birth to age

| Names of Country |   |
|------------------|---|
| Central African Republic | Nigeria |
| Kenya            | Rwanda |
| Malawi           | Senegal |
| Mauritania       | South Africa |
| Niger            |   |

Note. Adapted from "The Review of policy and planning indicators in early childhood" (Vargas-Baron and Schipper, 2012, and authors, 2012)
three, and the Ministry of Education is responsible for children from age four to six. In several OECD countries, there is a trend toward the Ministry of Education assuming responsibility for early childhood policies and programs from birth through compulsory school age. This approach may make more sense in middle-or high-income countries with established health systems for young children (Bennett & Kaga, 2010). Regardless of the institutional anchor chosen, it needs to be strong and have convening power to ensure that the implementation continues to be well coordinated once the policy has been adopted (UNESCO, 2006). Key considerations in assessing the strength of an institutional anchor include the following: an adequate number of dedicated staff focused on ECD, specific financing allocated for the institutional anchor to coordinate ECD at the national level, ability to monitor coverage and quality levels of ECD, regular meetings and/or reports and communications to coordinate across different Government agencies (World Bank, 2012). The choice of an institutional anchor can be very politically sensitive. In some countries in Sub-Saharan Africa, the Ministry of Gender/Children/Community Development has been tasked as the institutional anchor. While in some countries the arrangement is working well, in others, these Ministries historically have had limited capacity and less institutional clout, which can make it difficult for them to play a convening role, which is central to serving as an effective institutional anchor.

**Technical Support for Local Implementation**

National ECD policies are often comprehensive and ambitious documents. While the content may be informed by community-level consultations, technical support and awareness activities may be needed to translate policy into action on the ground and to ensure relevance to local realities. To that end, some countries have developed coordination mechanisms at the point of service delivery to ensure that children receive integrated services. These mechanisms may take the form of regular coordination meetings between the different implementing actors (e.g. local health and education authorities, NGO partners, community-based organizations) at the sub-national level and/or may include the development of an integrated service delivery manual or common plan of action. In addition, given the strong role of the private sector in ECD service provision in many African countries, it may be helpful to establish mechanisms for collaboration between state and non-state stakeholders; such as special task force, regular consultation meetings, and/or national coordinating committee that include non-state stakeholders.

**Strengthening enforcement through legislation.** As with other policies, national ECD policies need some mechanism for enforcement. A country’s legal framework can provide additional support to ensure that there are recourses for not following the directives in the policy.
However, as noted above, the evidence of these laws on outcomes is mixed across countries, even when the legal frameworks may be quite similar, so ongoing monitoring of implementation and mechanisms for ensuring compliance with legislation are equally important.

**Special strategies for conflict-affected and fragile nations.** Of the 11 African countries with no national ECD policy, eight are currently or recently affected by conflict and fragility: Democratic Republic of Congo, Republic of Congo, Guinea-Bissau, Somalia, Sudan, South Sudan, Togo, and Zimbabwe. For these countries, it is understandable that developing a national ECD policy through a participatory process may not be an immediate priority. More work is needed to identify strategies to support and protect young children who are particularly vulnerable during times of conflict and crisis. There also may be lessons to learn from post-conflict countries that have recently developed national ECD policies, such as the Angola, Central African Republic, Rwanda, Sierra Leone, and Liberia.

**Conclusion**

Across Africa, there is growing recognition of the importance of investing in young children. As we have shown, Ethiopia, Kenya, Tanzania and Uganda each have unique challenges to the effort to promote holistic ECD for children; in addition, they share many similarities. Each country has taken a different approach to developing an ECD policy, and the status of ECD policies and choice of institutional anchors varies across these four countries. While key indicators of children’s well-being vary from country to country, across the region, overall levels are quite poor. This pattern suggests that the implementation and enforcement of policies and legal frameworks are essential to translate policy into impact. In terms of further study, we plan to look more closely at the legal frameworks that exist in each country that are additional or complementary to the national inter-sectoral ECD policies. A more in-depth analysis comparing the policy environment in countries with levels of access and quality of ECD services across Sub-Saharan Africa is also planned. Further study of implementation of ECD policies in the African context and beyond is also needed to draw lessons from effective processes and implementation arrangements and mechanisms to ensure that countries can better promote young children’s healthy growth, development, and learning.

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Notes

1It should be noted that the gross enrollment rates are substantially higher in some countries; in Kenya, specifically gross enrollment rates for preprimary school are closer to 55-60%. Also, these official statistics likely undercount preprimary school provision through the non-state sector, particularly in Ethiopia.

2This section draws on interviews and document review conducted for the World Bank’s Systems Approach for Better Education Results-Early Childhood Development (SABER-ECD) initiative.
