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Caring and Learning Together: A Case Study of Jamaica

Jennifer Jones, Audrey Brown & Janet Brown

UNESCO Education Sector

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About the Report

This is one of several country reports contributing to global understanding of integration processes, specifically the integration of early childhood care and education services under Ministry of Education auspices. It is part of the *Caring and Learning Together: Cross-National Research Project on the Integration of Early Childhood Care and Education*, implemented as part of UNESCO's 2008-2009 biennial programme. The report was co-funded by UNICEF.

The structure of the report follows a design provided by UNESCO with specific questions under topic headings stipulated by a Master Questionnaire that was provided to all countries for consistency. The authors take full responsibility for the content of the report itself. Although the focus of the report is on the administrative integration of early childhood development under one ministry, that of education, it will be noted that several of the Jamaican country players discuss, and are working towards, integration in its broader meanings.

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Acronyms

AIDS	Acquired Immune Deficiency Syndrome
BCG	Bacille Calmette Guerin
BvLF	Bernard van Leer Foundation
CARICOM	Caribbean Community (of member states)
CBO	Community-based Organisation
CCDC	Caribbean Child Development Centre, University of the West Indies
CCPA	Child Care and Protection Act
CDA	Child Development Agency
CPOA	Caribbean Plan of Action
CRC	Convention on the Rights of the Child
CSEC	Caribbean Secondary Education Certification
DCC	Day Care Coordinator
DCU	Day Care Unit
DGMT	Dudley Grant Memorial Trust
DPT	Diphtheria, Pertussis, Tetanus (immunization)
EC	Early Childhood
ECC	Early Childhood Commission
ECCD	Early Childhood Care and Development
ECCE	Early Childhood Care and Education
ECE	Early Childhood Education
ECECD	Early Childhood Education, Care and Development
ECD	Early Childhood Development
ECI	Early Childhood Institution
ECP	Early Childhood Practitioner
ECU	Early Childhood Unit
EO	Education Officer
EU	European Union
GDP	Gross Domestic Product
GOJ	Government of Jamaica
HIV	Human Immunodeficiency Virus
IAC	Integration Advisory Committee
IDB	Inter-American Development Bank
IECD	Integrated Early Childhood Development
IMF	International Monetary Fund
IMR	Infant Mortality Rate
JECA	Jamaica Early Childhood Association
JTA	Jamaica Teachers Association
MDG	Millennium Development Goal
ME	Ministry of Education
MLSS	Ministry of Labour and Social Security
MOH	Ministry of Health
NCTVET	National Council on Technical and Vocational Education and Training
NTA	National Training Agency

NGO	Non Governmental Organization
NPOA	National Plan of Action
NSP	National Strategic Plan
NYS	National Youth Service
PACE	Programme for the Advancement of Early Childhood Education
PECE	Project for Early Childhood Education
PIOJ-	Planning Institute of Jamaica
PSAT	Parent Support Advisory Team
PTA	Parent Teachers Association
RC	Resource Centre
RCUP	The Resource Centres Upgrading Project
STATIN	Statistical Institute of Jamaica
UK	United Kingdom
UN	United Nations
UNESCO	United Nations Education, Scientific and Cultural Organisation
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
UWI	University of the West Indies
WB	World Bank
ZAC	Zone Action Committee

1. Introduction to Early Childhood Education in Jamaica

Historical and population overview

Jamaica is a sub-tropical island situated in the Greater Antilles in the English speaking Caribbean, 145 kilometers south of Cuba and 190 kilometers west of Haiti. Originally a former colony of the Spanish and later the British, Jamaica gained its independence in 1962. Its educational system still retains strong influences from its colonial past, which was geared towards the economic survival of a plantocracy based on slave and indentured labour. Governments since independence have focused on universal access to education, so that Jamaica has virtually fulfilled the primary enrollment levels of MDG 2, but this has been within a class-based, two-tiered educational system. At the early childhood level this is reflected in the stark difference between community basic schools, with minimal resources including small government subsidies, and well-resourced private kindergartens within preparatory schools which operate parallel to government primary schools and whose students perform on average at a much higher academic level than their counterparts. The literacy rate for females has always been higher than for males. In 2007 male adult literacy stood at 80%, female at 90.7% (UNESCO Institute for Statistics)¹.

The population is estimated to be 2,682,100 (Statistical Institute of Jamaica 2007) with an ethnic composition of 91.2% black, 6.2% mixed and 2.6% other (including Indian, Chinese and Middle Eastern), according to the last census in 2001. The annual population growth rate is 0.47 (2007), with a median age of 23.4 years. Just over 18 percent are between 0-9 years. The birth rate for Jamaica is 17.0 births per 1,000 mean population and life expectancy at birth is 71.88 years for males and 75.38 years for females.

The Gross Domestic Product per capita was US\$4,817 in 2007, up from US\$583 in 1990, but has shown minimal growth over the past decade. Jamaica has one of the highest debt to GDP ratios in the world, at 111.13% of GDP in 2007. Debt service payments accounted for 55.7% of total government expenditure for 2009/10, compared to 12.6% for education and 5.3% for health (Planning Institute of Jamaica 1992, 2001 and 2008 and personal communication with A. Taylor-Spence, PIOJ)².

The labour force by occupation in 2007 was 17% agriculture, 19% industry and 64% services that include tourism (Statistical Institute of Jamaica 2008b), compared to 28% agriculture, 17% industry and 55% services in 1990 (Statistical Institute of Jamaica in Planning Institute of Jamaica 1992), showing a shift away from agriculture to a more service-oriented economy. Unemployment has declined over the past three decades from 21-28% from the late 1970s-late 1980s, dropping to 15-16% during the 1990s, and continuing to trend downwards since 2003 reaching an annual rate of 9.9% in 2007 (Labour Force Surveys, Statistical Institute of Jamaica). Post global recession data will

¹ UNESCO Institute for Statistics; www.uis.unesco.org

² Statistical Institute of Jamaica; www.statinja.com

likely show this rate increasing. Female unemployment has always been higher than male unemployment with youth unemployment (14-24 years) being the highest. Young women have the highest national unemployment rate.

Health and social indicators

Jamaica has a comprehensive childhood immunization programme under public health law, with generally high immunization rates (76-87% coverage 2007), although there has been a decline of approximately five percent over the past 10 years. The total infant mortality rate is 15.57 deaths/1,000 live births, with male rate slightly higher than for females (STATIN 2008a). This rate has been reported as relatively stable over recent years, but under-registration, 36% in a 1999-2003 evaluation (Jamaica Social Policy Evaluation 2008: 272), throws some doubt on this figure.

Child malnutrition in children under 5 has trended downward from 8.4% (1990) to 2.2% in 2007 (Jamaica Survey of Living Conditions 2007, 1990). Child obesity has moved upward to an estimated 7% of children under five in 2004 (Planning Institute of Jamaica cited in Jamaica Social Policy Evaluation 2008: 245).

A quarter of patients seen for unintentional injuries in the Emergency Units of all public hospitals in 2007 (Jan-Oct) were children in the 0-9 years age group. Four out of every 1,000 children (0-12 years) who visited the only Children's Hospital between 2004-2008 were suspected victims of violence related injuries, including physical abuse, sexual abuse or gunshot wounds (Ministry of Health 2008: 3). The likelihood of under-reporting of such incidents suggests that this figure is likely higher.

Jamaica's adult HIV prevalence was 1.5% in 2008; an estimated 25,000 persons were living with HIV, 60% of who were unaware of their status. Significant declines in pediatric AIDS cases, from 25% of live births to mothers with HIV in 2002 to 10% in 2006, have been achieved through the programme for the prevention of mother-to-child transmission, utilizing antiretroviral medication (National HIV/STI Control Programme, Ministry of Health).

Jamaica has a high percentage of female-headed households, increasing over the years from 41.5% in 1993 to 46.7% in 2006 (Planning Institute of Jamaica and Statistical Institute of Jamaica 1998 and 2007). In 2006 the average number of children was 3.6 in female-headed households and 3 in male-headed households.

In Jamaica's rural areas in the past, the African proverb "It takes a village to raise a child" was a lived reality. Every adult in the community was expected to act in the place of parents if they saw a child misbehaving on the street or if a child was in need of assistance while away from home. This tradition, which requires a high level of social capital, was also transferred to some extent by large numbers of rural migrants to the inner city urban communities in Kingston and elsewhere. Many bemoan the erosion of this tradition by the exigencies of urban life, particularly in very poor inner-city neighbourhoods where almost all adults struggle to find work sufficient to support their families.

Traditionally women in all social classes were, and to a great extent still are, considered responsible for child-rearing; while men, whether resident in or outside the family unit, are held to be primarily responsible for financial provision. In rural areas the woman has often been both housewife/caregiver, and participates in the farming economy by selling the farm's products on market days. Children's involvement in the harvesting, packaging, transporting and even selling of goods on market days still affects school attendance in farming communities³. In rural areas children are frequently raised by grandmothers to facilitate their mothers moving to the capital city, Kingston, or even abroad, to take up employment. This employment is often as live-in household help to more affluent families.⁴ In many families, including urban families, the unemployed or retired grandmother is still the preferred choice for rearing young children once mother returns to work. This traditional child-rearing and nurturing female role is reflected in the overwhelming proportion of women involved in early childhood education. Recent gender statistics for government infant schools indicate that all infant school principals are female and that the ratio of female to male teachers moved from 60f:1m in 2001 to 172f:1m in 2007⁵. Although these government infant schools and departments cater to only 10% of students aged four to six years, they reflect the reality throughout the early childhood system.

Administration of Early Childhood Services

Before 1998, responsibility for services to children **birth to age three** rested primarily with the Ministry of Health's Children's Services division, which also served all children in need of state care and protection, fostering or adoption. However, the Day Care Unit - a new government initiative in 1975 - resided within six different Ministries over two decades. **Preschool services** for children from age four to school entry were always seen as the purview of the Ministry of Education.

Day Care services

Until 1975 no ministry had been involved in care services for children from birth to three years old except for medical and immunization services in the primary healthcare system under the Ministry of Health. A new democratic socialist government launched a National Day Care Programme in 1975 and built 23 day care centres to serve the working mothers of low-income communities. These centres received a small subsidy but were supposed to be mainly supported by fees from working parents. Plans to expand the programme never materialised and 10 centres eventually were closed. The remaining 13 government day care centres are partially subsidised.

³ This is clear from the present Absenteeism project, part of the ME Primary Education Support Project, among the 100 primary level schools with the greatest attendance problems, the majority of which are in rural and deep rural areas.

⁴ In 1984 the occupation of 16% of working women was domestic work, and 58% of these domestic workers came from rural farming families (Gordon 1987: 25).

⁵ Education Statistics, Ministry of Education, quoted in Jamaica Social Policy Evaluation 2008: 137.

The National Day Care Unit was to register, inspect and monitor the performance of all day care services, including the few Government-built centres, the many home-based centres (found especially in lower-income areas and serving small groups of children), and all other private day care centres serving working parents. Most upper income families typically hired nannies for child care. The private centres, including many church-based facilities, were usually better equipped in terms of trained staff and materials than government or home-based centres (McDonald and Brown 1993).

The National Day Care Unit was seriously weakened in the mid-1980s by drastic cuts in the public service under structural adjustment programmes, resulting in the loss of over 50% of the posts in the Day Care Unit. In 1995, three years before official “integration” with education services there were six Day Care Coordinators (DCCs) including the Director in the Unit, supervising 254 Centres with 8,500 children (Ministry of Education 1995: 22). By 2009 there were only three Day Care Coordinators, including the Director, supervising 404 Centres with 9,022 children (2006 figures for children, Table 1, p.54). The closure of a day care facility could only be carried out by order of the Fire Brigade or Public Health Officers, with whom DCCs worked closely, for breaches of safety or hygiene standards. Local government authorities were not involved except via these inspectorate functions which fell under their jurisdiction.

Preschool services

In the late 19th century a few women teachers were allowed to teach a small number of children in primary and infant schools. As mothers began to work in factories, more children began needing custodial care in the 1920s and 1930s (Morrison and Milner 1995). These Infant Schools were modeled on the state-run British Infant Schools and were the earliest providers of education for pre-six-years old.

The first community preschool or “play centre” for children under six years old was opened in a rural town in 1938 by a Rev. Henry Ward, a United Church minister, responding to the great demand for child care from working mothers. In 1941 Ward and his associates presented a report with specific recommendations relating to teacher qualifications, facility requirements, administrative procedures etc., to the Jamaican Board of Education calling for the establishment of “play centres” for young children as part of the Jamaican education system. These centres were to include “organized play/stories; action songs; lessons on children’s pets and other familiar creatures; care of a children’s garden; foundation work in reading, writing and number work; handiwork [...]” (Bernard van Leer Foundation quoted in Ward and Milner, 1995). Rev. Ward’s term ‘play centre’ had to be dropped in response to parental objections and replaced by ‘basic school’, a telling commentary on the traditional and still prevalent ‘schoolification’ attitude to early childhood education among the majority of parents.

From the 1940s, Government assumed some form of supervision of preschools for children three to five years, although almost all were under private auspice (individuals or community organizations). Although the Government’s overall position was that education in early childhood was the responsibility of the parent or, if they were unable to meet it, that of the local community, it did begin to offer a small subvention to develop

such community based play centers or “basic schools” as they came to be known. The 1944 Moyne Commission, charged by the colonial British Government with enquiring into the social, economic, and education conditions underlying the mass uprisings by labour in Jamaica and many other British Caribbean territories, recommended among other things that preschools be established.

“Jamaica is one of the few countries of the ‘Third World’ which can boast a low-cost model of provision of preschool education, despite all its shortcomings. What is exceptional about the present system is its decentralized community-based approach and community-supported nature.” (Scott-McDonald in Dudley Grant Memorial Trust 1995: 3). In the 1960s one teacher provided inspired leadership and a respect for community capacity that made a tremendous mark on pre-school education; Dudley R. B. Grant is often referred to as the “Father of Early Childhood Education” in Jamaica. He and a number of education leaders had begun to associate poor performance at primary school with lack of stimulation and training in children’s earlier years. Grant and others approached Holland’s Bernard van Leer Foundation (BvLF) with a vision to adapt the U.S. Head Start programme model for poor communities. Thus began a long partnership between D.R.B. Grant, the Bernard van Leer Foundation and the Ministry of Education for the development of early childhood education for 3-5 years old in Jamaican communities. This partnership was supported by the University of the West Indies’ Jamaica campus⁶, which administered the Foundation’s funds. Grant “promoted a management and community sponsorship structure that would serve to anchor the program in the life of the community.”

From 1972 significant expansion of the early childhood programme took place. The Ministry of Education established a separate Early Childhood Unit with its own budget and 30 Early Childhood Education Officers (EOs) to register basic schools and train basic school teachers island wide. A classroom curriculum and training programme was formally adopted. Instructional supervision was also provided to Infant Schools. The Unit was not given legislated authority to license or directly close a basic school. As in the case of Day Care Centres, only the Public Health or Fire Department could close a school on the basis of unsatisfactory hygiene or safety conditions. ME inspectors could only give “warnings” after inspections.

In 1975 the government introduced salary subsidies for basic school teachers and in the following year began to establish Infant Departments in some primary and all age schools. In 1976 a Code of Regulations was introduced to govern the management and administration of basic schools. Each basic school was managed by a Board of local community representatives, known under the Code of Regulations as the Sponsoring Body, which undertook among other things to seek donations and sponsorship to improve the educational facilities. The new Code detailed procedures for admission of students and proper record keeping, teacher qualifications and appointment as well as criteria for official recognition for subsidies. “Recognised” basic schools had to satisfy the EC Unit of the adequacy of:

⁶ At that time known as the University College of the West Indies.

- physical hygiene and sanitation facilities;
- enrolment for the size of the community;
- sponsoring body support; and
- Specific stipulations regarding teacher qualifications (added later).

An elaborate local governance system supported the basic schools with varied levels of enthusiasm and activity, dependent on the particular sponsoring body members. The island was divided into zones of clustered basic schools whose teachers would attend fortnightly training sessions; these became monthly in the late 1990's. Each instructional zone was supposed to have a support body known as a Zone Action Committee (ZAC), which would be made up of some members of the sponsoring bodies of all the schools in the zone. This was a support network that would coordinate joint activities, help to mobilise communities, mediate problems that might arise, give assistance to the Education Officers (EOs) and, when appropriate, endorse applications for recognition from unrecognised basic schools. There were also EO and teacher representatives on the ZAC. Some members of each ZAC would represent their zone on the Parish Basic School Board. Representatives of the Parish Boards would then sit on the National Basic School Board, which had representation from the Jamaica Teachers Association (JTA), and could act as an advocate for basic schools with the Ministry of Education, funding agencies and the private sector.

The 1980 Education Act recognized the early childhood movement with the formal definition of a pre-primary school, and defined the government's authority and responsibilities in relation to monitoring and raising the quality of services within this burgeoning movement.

Types of early childhood services and enrolment

As terms for such services differ within the Caribbean and the wider world, we first note the common designations used in Jamaica for a range of early childhood institutions (ECIs):

- ***Preschool*** - technically, this term embraces all ECIs for children from three to six years. However, it is most often used to indicate that such a school is privately owned, by an individual, corporation or faith-based institution. These operate with private fees and fund-raising.
- ***Kindergarten of Preparatory School*** - Preparatory schools are private institutions for children from age three to five (in Junior and Senior Kindertgartens) through to Grade Six at ages 11-12.
- ***Basic School*** - A community-owned school operated by an individual, Trust, or

faith-based institution. Up until the implementation of the 2005 Early Childhood Act and Regulations, basic schools which met a set of basic requirements of the Ministry of Education were “*recognized*” for the purpose of receiving subsidies to staff salaries, nutrition supplies and learning materials. Approximately 7% of all basic schools are “*unrecognized*”. Under the new act, all schools regardless of previous status have to apply for registration and inspection for licensing purposes. The definition of basic school under the new act more broadly embraces any “school that offers a course of educational training for students under the age of six years”.

- ***Day Care Centre*** - “Any premises used for the provision of non-residential day care service to more than four children up to six years of age for at least six hours per day and at least four days per week” (Early Childhood Act 2005). With the exception of a few centres in low-income communities which are subsidized by government, all other day care centres operate on parent fees and fund-raising. This definition allows for older children to attend after other schools (basic or private) end for the day, but **within this report, “day care centre” usually refers to full-day programmes for young children up through the age of three.**
- ***Home-based day care*** - most commonly denotes care offered in an individual’s home for up to four children for fees.
- ***Infant Department*** - sections of public primary schools that operate like a basic school/kindergarten for children ages four and five, prior to entrance to Grade One.
- ***Infant School*** - Government owned schools that operate under similar Ministry supervision as the basic schools for the same age group.
- ***Early Childhood Institution*** - the term used in the 2005 Early Childhood Act to describe “a setting that provides developmentally appropriate care, stimulation, education and socialization, for children under the age of six years, including day care centers and basic schools”. This term is now used by the Ministry of Education and the Early Childhood Commission for all settings subject to inspection under the Regulations.
- ***The sector as a whole:*** - Traditionally, the term ‘*early childhood education*’ has been used to denote school-like programmes for children from age three or four - up to entry to formal schooling at (usually) six years of age. ‘*Care*’ has applied more often to day care settings, in which young children were cared for often for the full day to free parents to work. More recently, the term ‘*early childhood development*’ began to be used to describe programmes which combined elements of both ‘*education*’ and ‘*care*’; this move was driven largely by research on factors supporting early development of children in several domains. Internationally and within the Caribbean, a wide range of acronyms variously

combining education, care and development have been used to describe the sector as a whole, i.e. ECE, ECCE, ECCD, ECECD and ECD. At different points in this report, each of these may appear in cited documents. When not citing other sources, the acronym ECD is used to denote the broad integrated field.

The following tables (1 and 2) indicate the numbers and types of day care centers and preschool services prior to integration (1997) and ten years after integration (2007). Participation (enrolment) figures are also indicated in these tables.

Table 1: Types of Day Care Centre and Coverage pre-and post-1998 Integration

DAY CARE CENTRES	1997	2007
No. Private:	107	178
% of all Centers	35%	44%
% of all children in centers	66%	75%
Total no. of children 0-3 years	5,217	6,787
Average no. children per centre	49	38
Total no. of staff	642	1,247
Average staff: child ratio	1:8.4	1:5.4
No. Home-based:	186	213
% of all Centers	60%	53%
% of all children in centers	28%	22%
Total no. of children 0 – 3 years	2,165	1,973
Average no. children per centre	12	9
Total no. of staff	296	221
Average staff: child ratio	1:7.3	1:8.9
No. Government Built:	17	13
% of all Centers	5%	3%
% of all children in centers	6%	3%
Total no. of children 0 – 3 years	498	262
Average no. children per centre	29	20
Total no. of staff	155	119
Average staff: child ratio	1:5.3	1:2.2
Total no. of day care centers	310	404
Total no. of day care staff	1,093	1,587
Total no. of children in centers	7,880	9,022
Total 0-3 years cohort	235,212	181,847
% in Day Care*	3.4%	5%

Sources:

Early Childhood Unit for all items except the 0-3 yr cohort from the Statistical Institute of Jamaica

* N.B. There were 37,279 three years old in Basic Schools in 1997 and 27,674 in 2007

Table 2: Types of Pre-School and Coverage pre- and post- 1998 Integration

PRE-SCHOOLS	1997	2006
No. Recognized Basic Schools: % of all Basic Schools	1,590 92%	1,871 93%
% of pre-school children in recognized basic schools	84%	86%
Total no. of children enrolled (3-5 years old)	110,268	111,978
Average no. children per school	69	60
Total no. of teachers	4,171	5,244
Average teacher: child ratio	1:26	1:20
No. Unrecognized Basic Schools: % of all Basic Schools	140 8%	140 7%
% of pre-school children in unrecognized basic schools	4%	4%
Total no. of children enrolled (3-5 years old)	5,637	5,759
Average no. children per school	40	41
Total no. of teachers	206	299
Average teacher: child ratio	1:27	1:19
No. of Infant Schools:	29	29
% of pre-school children in infant schools	7%	6%
Total no. of children enrolled (3-5 years old)	9,122	7,949
Average no. children per school (inc. some 6 years old)	327	285
Total no. of teachers	355	337
Average teacher: child ratio	1:27	1:26
No. Infant Departments:	92	97
% of pre-school children in infant departments	5%	4%
Total no. of children enrolled (3-5 years old)	5,833	5,005
Average no. children per school (inc. some 6 years old)	68	56
Total no. of teachers	204	258
Average teacher: child ratio	1:31	1:21
Total no. of pre-schools (excl. private kindergartens)	1,851	2,137
Total no. of pre-school teachers	4,936	6,138
Total no. of children in pre-school (excl. kindergarten)	130,860	130,691
Total no. of children 4-5 years enrolled in pre-schools	98,126	95,532
Total 4-5 cohort	110,909	97,254
% of 4-5 years old in all pre-schools except private kindergartens	88.5%	98.2%

Sources: Early Childhood Unit and Statistical Department of ME for all figures except the total cohort numbers from the Statistical Institute of Jamaica

Caregiver and teacher qualifications

Prior to the 80s, few of the teaching staff within preschools had formal training beyond the twice-monthly workshops provided by the Ministry of Education's officers; within the day care staff cadre, few had any formal early childhood training, and only occasional workshops were provided these caregivers. Bachelor degree programmes were initiated through the Bernard van Leer Foundation with the support of the European Economic Commission and the World Bank in 1979-81 and 1985-1992 respectively. Many of the education officers who were training basic school teachers gained their early childhood diplomas or degrees through these programmes. Originally initiated by Dudley Grant, Resource Centres were set up by the Parish Basic School Boards to decentralise advice and training for basic school teachers. There are now 14 throughout the island, with one in each of the 14 parishes. During this period basic school teachers formed their own Basic School Teachers Fellowship.

Categories of workers within the sector include:

Caregiver - The term most commonly used for persons who care for infants and young children in day care settings.

Teacher - The term 'teacher' has been used traditionally to describe the persons who staff all types of preschools/basic schools, as these are considered 'educational' institutions. Most have until recently not had formal teacher training beyond regular Ministry workshops.

Trained teacher - ECI staff who have obtained some level of formal training in early childhood education and who work in preschool/basic school settings.

Early childhood practitioner - a generic term more recently adopted to apply to all of the above categories of worker, without reference to level of training.

2. Rationales for integration of early childhood care and education – the 1990s

Evaluation of services reports

The decision to integrate services was not a rapid one but was preceded by research, advocacy and discussion over a period of four years from 1993-1997. Two major and penetrating pieces of research - one an evaluation of day care services and the other an evaluation of the pre-school system - laid the groundwork. Each of these studies was for one of the two ministries then involved in early childhood. The 1993 *Evaluation of Day Care Services in Jamaica* by McDonald and Brown was initiated by UWI's Caribbean Child Development Centre (CCDC) for the Children's Services Division, Ministry of Health, and was funded by UNICEF.

This UNICEF funded evaluation looked at a 35% sample of all types of the then 200 day care centers, and found many areas of weakness. These included lack of curricula to guide staff, an overemphasis on custodial care and rote learning rather than developmental activities, lack of sufficient play equipment and learning materials for both indoor and outdoor activities. There were also staff weaknesses in planning and implementing activities and planning and monitoring individual child progress. So while good custodial care was the norm and its quality was found to be often quite high in terms of attention to hygiene, safety, and nutrition (reinforcing strong cultural values in these areas), it was not balanced with stimulating cognitive, social and affective content. Indeed, child-directed learning, discovery approaches in teaching, opportunities for children's self-expression in speech, art and other activities, were the exception rather than the rule. The study found that approximately 50% of the staff had no formal training in early childhood education and another 28% had only attended a one or two week course. Salaries were very low, comparable to wages for domestic help. Not surprisingly there was a very high level of staff turnover in these centers (McDonald and Brown 1993).

Before integration no funds were allocated to the Day Care Unit for training. In light of the overwhelming need, the Unit sought external funds and for a long period these were provided by UNICEF, who, in the words of the Director of the Day Care Unit, "played a tremendous role in whatever existed in Day Care at the time."⁷

At a well-attended conference at the end of the study, stakeholders and informants developed recommendations to achieve four primary goals:

- a. The improvement of the quality of child care provision nationwide;
- b. The strengthening of community understanding of and advocacy for child care needs;

⁷ Interview on February 12, 2009 with Mr. Fitz Brown, Day Care Coordinator in the Day Care Unit from 1982 and Head of the Unit since 1994

- c. The rationalization and fostering of effective partnerships among Government, NGO and private sectors to promote quality child care delivery; and
- d. The establishment of a Government of Jamaica preschool child policy in keeping with the Government's commitment to the Convention on the Rights of the Child, ensuring basic care and education for all beginning at birth.

The second study, the 1995 *Evaluation Report on the Early Childhood Education Programme in Jamaica* by McDonald (1995), was initiated by the Dudley Grant Memorial Trust for the Early Childhood Unit of the Ministry of Education and funded by the Bernard van Leer Foundation. This evaluation followed a 1984 assessment (Programme for the Advancement of Early Childhood Education (PACE) Needs Assessment 1984) which saw basic schools overall lacking in materials, and untrained teachers using inappropriate instructional approaches. The 1995 evaluation found similar challenges: unsuitable learning environments, including unsuitable furniture, large class size in infant schools and departments, and a severe shortage of learning materials in the majority of schools, particularly those of an interactive nature so critical to this age group. Concerns with pedagogy included a low level of integration of subject matter, an overemphasis on cognitive development to the neglect of physical, social and moral development, minimal opportunities for self-expression and critical thinking; inappropriate handling of children and inappropriate behaviour management (McDonald 1995).

A post-evaluation workshop held among stakeholders recommended the following actions:

- a. A national Early Childhood Education policy;
- b. Incorporation of the Day Care Unit of the Ministry of Health (MOH) into the Early Childhood Education Unit of the Ministry of Education, guided by an inter-ministerial committee including representatives from MOH's Maternal and Child Health Department;
- c. Development of a master plan for training all EC personnel, linking training to a certification/accreditation system;
- d. Streamlining curricula development and revising existing curricula;
- e. Development of a shared monitoring system for day care and pre-school, i.e. national standards, licensing, standardized monitoring tools and a centralized computer base; and
- f. Mainstreaming early childhood education and day care into all policies and programmes of government (e.g. industrial, housing and labour/employment).

Forty Education Officers from the ME's EC Unit were involved as field workers in this research, learning more about their own field of work in practice and theory and owning the recommendations because they were part of the study team. Although the consultation workshops following these studies drew broadly from particularly health and education sectors, they did not involve other groups like trade unions or the private sector, nor direct beneficiaries of the early childhood services.

Inspired leadership

Early childhood education in Jamaica has been characterized, as one writer has put it, by “a ‘fire and passion’ [...] not found in most of my interviews in other countries (but reminiscent of statements recorded by the ‘Kindergartner’ movement in the latter half of the 19th century)” (Inter-American Development Bank 1999: 27-28). The mantle of Dudley Grant and his fellow educators, inspiring teachers and education leaders, was taken over by a group of child development professionals based primarily at the University of the West Indies, who led the conceptual debate and provided the motivational drive for advocacy and action.

While the local advocates were fueled by the recent research findings as well as their observations of services on the ground, other critical fuel for this “fire and passion” was provided by UNICEF in its strategic role of helping the GOJ develop programmes for the 1997-2001 GOJ/UNICEF programming and funding cycle. To this end, UNICEF convened a meeting of early childhood/child development professionals in February of 1995 which discussed the fragmentation of services and the clear need to improve the quality of early childhood provisions overall. UNICEF made it clear that addressing these issues would appropriately fit its mandate for the next five-year cycle.

Multi-sectoral collaboration

Following this meeting and motivated by the discussion, many of the same professionals independently reassembled as a non-government Task Force convened by Joyce Jarrett (UWI/PECE), and began to meet regularly from June 1995, assisted by a consultant's concept paper⁸. The group which met represented the Ministries of Education (Early Childhood Unit), Health (Children's Services, Day Care and Child Support Units), and Finance and Planning (Planning Institute); the Dudley Grant Memorial Trust, NGOs offering early childhood services, the Day Care Association, The Basic Schools Teachers Fellowship, University of the West Indies (child development and education sections), independent consultants, and international funding partners UNICEF and Save the Children (UK).

The first meeting of the Task Force framed their concerns in coming together: “Within the context of the U.N. Convention on the Rights of the Child which Jamaica has ratified (1993), and in particular Articles 6 and 24, **good early childhood care and education**

⁸ McDonald, K (1995). “Rationale and Recommendations for Integration of Early Childhood Education in Jamaica”, commissioned by UNICEF.

provide much, much more than a school readiness programme for 0-6 years old. They reflect a comprehensive vision of support for child development, health and well being, encompassing educational practice/techniques, relationship/partnership with parents and connections with other community agencies and institutions”⁹.

While the quality of services for children three and below (day care) and for children four and five (basic/pre-schools) were both assessed in the 1993 and 1995 research studies as generally inadequate, particularly in areas other than custodial care, the plight of the younger set of children was seen as more dire for the following reasons:

- (a) awareness of new brain research which underscored the importance of early stimulation to total child health;
- (b) the widely disparate levels of state support for the two age cohorts, with younger children receiving little attention outside health centre visits;
- (c) the dearth of parenting education supports which would, apart from supporting better child care practices, have strengthened demand for better and more numerous services for this cadre.

Thus a primary drive for integrating day care services with those supported by the Ministry of Education was to redress this wide gap in service delivery and support. Children three and under were seen almost entirely as “parents’ responsibility”, even though growing numbers of parents (many without partners) were working and in need of child care, and parents had few sources of parenting education support to appropriately extend their knowledge of child development. Day Care services had from inception been treated like Education’s ‘poor cousin’ in terms of attention and resources. Thus integration represented from the outset a concern for a more balanced continuum of care from birth through to entry into formal school settings.

Broad definitions of integration

The group proceeded to agree on elements of an initial broad definition of integration:

1. Mainstreaming of early childhood care and development into the economic policy and programmes of government i.e. prioritizing a focus in industrial policy, centralizing need in country planning, providing incentives to investors who address the economic requirements for childcare/early childhood support;

⁹ From Archival material, Integration Task Force files, held by the Secretariat of the Task Force (at that time, Save the Children UK, moving in 1996 to the Child Focus Project of Caribbean Child Development Centre and Institute of Education, University of the West Indies). The CRC Articles refer to (6) every child’s inherent right to life and the State’s responsibility to ensure child survival and development, and (24) the child’s right to enjoy the highest possible standard of health, to be reunited with parents/family if separated, and the State’s responsibility to provide to parents and children access to education and support for achieving and maintaining full health.

2. Combining services to children, specifically day care and education, with preventative health care (as administered through/alongside day care and preschool services);
3. Coordinating management of services, training of staff and delivery of the curriculum (in the widest sense);
4. Agreeing service objectives and methods/purposes of monitoring and evaluation.¹⁰

Linking early childhood services to the cycle of poverty

Almost concurrently with the formation of the Task Force, the Government launched its “poverty eradication” strategy, and the national debate which followed stimulated the formulation of arguments for improved early starts for children to help break the poverty cycle. By July 1995 the Task Force had taken seriously the connections between early childhood care and poverty in a discussion brief entitled “Eradicating poverty? Invest in Jamaican children before they are four and Jamaica also invests in their parents”. In this brief **an integration model was posed as a primary strategy for the government’s policy on poverty eradication**, recommending:

1. Mainstreaming early childhood care and education (as described above).
2. Specifically targeting the poor for integrated early childhood services - to include at least preschool education, preventive health care, day care, and parenting education.
3. Training a cadre of early childhood community educators (like the National Youth Service) to develop community based nurseries and parent education support groups throughout the country.

The brief even recommended a financing strategy that of a 1% levy on the business community, similar to that used to finance technical and vocational training. This recommendation was not pursued.

Strategies to achieve a refined definition of integration

By late 1995 the Task Force had opted to work with the following definition of integration:

- **Unitary management** of services and systems relating to early childhood education, care and development starting from birth, with general consensus that this task would fall to the Ministry of Education;

¹⁰ Ibid.

- **Strengthened linkages** amongst all health, education and welfare provisions, and public and private sector initiatives affecting young children; and
- **Incorporation of early childhood interests in all Government policies** (economic, industrial, transportation, housing, and other social policies).

The Task Force then adopted some ambitious strategies:

1. A programme of sensitization of key persons in the Ministries and in the wider field of early childhood organizations providing services;
2. A work plan for the development and implementation of an early childhood policy which would address training and curriculum requirements; accreditation and remuneration systems linked to training; pilot testing of integrated service models (with inclusion of children with disabilities as one objective); the development of standards, tools and systems for registering, regulating and monitoring the sector; and projected resources needed for national implementation;
3. The establishment of a national resource centre for early childhood information, based at the Centre for Early Childhood Education, established by the Bernard van Leer Foundation in conjunction with the University of the West Indies, to support joint areas of interest and van Leer funded projects. The Ministry of Education subsequently agreed to second a senior member of staff to be responsible for the resource centre's work. The University agreed to upgrade the building and its library resources, and a World Bank funded UWI project assisted the centre's internet access.
4. To plan for the establishment of a National Council on Early Childhood Education, Care and Development linked to the National Council on Education, to ensure representation of Early Childhood interests on all national policy making bodies.¹¹

Tensions and debates

Work on these strategies produced some inevitable tensions and debates. Some feared that Day Care concerns would be “swallowed up” in the much larger Early Childhood Unit of the ME, and that the differently qualified staff would be sidelined. There was concern that officer duties would become unmanageable if the monitoring of both day care services and preschools was required without enlarging the cadre of officers considered unlikely. Targeting the poorest was also a thorny issue as traditionally basic school subsidies were equal for all recognized schools regardless of the community's economic status. The idea that some could lose support in favor of needier schools did not sit well with many, particularly since the whole basic school sector was generally underfunded. Although not all issues were resolved, the goal of unitary management was pursued and **in mid-October 1996 the Ministry of Health agreed in principle to the transfer of the staff and budget of the Day Care Unit to the Early Childhood Unit.**

¹¹ Ibid., and McDonald 2003: 103.

A push from the wider Caribbean

Within a matter of months, a concurrent regional process resulted in the Caribbean Plan of Action (CPOA) for Early Childhood Care, Education and Development (ECCED) being endorsed at a conference in Barbados of senior early childhood stakeholders from 18 countries. The draft was prepared by a Jamaican consulting team (all members of the Task Force).

The CPOA was subsequently adopted by CARICOM Heads of State in July 1997 as the foundation for human resource development within the region and became a seminal document which undoubtedly prodded integration. This CPOA *assumed* a comprehensive framework as essential and spelled out the full range of elements needed within such a framework - legislation, policies and standards, training, prenatal and other early health requirements, parenting and community supports, financing, etc. Section 9 of the CPOA recommends that Governments “Implement integrated approaches for ECED for children from birth to school entry” (CPOA 1997: 23) citing the following constraints and opportunities in the region as a whole:

“Constraints: Lack of equity in resource distribution, and insufficient attention for targeting the poorest and children at risk; fragmentation and duplication of service delivery systems; lack of cooperation, coordination and convergence between government programmes; and lack of integrated approaches at management level.

Opportunities: Practical experience has demonstrated the power and effectiveness of integration within a single ministry where there is designated (additional) capacity and strong political support. Different approaches include *cooperation* between agencies and government, *coordination* of services and supports at local level, and *convergence* of responsibilities under single management. Important for integration at community level is to *combine the coordination strategy with devolution of decision-making power to generate community participation.*”

Thus the concept of integration in the CPOA comprised several possible configurations for governments to consider in acting on their commitment to integration: coordination; convergence; combination; and cooperation.

Summary of rationales

The initial push for integration which resulted in the unitary management of care and education services for children under the Ministry of Education was driven by (a) the assessment of poor quality of service provision in both sectors, leaving young children inadequately prepared for formal schooling; (b) the uneven treatment of the sectors in terms of financing, training and curriculum support, with particular concern for very young children, and (c) the conviction that improved quality of service delivery in the early years - particularly to the most vulnerable - would link directly with government’s resolve to reduce/eradicate poverty. Scientific and economic evidence was building

internationally and locally in support of this argument; not only would higher quality settings produce children with better language, mathematics and emotional-social skills (thus readier for the challenges of primary school), but the documented savings to governments from investing in quality early childhood programmes would also help grow the economy out of poverty.

3. Process and transition at national level

The Integration Advisory Committee (IAC)

The Task Force became the de facto preparatory committee for integration, and was formally “adopted” by the Ministry of Education as an Integration Advisory Committee (IAC) in May 1997 when the new integration programme was officially announced. The work to design a model for integration resulted in the new Committee recommending the following:

- a common set of standards for services from birth through age six, i.e. revising the existing basic school ones and creating new ones for Day Care services) (This committee undertook the groundwork for these standards);
- harmonised and integrated pay scales for the sector;
- integrated financing, with investment incentives for the private sector to invest in early childhood services;
- integration of training for the full sector, incorporating a more holistic view of the child’s needs from birth through to primary school entry;
- a financing model to pilot integrated services in the two parishes with the highest numbers of day care centres and basic schools - St. Catherine and Clarendon. This model included the costs of a new “Integration Coordinator” within the Ministry.

A preliminary implementation plan and budget was submitted by the IAC to the ME. As can be seen when the above list of IAC objectives is compared with those of its initial work as a Task Force, the idea of “mainstreaming” integration across sectors shifted to a more narrow focus on melding the two sub-sectors of Day Care and Early Childhood Education and testing the efficacy of this move before rolling it out nationally.

In August 1997 the first meeting took place between officers of the Ministry of Education’s EC Unit and the Director and Coordinators of the Day Care Unit within the Ministry of Health. The recommendation of the pilot model in two parishes was accepted but was to be externally funded by UNICEF and an Integration Coordinator was appointed in the same month. UNICEF also provided funds for an Administrative Assistant to this pilot programme and supported some costs of new curricula, parenting training via new Parent Support Advisory Teams (PSAT) in the two parishes, as well as smaller but vital inputs such as refreshments for Inter-Agency Meetings and some materials. The Instrument of Transfer for merger of the administrative structures of the Early Childhood Unit and Day Care Unit, having been approved by Cabinet, was signed by the respective Ministers in August 1998. The transfer of authority was made wholly to the ME and no further coordination mechanisms were considered necessary.

The Ministry of Education assumes full authority

In late 1998 the Day Care Unit moved onto the large Caenwood campus [central Kingston] within which many ME Units were located, including the Early Childhood Unit. The Day Care Unit, however, did not fully merge physically or in status. It was located on the campus in a different building from the Early Childhood Unit. The title of Day Care Coordinator (DCC) did not change to the title of her/his counterpart Education Officer (EO) in the Early Childhood Unit. At the time this could justifiably have been related to the fact that not all DCCs were trained teachers; some had degrees in Social Work. Their salary levels remained lower than the EOs. This discrepancy remains up to the time of this report, despite new DCCs entering with both a degree and teacher training, thus meeting the same standard EO qualifications. As a result, DCCs successfully apply for vacant EO positions when they arise, remaining within the EC Unit, but likely to be primarily supervising basic schools since they are much more numerous than day care centres. The Day Care Unit still has its own director who reports to the Head of the Early Childhood Unit. Similar anomalies exist. The position of Day Care director is paid higher than an ECU supervisory post located at the regional office, but lower than a senior EO in the Early Childhood Unit in the Head Office on the campus, although their remits are comparable.

The transformation of the Task Force into an advisory committee to the Ministry put the integration ball even more firmly into the Ministry's court. The Integration Advisory Committee continued to meet but without decision-making power in relation to the Ministry's Integration Programme or the Integration Coordinator. The Coordinator also was without significant implementation powers, as she could not give directions to education officers within these two parishes, as they remained accountable to the Regional Offices and to the Head of the Early Childhood Unit. The process of integration continued to be hampered by the absence of an integrated legislative and policy framework. This absence slowed or prevented "coordinated planning, development and implementation of ECED initiatives" (Davies 2000: 13-14). The Integration Coordinator left before the end of the project.

A National Plan of Action for ECD including the pilot integration project (IECD)

Acting on its regional commitment as signatory of the Caribbean Plan of Action for ECCD of 1997(CPOA), the Jamaica ME with UNICEF's support hosted a national consultation in late 1997 on the implications of implementing the CPOA within the existing context of moves towards integration.

A National five-year Plan of Action (NPOA) for Jamaica was the outcome of this consultation. While it was never officially adopted by Cabinet, the NPOA served as a 'working document' for the sector. A phased programme of integration was outlined, with Phase One focused on developing the key elements of standards, legislation, policy integration, financing plans, data management systems, training and upgrading of sector staff towards levels of certification, and model(s) for targeting the most vulnerable within

the birth to three cohorts. Phase Two was to target improvement of services and training offerings, and Phase Three was to systematise and address the sustainability of services.

The ME included the early childhood sector, inclusive of its new Day Care Unit, within its five-year plan for education (1997-2002) with attention given to strengthening integration of the sector, harmonization of early childhood with primary curricula and of the training of personnel, and facilitating staff upgrading of qualifications. **Up to this point there was no plan to enlarge the number of services, despite day care's low coverage in relation to need.**

The NPOA also included the pilot project for the two-parish testing of the "Integration Model". The major strategies of the project were:

- Administrative restructuring (of the two Units of delivery);
- Development and alignment of curricula;
- Strengthening of inter-sectoral linkages;
- Establishment of a health and education training partnership;
- Strengthening and broadening of service delivery (to improve quality and expand coverage);
- Strengthening of community supports to ECD.

The project was to be immediately followed by an Evaluation in 2003, and then rolled out across the country.

A strategic operational review of the sector

During the period March-December 2000 a strategic operational review of ECECD¹² was commissioned by the Planning Institute of Jamaica (PIOJ),¹³ supported by UNICEF, and implemented by the management consulting firm KPMG Peat Marwick.

Consultations were held with a wide range of early childhood development stakeholders, to review the purpose and objectives of an integrated early childhood programme beyond just linking day care with preschools, to include health and family support services as well. The consultants were asked to design a service delivery model in keeping with the

¹² One minor but perhaps telling feature of the integration "movement" has been the inability to agree on an acronym for the integrated entity—ECE, ECCE, ECCAD, ECECD, ECD have all been used, as is sometimes seen in this report. ECD has generally been accepted as a sufficiently inclusive term, but is not always consistently used.

¹³ The planning arm of government, at the time under the Ministry of Finance, since 2007 under the Office of the Prime Minister.

Caribbean Plan of Action that considered optimal child development and posited an integrated process incorporating physical, psycho-social and cognitive development within a range of family and community supports. In the report presented to PIOJ in March 2001, the consultants state:

It is intended that the Service Delivery Model identified herein will provide the base for the structured and phased development and progression of all members of the society. From the investigations we have conducted, it does not seem apparent that this foundation currently exists. This has negative consequences for the potential development of Jamaica.

Many, if not all, of the service elements within an early childhood programme are currently provided. However, it appears that issues of quality, coverage and access to these provisions are the main hindrances to the effectiveness of these provisions. In addition, a structured system for Early Childhood Management does not appear to be present. This has resulted in a lack of coordination between the sectors, duplication of effort and inefficient use of resources.

New ingredients of the proposed organisational model (or, technically, *revived* ingredients which recalled the original Task Force goals of integration) included a community partnership approach engaging parents in support of their children's development, and an expansion of services in health centres and community settings to include nutrition and health strategies, particularly in areas of greatest need. In this plan, the early childhood period was extended from conception (0) through age eight, to include the first two years of primary education, in keeping with the CPOA.

The establishment of the Early Childhood Commission (ECC)

The conceptualisation for the establishment of the ECC was the result of the "deliberations of the Integration Advisory Committee, recommendations from the Minister of Education, Youth and Culture, and from the results of a Strategic Review of the EC sector commissioned by the Planning Institute of Jamaica, funded by UNICEF, and conducted by KPMG Peat Marwick."¹⁴ The organisational model recommended by the KPMG to PIOJ, with accompanying resource and implementation plans, was the establishment of an *interim* Early Childhood Commission (Integration Advisory Committee 2005: 18). This recommendation addressed the integration of planning and policy development functions by proposing an inter-ministerial and inter-sectoral advisory and regulatory body. There was considerable debate during the review period as to where best to locate the Commission: within the newly created Child Development Agency (CDA) (the child protection arm supported by recent Child Care and Protection legislation), or as a stand-alone body accountable to the Ministry of Education. The final decision was for the establishment of the Commission, envisaged initially for a two-year period until the fledgling CDA was operational; it was felt that the urgency of the early

¹⁴ From ECC brochure prepared for official Launch of the Commission.

childhood issues could not wait on the new CDA to ‘settle’. There were some fears, too, that the urgencies of the **protection** issues of the CDA might overshadow the **prevention** side represented by early childhood services, and that a period of independence might be needed first before any eventual merger. That decision has not been revisited to date. The Child Development Agency in fact currently faces severe limitations in its protection of children, given its constrained budget and an overwhelming number and complexity of cases of children at risk, the reporting of which has increased since the introduction of the Child Care and Protection Act.

The Human Resource Council, the Cabinet Sub-Committee responsible for Social Policy, endorsed the proposed Commission in December 2002 and legislation to establish it was passed by Parliament in March 2003. Almost two years later Parliament brought into law through the Early Childhood Act of 2005 mandatory requirements and recommended standards for early childhood institutions and services. These standards, in fact, had been worked on extensively by the Integration Advisory Committee with input from other stakeholders for several years—one factor in the near-record speed of its passage so promptly after the creation of the ECC. The ECC with advice from legislative draftspersons distinguished *mandatory* standards from *voluntary* standards, extending the latter with best practice examples. Thus the strictly legal framework was flexibly extended, in keeping with trends in early childhood sectors throughout the world.

A Board of Commissioners of 20 members, representing a broad cross-section of stakeholders from several Ministries, the University of the West Indies, the NGO sector, and the private sector, was appointed by the Governor General in late 2003. The ECC was to be responsible for the coordination and monitoring of all early childhood services. Its stated mission is: “An integrated and co-ordinated delivery of quality early childhood programmes and services, which provide equity and access for children zero to eight years within healthy, safe and nurturing environments.”

Functions of the Early Childhood Commission

The several functions of the ECC were spelled out in legislation:

- Advise the Cabinet, through the Minister of Education and Youth, on policy matters relating to ECD, including initiatives and actions to achieve national ECD goals
- Assist in preparation of plans and programmes concerning ECD
- Monitor and evaluate implementation of plans and programmes for ECD and make recommendations to the Government.
- Act as a coordinating agency to streamline ECD activities
- Convene consultations with relevant stakeholders as appropriate

- Analyse the resource needs of the sector and make recommendations for budgetary allocations
- Identify alternative financing through negotiation with donor agencies and liaise with them to ensure efficient use of the funds provided
- Regulate early childhood institutions
- Conduct research on ECD

While quasi-independent as a multi-sectoral board, the ECC reports to Parliament through the Minister of Education, and is subject to all requirements of a government entity (periodic reporting, procurement guidelines, salary scales, etc.). The ECC was granted an initial complement of 13 technical and administrative staff, and established a sub-committee structure with Board members as chairpersons, enabled to draw members for each sub-committee from not only the Board but from key stakeholders outside the Commission. ECC staff members provided technical support to the seven sub-committees, which were Audit; Finance; Legal and Regulatory Affairs; Public Education; Research and Data Management; Training and Development; and Community Interventions and Parenting (this latter sub-committee established in 2006).

The Board is the ECC's policy body and meets monthly, as do most committees. Operations are driven by Sub-committees with broad inter-sectoral representation. Each sub-committee has at least one representative of the ME, and all have other relevant government representatives including the MOH, the Ministry of Labour and Social Security (MLSS), agencies such as the Child Development Agency and the Office of the Children's Advocate, along with relevant NGOs, academic experts, and faith-based representatives. The Legal and Regulatory Sub-Committee includes representatives of the Fire Brigade and the Police. The latter representatives are reported to have commented that they have never before been involved in a process that engages them in this way.

They evaluate the progress of registration and inspection, mobilize the necessary collaboration of their agency throughout the island, make recommendations to the Board on these and other matters, and in the future will review reports on breaches. Another very vibrant sub-committee has been the Community Interventions and Parenting Sub-Committee, which has commissioned status surveys of parenting interventions and resources, and worked with external members on the development of a national parenting policy, heading soon to Cabinet at this writing.

The National Task Force on Educational Reform

In 2004 the Prime Minister, responding to societal concerns about the state of education in general, set up a Task Force on Educational Reform for improving educational policy and practice. This "Transformation" Task Force prepared two reports: one on the overall transformation of the system to meet current needs, and the second looking specifically at the early childhood education, care and development sector, presented in March 2005.

The second report was, in fact, demanded by sector stakeholders who were distressed to see such little attention paid to the early childhood sector in the first report.

The second report had significant input from the ECC. The Conclusion of the Transformation Task Force Report Executive Summary notes that “almost all the recommendations in the report are either in support of work already started by the ECC or recognized by the ECC as critical to the Transformation Process” (Task Force on Educational Reform Jamaica March 2005: 8). Its recommendations covered Governance and Management, Curriculum, Teaching and Learning Support, Stakeholder Participation, and Finance; these are summarised on pages 41-43.

The Diagram and Organogram which on the following pages (Figures 1, 2 and 3) depict the chronology of major developments in the ECD sector and the framework of organisational authority pre-integration and post-integration for all types of EC institutions, both public and private. It will be noted in Figures 2 and 3 that the private kindergartens/preparatory schools are under another unit of the ME, the Independent Schools Division. EC Officers also monitor these schools.

Figure 1: Steps to integration of early childhood care, education & development

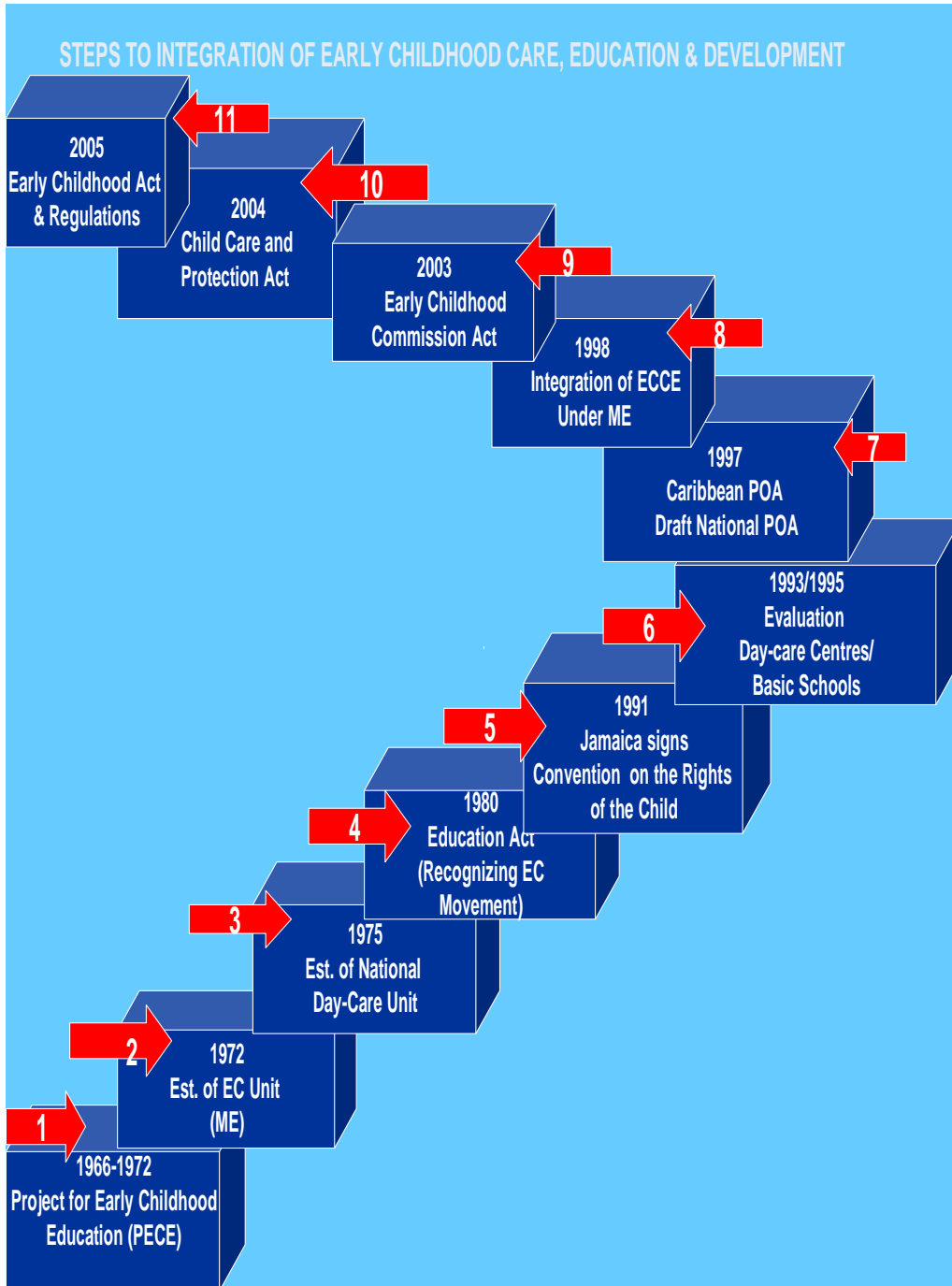


Figure 2: PRE-INTEGRATION ORGANOGRAM (with % of children enrolled by each type of institution in 1997 as provided by ME)

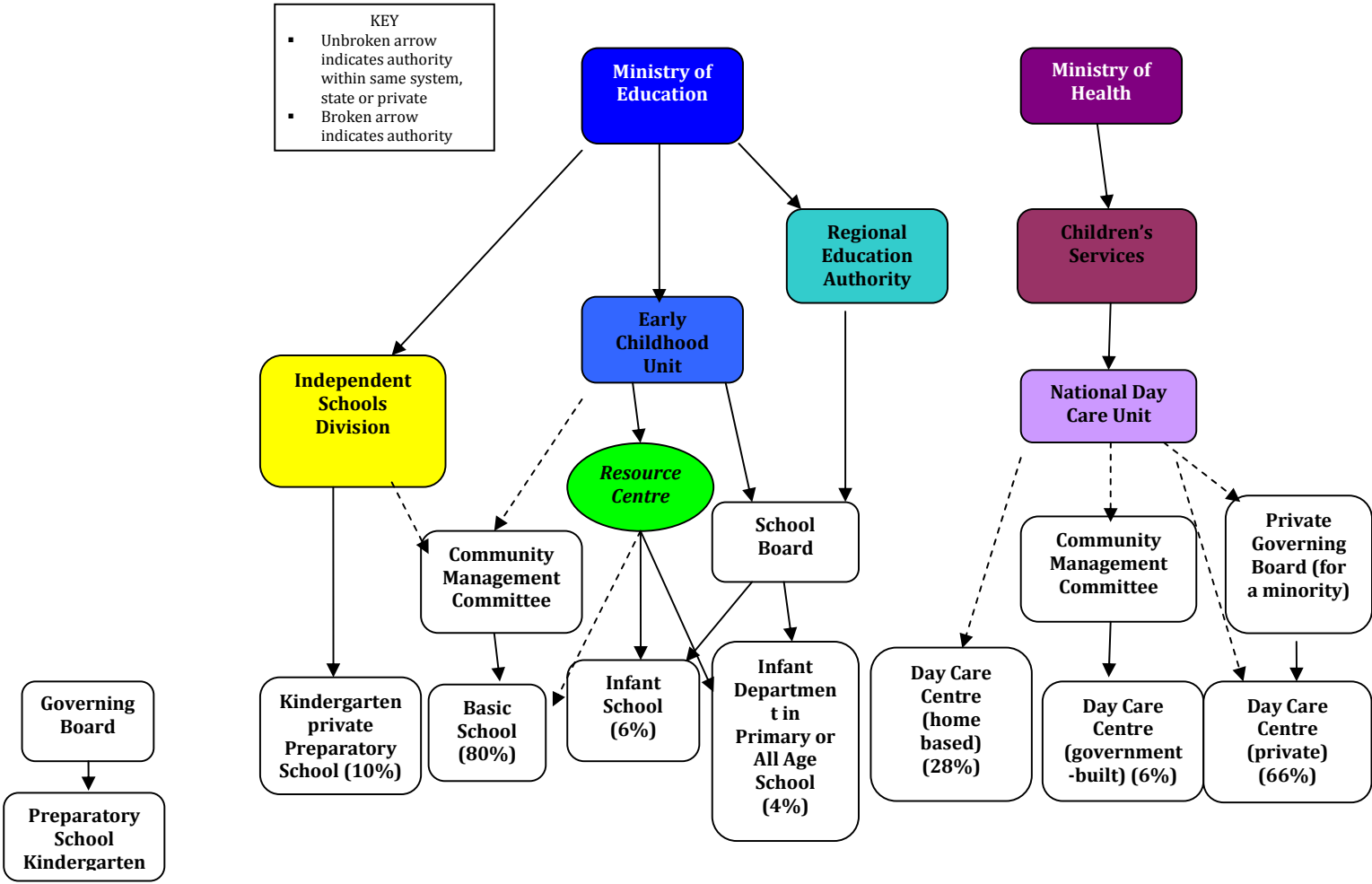
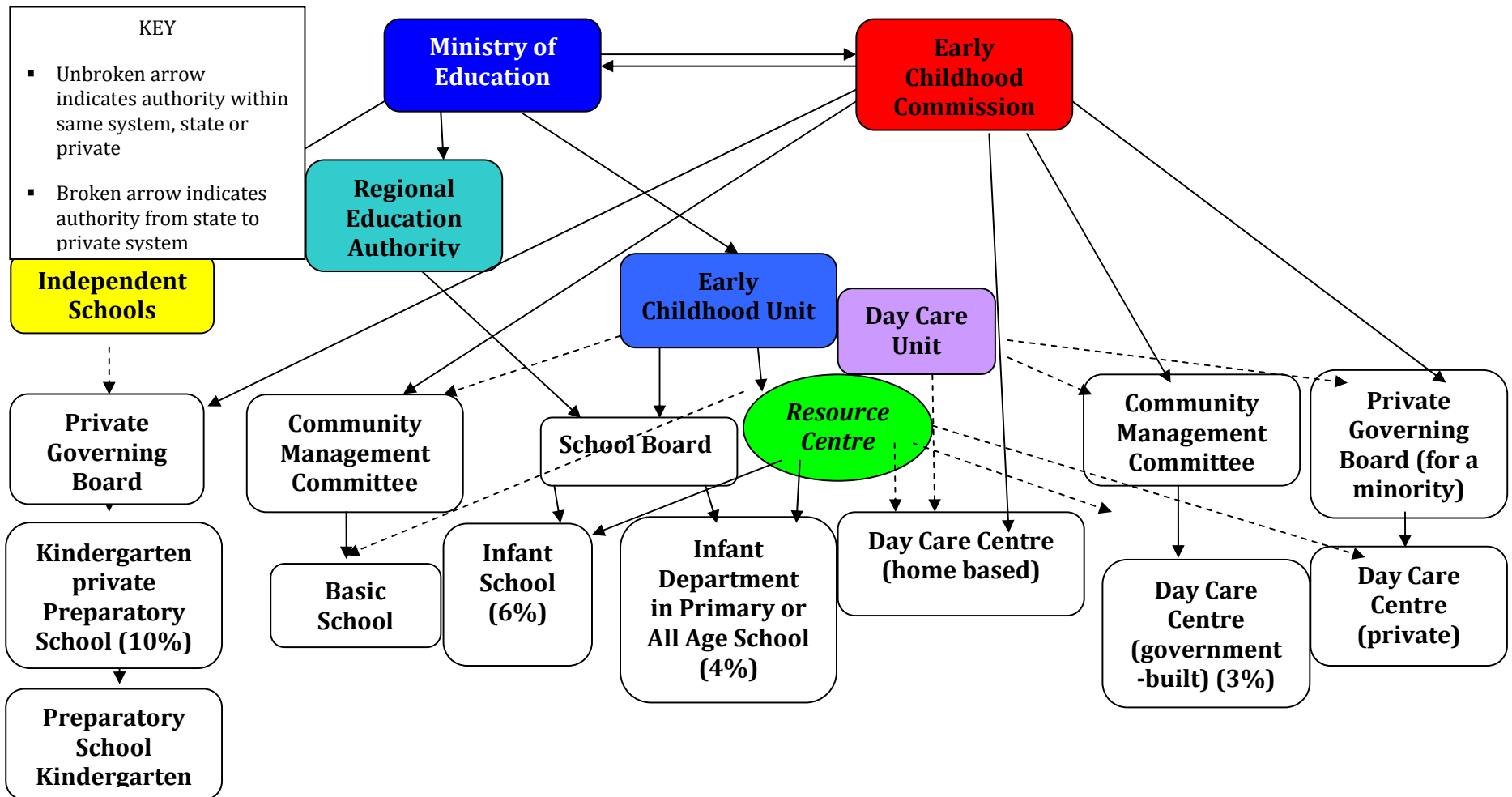


Figure 3: POST INTEGRATION ORGANOGRAM (with % of children enrolled in each type of institution in 2007 as provided by ME)



Frameworks underpinning reforms

Earlier mention has been made of the several overarching legislative and policy frameworks which underpinned the development of the early childhood governance structure:

- The World Summit Goals for Children 1990
- International Convention on the Rights of the Child (CRC) 1991
- The Caribbean Plan of Action for ECECD (CPOA) 1997
- The National Plan of Action for Early Childhood in Jamaica (NPOA) 1997
- The Early Childhood Commission Act 2003
- The Child Care and Protection Act (CCPA) 2004, incorporating principles of the CRC in ensuring the protection and support of children in and outside their families
- The Early Childhood Act and Regulations 2005, stipulating the mandatory requirements and recommended standards for ECIs seeking licensing by the ECC.

The most recent framework guiding EC reforms, taking all the above into account, is the **National Strategic Plan for Early Childhood Development in Jamaica (NSP) 2008 – 2013**, arrived at with a broad cross-section of stakeholders and supported by a World Bank loan to the government of Jamaica, and coordinated by the ECC. The NSP is based on the life cycle approach and rests on five “pillars” or processes:

- 1) early childhood parenting, education and support;
- 2) preventive health care;
- 3) screening early identification and referral for at-risk children and households;
- 4) safe, learner-centred, well-maintained early childhood institutions; and
- 5) effective curriculum delivery by trained early childhood practitioners.

These processes are to be supported by sector agencies which achieve targets and are governed by a results-oriented framework in a consultative environment, and by timely, current information to support evidence-based decision-making for the sector. (More on the NSP on pages 44-45).

From this list, it can be seen how much more broadly “integration” is now officially described in these five processes of the Strategic Plan than in its late 1990s manifestations after official transfer of day care services to the Ministry of Education. This broadening of both definition and scope of actions in pursuit of early childhood reforms has been both the source of enthusiasm and endorsement as well as resistance and confusion. These consequences will be discussed later.

4. Process and transition at local level

Local Government

Local government has been historically weak in Jamaica for many years (although reform is now—again—on the agenda) and has never been involved in the education system. With the exception of building regulations, planning permission, premises approval, and fire safety inspections as a component of day care centre registration and now required for registration of all ECIs, the local government Parish Councils have never had any other responsibilities for early childhood services and this has remained constant prior to and since integration.

Decentralization of authority

Public sector modernization and decentralization were earlier implemented in a number of ministries including the Ministry of Education. The Transformation Task Force on Educational Reform of 2004 reiterated the importance of devolving more responsibilities to the regions and maintaining the central core as policy and planning units. For Early Childhood the decentralization meant that EC Senior Education Officers (SEOs) who supervise EC Field Education Officers are located in the regional offices and report to two Managers: the Regional Director located in the field and the Head of the Early Childhood Unit at a Head Office location in Kingston. However the Regional Director has the authority to direct the SEO and the Field EOs to undertake work other than that related to their specialization of early childhood. Other ME duties are estimated to take up about 20% of their working time.

This certainly causes frustration for the EOs whose body of 71 Field and Senior EOs (12 short of their full cadre) supervise over 2,000 basic schools as well as assisting the three Day Care Coordinators (three short of full cadre) to supervise over 400 day care centres. Due to recently more regular Head Office meetings which include Regional Directors and the EC Unit Head, there is more flexibility and understanding at the regional level. The fact remains however, that the multiple and sometimes conflicting roles of the EOs are generally unmanageable. The evolving transition in the Education Officer roles from the Early Childhood Unit to the jurisdiction of the Early Childhood Commission further complicates this picture and will be elaborated in the next section (p.64).

Levels of autonomy of Early Childhood Institutions (ECIs)

Early childhood institutions have a great level of autonomy in relation to financing as minimal government subsidies are provided to teaching staff in recognised basic schools and very small subsidies towards materials and nutrition supports. No subsidies at all are provided to day care centres, except for the remaining 13 government built facilities. The ECIs are largely funded by parent fees and fund raising, sometimes supported by a sponsoring body, e.g. a church. Therefore funding levels are mainly contingent on the success and motivation of staff at the respective institutions and parents' abilities to pay

fees and support fund-raising efforts. This fact, of course, results in impoverished communities having generally very poor provisions.

With regard to pedagogy, the staff of recognised basic schools must attend the monthly training sessions and demonstrate minimal requirements for their teaching staff relating to age and level of literacy. However, the pedagogy on the ground only weakly reflects the training intention of those who have teachers college diplomas and degrees. Untrained and under-trained teachers too often fall back on more traditional rote learning approaches (“chalk and talk”), particularly since many of them are in classrooms with more than 30 children. Behaviour and noise management becomes the “pedagogy of necessity” for too many. Corporal punishment, a standard practice in many schools even at the early childhood level, was made illegal in children’s homes and early childhood institutions under the 2004 Child Care and Protection Act. The new curriculum described below on pages 37-39 is likely to assist over time to change deeply embedded accepting attitudes towards corporal punishment towards more positive alternative forms of discipline.

New *mandatory* requirements for ECIs are now in place by legislation. These will require greater accountability on the part of all early childhood institutions to adhere to requirements of staff recruitment, the curriculum and pedagogical practice. Some examples of this include: police checks for staff and recognized ECD training certification, considerably reduced staff-child ratios, programme planning in accordance with the EC curriculum (or equivalent) and provision of safe and emotionally secure environments. The accompanying *voluntary standards*, a concept developed by the ECC and agreed by a broad consortium of stakeholders over a three-year period, cannot be enforced in the same way as mandatory regulations, but the ECC inspectorate is charged with assessing each institution against these standards as well and urging compliance over time periods agreed with the institution’s management board and principal. These voluntary standards are more directly concerned with raising the quality of many aspects of programme delivery and strengthening staff-child interaction.

At the level of local Boards of Management of ECIs and their Parish Boards (those that are active), some aspects of the reforms have been welcomed, while other demands of the new standards on previously “autonomous” and private enterprises of individuals, churches or NGOs, are viewed as impositions beyond the financial capacities of the ECIs; this has understandably produced some anxiety and resentment. A public education campaign by the ECC island-wide on the introduction of the new registration requirements and licensing procedures only partially alleviated some of these feelings. More will be discussed later in this report on these consequences.

5. Consolidation and consequences

The slowed pace of change

Prior to Integration “[...] advocacy was strengthened by the coming together of the broad group of stakeholders to form the ‘Task Force for Integration and Mainstreaming of Early Childhood Care and Education’ [...]”. Two significant lessons learned from the experience of the Child Focus Project¹⁵ and the Integration Task Force were respectively that, ‘a small sum wisely spent can have significant impacts’ (Child Focus Project Completion Report 1999) and that unity among stakeholders strengthens the impact of advocacy. It is a reasonable assertion that presently the Jamaican government and public at large are much more aware of the issues surrounding early childhood care and education as a result of strong, local advocacy” (Davies 2000: 5-6). However, once inside the Ministry bureaucracy the integration process slowed and the vision contracted the Task Force became an Advisory Committee unable to control the pace of reform; work on an integrated legislative and policy framework slowed, preventing a continuous process of planning and implementation of ECED initiatives. The contracting of KPMG for its strategic review seems to have been initiated by the Planning Institute of Jamaica with the support of UNICEF in response to this slowed pace and the generally weak leadership of the integration reforms inside the Ministry.

With regard to the creation of a single structural framework to replace the dual care/education structures, the two organograms above (Figures 2 and 3, p 30, 31) show that, even post-Integration, a complicated structural framework presently exists in early childhood, partly because of the history of its development with the many different types of centres and pre-schools, and partly because of the way the ME has chosen to deal with these, e.g. an independent schools division for the private preparatory schools and kindergartens as well as its ‘mixed’ decentralization structure. In addition, as will be elucidated, the changing and expanding role of the Early Childhood Commission has produced some disagreements among stakeholders about the direction of reforms.

Legislation and policy

In general, a body of new legislation and policy has followed in the wake of administrative integration, albeit slowly. Several recommendations of the KPMG strategic review (which incorporated some of the recommendations of previous stakeholder groups) have either been superseded by the Early Childhood Commission Act and the Early Childhood Act (providing the regulatory framework for the sector) or are underway as part of the National Strategic Plan for Early Childhood Development (2008

¹⁵ A small project financed by a World Bank institutional strengthening grant to build the capacity of Caribbean countries to develop integrated approaches to early childhood education, care and development and relevant training curricula.

– 1013); others remain unrealized. The following table summarizes the status of legislative and policy reforms and recommendations.

Table 3: Status of legislative and policy reforms

RECOMMENDED REFORMS	STATUS
Formulation of an Early Childhood Policy	<i>Planned within the National Strategic Plan, not yet realized</i>
Formulation of a National Parenting Policy	<i>Before cabinet; now called the National Parenting Support Policy. This will be implemented by a new body called the National Parenting Support Commission under the auspice of the Ministry of Education</i>
Establishment of a national licensing system for ECIs with appropriate inspectorate	<i>Established by the Early Childhood Act of 2004, inspectorate now part of the Early Childhood Commission</i>
Establishment of a certification system for early childhood service providers based on occupational standards	<i>Established by National Council for Technical and Vocational Education and Training in 1997 led by EC stakeholder group</i>
Establishment of an accreditation system for ECIs based on facilities standards	<i>Established by the EC Act, being implemented by the ECC</i>
Institutionalization of a home visiting programme by taking current model Roving Caregivers to scale	<i>Not achieved; National Strategic Plan seeks to enlist community health aids in similar home-visiting programme</i>
Increased access of children birth through age three to child care services; clusters of home-based services linked to satellite centres were suggested.	<i>Basically unaddressed to date</i>
100% enrolment of 4-6 year-old cohort by 2002.	<i>A small percentage remain outside system, usually due to extreme poverty</i>
Lowering of adult-child ratios in ECIs based on proposed standards.	<i>Established by the EC Act and underway through the ECC inspectorate procedures</i>
Upgrading learning environments within ECIs	<i>Mandatory and voluntary standards within the EC Act addressing this through ECC. New curriculum being piloted and evaluated within 0-3 and 4-6 settings. These reforms hampered by delayed resolution of transfer of development functions from Early Childhood Unit of ME to ECC; tensions, resistance built during 2-year delay in process. Experienced EOs "retired"; new recruits recently hired by ECC on lower pay scale.</i>
Increased budgetary allocation for ECD to 5% minimum of Education Budget.	<i>5.4% in 2005/6, 4.2% in 2006/7¹⁶</i>
Institutionalizing ongoing mechanisms for public education on ECED	<i>Within active remit of the ECC and the National Strategic Plan</i>
Formulating policies to facilitate transition from preschool to primary school	<i>At best germinal.</i>

Curriculum development and reforms

For basic schools

The development of a curriculum manual designed for the needs of a largely untrained workforce within basic schools was initiated in 1967 by the Project for Early Childhood Education (PECE), a joint project of the UWI and the Bernard van Leer Foundation. This curriculum was completed in 1973 by Dudley Grant of UWI's Institute of Education with a team of teacher trainers. This was a very detailed set of 24 volumes of nearly 5,000 pages that systematically guided teachers through a range of subjects; fortnightly training workshops sought to provide the skill sets required to implement the manual. It is reported¹⁷ that within a few years of completion, most teachers had gained sufficient skills from the workshops and use of the curriculum that they called for its review and requested a "less prescriptive" format allowing for "greater flexibility" (Bailey 2005).

A Ministry-commissioned team responded to this call with a more compact two-volume "Readiness" manual, one volume targeting four years old, the other five-years old. It also moved from the PECE 'subjects' approach to a more integrated thematic model that provided activities across children's developmental domains. This approach called for more flexible resourcefulness on the part of teachers, which was welcomed by some and challenged others, particularly newer and less experienced teachers who missed the more expansive content and specificity of activity/resource ideas.

A shift to outcomes

The needs assessment survey of 1990¹⁸ recommended a curriculum revision to provide more detail without losing the flexibility. Work on this revision began in earnest in 2000. A team of curriculum writers, many of whom had been involved in the Task Force advocacy for integration, were contracted to develop a new Scope and Sequence to guide the development of the new curriculum, and then to script its units. This process was slow moving. The revision was further delayed by a decision of the curriculum development advisory group to align the work to date with a new document emerging from a regional project and consultation¹⁹ a Curriculum Resource Guide based on agreed "Learning Outcomes for Early Childhood Development in the Caribbean". This Outcomes document was informed by current child development theories and best international practices, as well as input from many regional ECD professionals including from Jamaica. The outcomes framework outlined six critical learning outcomes for children under six headings:

- **Wellness:** a child who is healthy, strong and well adjusted
- **Effective Communication:** a child who understands and makes his or her needs known
- **Valuing Culture:** a child who values his/her own culture and that of others
- **Intellectual empowerment:** a child who is a critical thinker and independent learner

- ***Respect for self, others and the environment:*** a child who respects self, others and the environment
- ***Resilience:*** a child who has coping skills

Thus the aim of the new curriculum became the provision of learning activities to enable each child to reach stated developmental goals that derive from each of the six learning outcomes. The Minister asked that the ECC coordinate the curriculum revision based on concerns about its slow progress to that point. A special committee of the ECC (under the direction of the Training sub-committee) was established to see the process through. The ECC recommended that the Dudley Grant Memorial Trust chair the committee, recognizing the role of the Trust in advocating for curriculum development. The curriculum for 4-5-years-old was pilot tested before phased introduction nationally from September 2009 with the monitoring and evaluation responsibilities falling to the ECC.

For day care programmes

As previously described, children from birth to age three were not given the same attention and support from government as children ages four and five in the preschool sector. Primarily custodial care was the norm in most of the private provisions for the younger age group, with more developmental programmes available only in a few high-cost centres beyond the reach of most families. Workshops for the largely untrained day care workforce were conducted by the small Day Care Unit prior to integration, financed largely by UNICEF. These workshops introduced more activities based on the child's developmental domains, but there was no curriculum *per se* for this age group.

The integration of the day care services with the basic/infant school system by all accounts²⁰ resulted in very positive benefits to the former in terms of the recent curriculum revision. Prior to the decision to harmonize the work of the curriculum team with the 'outcomes' requirements, considerations for the birth-to-three age group had not been considered part of the work. The Outcomes document outlined developmental outcomes for the full age range from birth through age five; the revision advisory committee decided to take the full age group on board. Developmental goals for each of the six outcome domains were agreed for the first three years of life as well as ages 4 and 5, and curriculum activities and guidance followed. This birth to three curriculum was piloted for use in day care centres in 2007/8 and introduced fully in 2008/9.

Initial training for day care personnel in the use of the new curriculum had mixed results; some workers embraced it; others did not implement it at all. On the recommendation of the Day Care Unit Director, smaller workshops were held with no more than 15 persons at a time, and this bore more fruit. In the words of the Day Care Director, "not one early childhood practitioner walked out without really understanding something about the new curriculum. Once they understood the curriculum it [became] like a roller coaster for them, with good and bad times." The "bad times" he related primarily to persons who have problems with lesson plans, probably due to low levels of literacy. But he noted "we have [already] been seeing the fruits. Now when caregivers sing to babies while bathing

them or splash the water in play [it is clear] their consciousness has changed. Their head is not thinking ‘This is what the Unit/the Operator wants us to do’ but in their consciousness they now understand it is stimulating the child.”

The creation of a career path for caregiving and teaching cadres

An advisory group involving some of the same curriculum writers and other sector stakeholders were engaged from the mid-1990s with the National Council on Technical and Vocational Education and Training (NCTVET) in the development of occupational standards for early childhood workers; these were adopted in 1997. The ECC subsequently developed an MOU with NCTVET to review and revise these standards and their accompanying curricula to ensure that training programmes would meet the evolving needs of the early childhood sector and assist compliance with the pending regulatory framework. This task involved an extensive review of the minimum training content for entry and next level early childhood personnel (levels prior to formal teacher training).

The new pre-college NCTVET levels of certification finally confirmed a career path in the early childhood sector from entry level through graduate degrees. Early childhood practitioners, depending on their level of studies and experience, can apply to NCTVET for assessment for certification at one of three levels:

Level I: basic entry level for any ECI; this level worker should be operating under supervision at all times.

Level II: sufficient training and experience to operate independently as a caregiver or paraprofessional teacher.

Level III: adds supervisory/administrative training and experience beyond the Level II qualification.

Higher Level **teaching diplomas** in early childhood education are available at five of the 10 Teachers Colleges in Jamaica; these constitute 3 years of courses with a pre-requisite of five Caribbean Secondary Examination passes including English Language and Mathematics.

Bachelor and/or masters’ degrees in early childhood/early childhood leadership are available at the three Jamaican Universities and at least two of the teachers colleges, one in collaboration with the University of Southern Florida.

A very large percentage of the cadre of early childhood workers achieved Level I qualification through examination and observation shortly after these standards were adopted. Because the new EC regulations of 2005 require at least Level II for most ECI personnel, the whole cadre of workers is being gradually upgraded. This will better equip them to handle the new classroom curriculum, which requires considerably more

caregiver/teacher knowledge of child development and resourcefulness in its application than the prior curricula.

Challenges to the ECC from the National Education Transformation Task Force

The Early Childhood Commission (ECC) was the primary institution charged with implementing the recommendations of the Transformation Task Force's Early Childhood Report. The recent National Strategic Plan (NSP) for Early Childhood (2008-2013) includes many of the recommendations of this report. World Bank disbursements for the NSP (see further details below) are tied to some of the specific recommendations. The following table outlines the major recommendations and their status at this writing.

Table 4: Status of Transformation Task Force EC Recommendations

RECOMMENDATIONS	CURRENT STATUS
The functions of the Early Childhood Unit should be deployed to the ECC with all professional staff at the EC level reporting to one cohesive body. Required amendment to EC Act to make ECC authority for inspections.	<i>Approved by ME. Inspectorate functions transferred to new ECC staff in late 2007 with budget for 42 new positions; development functions and new posts at ECC only created mid 2010; E C Unit disbanded.</i>
In light of the disparate provision between basic schools and infant schools and departments, Government should assume full responsibility for an additional age cohort, approximately 40,000 children aged five years who would normally enter basic schools annually.	<i>Not yet done due to resource constraints. Would require a space audit and significant preparatory work.</i>
Support ECC proposal that at each visit of young children to the health centre, parenting and child development education should be extended, that children should be screened for developmental behaviour disorders, and families screened for psycho-social risk.	<i>Part of NSP with a five year target for 30% of health centres offering high quality well child services, including screening of children and households to identify those at risk and offer appropriate intervention services (signing of specific MOU agreements between ECC, MOH, ME and MLSS are tied to a WB disbursement).</i>
NCTVET competency-based certification Level 2 should be the minimum requirement for EC practitioners in basic schools and principals of basic schools should possess at least Level 3 certification.	<i>Accepted and in process (targets for numbers trained tied to WB disbursements).</i>
Accelerate the ME policy to place at least one trained teacher in recognized basic schools.	<i>Accepted and in process.</i>
Maximum class size of 20 from kindergarten to Grade 3.	<i>Accepted. Full implementation will take time due to resource implications.</i>
Expand the School Feeding Programme to include children attending basic schools.	<i>ECC asked by ME to take lead on this; has developed an Infant and Young Child Nutrition Policy. ECC's last annual regional conference focused on nutrition. Pilot programme for 4-6 years old tested in basic schools; operations manual and recipe guide prepared based on results; training of basic school cooks and principals conducted. Nutrition study now to be undertaken for 0-3 years old in homes and ECIs (Service delivery models for nutritional support tied to WB disbursements).</i>
Introduce a Child Health and Development Passport from birth	<i>A core section of the NSP; agreed with the MOH and draft in pilot stage (tied to WB disbursements).</i>
Tertiary institutions to train an intermediate level of therapists – Child Development Therapists.	<i>Accepted (several targets tied to WB disbursements). New course developed to be offered September 2010.</i>
Mainstream children with special needs within regular early childhood environs and mandate special education training for all EC practitioners.	<i>Accepted with special education training for ECPs incorporated in the NSP.</i>
Accelerate the Curriculum Review Process. All teachers to be trained in delivery of the new curriculum and the curricula to be made available to ECIs.	<i>Training and pilot testing in process for basic schools completed for day care centres; monitored by the Training and Development Committee of the ECC and part of NSP.</i>
The ME should take a definitive position on the early childhood years as 0-8 in order to ensure all children in that age range benefit from appropriate interventions and transitions. The ECC is presently only responsible for 0-6-years old prior to primary level and can only advise with regard to 6-8 years old.	<i>ECC has recommended physically separating K-Grade 2 children in infant departments of primary and all age schools, if possible, with distinct schedules, shorter hours, and separation of lunch and play areas. This is not yet implemented due to resource constraints.</i>
Teacher training programmes for primary school teachers should provide specialisation in early childhood education as distinct from upper primary (Gr. 4-6).	<i>Still being urged, not yet realised; the ECC is in strong support of this.</i>
Strengthen and replicate in all parishes the Roving Caregivers Programme, to benefit the children who do not attend clinics for health services and represent an extremely high risk group.	<i>ECC reviewed internationally published research on models of home visiting in Jamaica²¹: models using Community Health Aids (CHAs) are more effective in improving children's developmental outcomes and parenting attitude and practice, due largely to CHA's greater maturity and experience (the RCP mode relies primarily on school leavers). The ECC is reviewing strategy options for home visiting programmes using the CHA model, directly integrated into the public health system, an advantage for sustainability.</i>
Strengthen the collaboration between the ME and the MOH to provide parent education information at health centres and hospitals.	<i>A main pillar within the NSP: for 0-3 years focus will be primarily on health centres and for 4-6 years on ECIs for maximum impact. Some parenting education targets are tied to WB disbursements.</i>
Expand the roles of the ECC to absorb the functions of the Early Childhood Unit.	<i>Inspectorate functions transferred in 2007; development functions in 2010.</i>

After-school care

Because the Commission has oversight for services for children only up to age six, there has not been absorption of free-time/out-of-school services in their mandate. These services remain largely with local primary schools' capacities to provide and/or under NGO auspices; their scope and quality vary greatly from school to school and area to area. There is no doubt, however, that such programmes are generally insufficient even though there is a growing sensitization to the importance of focusing more on children's well-being and on developing resiliency, mainly coming from the work on child and community aggression and violence.

ECC initiates work on a national parenting policy and other policy reforms

Because parents and guardians are so critically important to the development and well being of young children, a Parenting sub-committee of the Early Childhood Commission was added in 2003. It began the work of drafting a parenting policy. Consultant assistance provided reviews of parenting programmes island-wide as well as a literature review to support the group's work. The Minister of Education in the new government of 2007 promptly appointed an early childhood and parenting advisor, and a task force soon followed to examine how government could best coordinate and support the fragmented and scattered work of the myriad government departments and NGOs working in the area of parenting education and support. A draft parenting policy was sent as a green paper to the Human Resource Council in March 2009. A Parenting Support Commission is expected to be realized by late 2010 to bring the new parenting policy to life across the country, which is expected to work closely with the ECC to ensure a life-cycle approach.

Other ECC reforms for 0-3 age cohort.

Other ECC policy directions being discussed and planned with the Ministry, World Bank and other funding organizations, and included in the National Strategic Plan (see below) seek to address the largely unmet needs of children age three and below:

- Introduce mandatory visits to health clinics for children between 18 months to three years as there is a lag between immunizations from 18 – 36 months; well child clinics would become the main centre for parenting education and support for this age group (Samms-Vaughan 2008: 6).
- Train and deploy Child Development Therapists at community level, and increase number of tertiary level professional therapists (e.g. Speech Therapists, Occupational Therapists and Audiologists) (Samms-Vaughan 2008: 8).
- Strengthen parish-level governance arrangements for ECIs by working with the Jamaica Early Childhood Association (JECA) on an appropriate model for governance and support. (Samms-Vaughan 2008: 8). JECA is a still-contentious 'merger' of the Basic School Teachers Association, the National Day Care

Association and the Jamaica Basic Schools Board, whose parish-based units vary widely in levels of activity and effectiveness.

The National Strategic Plan as a multi-sectoral coordination framework

As noted earlier, the ECC launched in February 2009 a long-term National Strategic Plan for Early Childhood Development (2008-2013). The NSP was developed through wide stakeholder consultations across the country (parents, practitioners and policy makers and all GOJ line Ministries and agencies) and reviews of available documents on the status of the EC sector including the CPOA and NPOA for ECD, the Profiles Project and the Transformation Task Force Report.

The NSP recognizes the early childhood period to include the cohort of children from zero to eight years, with zero acknowledging the importance of early childhood development from the antenatal period. The NSP also recognizes the difference in models for implementation of plans and programmes for children 0-3 years, the majority of whom are not in early childhood institutions but who access state health services regularly during this period; children 3-6 years who are almost all in ECIs; and children 6-8 years, who attend primary level schooling and are governed by the Education Act.

The plan calls for the ECC to work in multi-sectoral partnerships with other Ministries and agencies to support the child and its parents from antenatal clinics through birth to child health clinics, early childhood institutions and the transition to primary school in grades 1-2. An inter-sectoral committee develops integrated and coordinated plans and budgets under the NSP.

At the launch of the NSP the Minister of Education informed the public that the Government is preparing to shift more education sector resources to the early childhood sector, noting that at present the Jamaican budget spends 19 times more on tertiary education than it does on early childhood; the EC sector currently receives approximately 5% of the education budget (an increase on earlier years). The estimated GOJ expenditure on early childhood (including expenses in the health, education and social sectors) was approximately US\$69M in financial year 2007-8. This translates to an estimated US\$345M over the five-year period of the NSP. The NSP proposes an additional investment of US\$68.7M over 5 years.

Calculated on a per child basis, the NSP proposes to invest an additional US\$46 per child per year, above the base level of US\$213 (Samms-Vaughan 2008: 4). A bank loan of US\$15M from the World Bank at an interest rate of 4.5% will cover approximately 22 percent of the additional investment proposed by the NSP.

An innovative experiment in financial engineering is being used under this loan scheme in which achievement milestones will trigger disbursements in a first step towards performance-based budgeting. The multi-sectoral, project-wide approach is also a new way of doing business for the Bank. Off-budget funding, external sources of funding and

donor contributions will account for an estimated US\$5.4 million, or a further 8 percent of the cost of the NSP. The ECC will work to mobilize the remainder of the funds. The World Bank notes that this approach is the first national cross-sectoral plan for ECD in their experience and the model is now being replicated in other countries. Some CARICOM countries have expressed interest in utilizing this model.

This being said, the available resources remain small in relation to needed reforms, and the NSP has therefore set modest five year outcome targets to the end of 2013:

- 1) 30% of early childhood parenting education and support programmes will offer high quality parenting education and support services. The ECC initiated consultations in late 2009 which will provide strategies and standards for improving parenting supports to the full age-range within their remit.
- 2) 30% of health centres will offer high quality well child services, including screening of children and households to identify those at risk and to offer appropriate intervention services. The ECC has an MOU with the Ministry of Health and has commissioned a study to develop a model for MOH implementation of this integrated child assessment and development screening process, which has ethical, referral, human resource, training, and treatment issues attached. This process will also include defining the best practice models, costing these and then developing an implementation plan under the new ECD project funded by the IDB.
- 3) Regional health authorities will have at least one child development therapist per parish to address the needs of children with special needs.
- 4) 25% of early childhood institutions will be fully registered.
- 5) 50% of early childhood practitioners at levels II and III will be licensed and 50% of early childhood practitioners receiving subsidies will be at Level II and above.
- 6) 25% of ECIs with children aged 3 years and over will have at least one Level III or Level IV (Diploma trained) teacher.
- 7) Child development status will be monitored annually (Samms-Vaughan 2008: 3).

Other Early Childhood initiatives

Running parallel with the movement towards integration have been a number of early childhood projects, demonstrating the advocacy impact prior to integration and the increased focus that the entire integration process has brought to early childhood. Some of these have been briefly referred to above but are more fully elaborated here:

- **The Roving Caregivers Programme (RCP) 1992-2005** was pioneered in Jamaica by the Rural Family Support Organization (RuFamSo), an NGO that evolved from the Teenage Mothers Project in Clarendon. In 1992, with support from UNICEF and the

Bernard Van Leer Foundation, the RCP started in Clarendon and then expanded to the adjacent parishes of St. Catherine and Manchester. The RCP addressed the needs of young children and parents in impoverished, rural areas where there are no day-care centres and the need for parenting education is unfulfilled. School leavers were recruited to work in the areas in which they lived and were trained to visit homes and demonstrate and teach mothers stimulation activities and child rearing practices. Each “rover” works with approximately 30 children within 20 homes; home visits last between 45-60 minutes.

A 2004 evaluation found that the programme had served approximately 2,050 children, from three months to 36 months (Powell 2004: ii). The evaluation tested 131 children and mothers including a control group. The groups were tested on the enrolment of the experimental group and one year later. “The intervention was effective in improving both the children’s development and the mother’s knowledge of child development and child rearing. The benefit to the children’s development was 5.5 points, which is approximately half a standard point for this population. This effect size should be functionally important. Benefits were found in hand and eye coordination and performance scales, which include many of the skills required in school. The children should be better prepared to benefit from school. The intervention also had a significant impact on mothers’ knowledge scores but not on their practices. Mothers rated the programme highly and said that their children and them-selves learnt a lot” (Powell 2004: iv). A cost benefit analysis assessed that for every dollar spent there was a benefit cost ratio of \$438 at the lowest discount rate of 4% and over \$470 at a discount rate of 10% (Clarke 2004: viii).

Sadly this project is poised to close for lack of sustained funding; this dilemma has pointed to the need to find more sustainable ways to continue such vital support services to this very under-served segment of the population. A smaller-scale replication in the parish of St. Thomas is attached to an Early Childhood Resource Centre, using 11 Rovers and reaching 486 children in 26 communities (Jarrett 2007: 7). The Rovers also work closely with the Health Clinic used by these communities and with the community basic schools; however, the project at this writing similarly has no sustaining funds.

- **Jamaica Social Investment Fund’s (JSIF) Assistance to Basic Schools 1997-present.** JSIF assisted 213 Basic Schools, 23 Infant Schools/Departments and one day care centre between 1997 and 2008. This assistance has included the construction of 64 new Basic Schools, and other capital inputs that are beyond the capacity of most basic schools. These inputs include construction, expansion, rehabilitation and refurbishing, roofing, sanitation, perimeter fencing, furniture and equipment including outdoor play equipment, as well as post-hurricane repairs. Except in the case of hurricane repairs, Basic School Management Committees have to apply for these funds and organize some community input. Half of these schools (51%) have been located in districts in the poorest quartile on the Jamaican Poverty Map. Each project energizes the community, it begins and ends with a ceremony that is usually covered by national newspapers, and the entire cycle underscores for the public the importance

of early childhood development. The entrance of JSIF into the Jamaican social protection scene has provided a significant fillip for EC development. It must be noted, however, that assistance has been provided for only one day care centre.

- **The Profiles Project** of the UWI's Caribbean Child Development Centre (CCDC) and Department of Obstetrics, Gynecology and Child Health (1997-2002) was among the first of its kind in the world to look at the readiness of children for primary school and the readiness of school for children. The Project was designed to address concerns about grade repetition and primary school failure. Although international literature suggested a number of reasons for lack of readiness, it was felt that there was a need to develop an informed basis within Jamaica for intervention strategies for Ministries involved with child wellbeing. The study concluded that with adjustment for children's characteristics, the home environment was significantly associated with later outcomes as children of a lower-socio economic status, whatever the quality of education they received, would have poorer grades, especially in mathematics and science, than their wealthier counterparts. This project also highlighted the exceptionally high levels of stress that many Jamaican parents, especially mothers, are under, using comparisons with parents in the USA.

The recommendations from this major piece of research have helped to inform the work of the ECC and include the following:

- a. Interventions to improve outcomes at the pre-school level need to be comprehensive and occur prior to primary education, particularly for children of the lowest socio-economic groups, as the outcomes worsen with time.
- b. Socio-economic status has direct effects on child outcomes, as well as indirect effects through parenting education, the home learning environment, exposure to books etc. It can be used to identify children with the greatest need for intervention.
- c. Interventions to improve child outcomes include parenting education on the various ways parenting and family functioning impact on the child, the importance of introducing books at an early age, provision of a stimulating home environment, encouraging attendance of children at organized activities and parental participation in children's activities.
- d. Parenting stress needs to be addressed as an important factor affecting all child outcomes. This may require the development of national parenting education programmes for the prevention, recognition and management of parental stress.
- e. Parenting education programmes should specifically address the importance of continuing the emotional aspects of parenting despite physical separation from children, the situation of many parents, especially fathers.

- f. Mechanisms to encourage positive behaviours in children and the use of appropriate disciplinary measures for pre-school children should be part of a parenting education programme.
 - g. Parenting messages should be delivered to all members of a community because of the important role played by the extended family in parenting Jamaican children.
 - h. Communities should be encouraged to develop organized activities for children. With many children attending church, the church has an important role to play in the provision of a location and/or the development of activities. Parents and the community should be educated on the possible effects of children's exposure to violence.
 - i. Routine screening for hearing and vision impairment should be part of an EC health promotion and prevention programme. Parents should be educated on the importance of dental health, as well as the provision of a safe home environment, particularly from burn injury.
 - j. Parents should be educated to seek assistance for behavior problems. Facilities need to be adequate and accessible.
 - k. Public and private EC institutions should be facilitated to attain a level that promotes child development.
 - l. There should be further investigations on the differences in children's behaviours as reported by parents and teachers. The possible impact of 'teacher stress' should be specifically investigated (Samms-Vaughan 2004: 156-157).
- **The Transitions Project** of the Ministry of Education was intended to further inform the integration process; it was concerned with the transition from pre-school at age six years into the first two years of primary school. A 1997 study, jointly funded by the Bernard van Leer Foundation and UNICEF, had revealed as a cause for concern the state of readiness for formal schooling of a vast number of Grade 1 pupils. A pilot project was conducted in 2002 in eight basic schools to try to improve the readiness of children entering Grade 1 (age 6-7 years) and to ensure the developmental appropriateness of teaching methodologies and learning environments from basic school through to Grade 2 (age 7-8 years). The project interventions, however, did not have the expected impact, when compared to the control school, for a number of suggested reasons:
 - ▶ the inadequacy of the physical conditions in most schools, made worse in two instances by the destruction of one school by the 2004 Hurricane Ivan and its subsequent relocation, and the fact that one school had to remove all its materials and most of its furniture every Friday so as to accommodate the Saturday service

of a church congregation. Some schools had no electricity and therefore no access to computers, some only had pit latrines and one school had no piped water, hands having to be washed in buckets.

- ▶ the low level of training among teachers. While most had the NCTVET Level 1 certification, none had a Teacher's College Diploma in Early Childhood Education. Two were pursuing teacher education at the primary school level. Five had no formal training (Jennings 2005: 6-7).
- ▶ the fact that often the intervention materials supplied for number work, word games, Cuisenaire rods, word building cards were kept packed away in boxes, it was surmised, for fear of the children destroying them, or not having a clear grasp of teaching strategies for their use, or not wanting to use up resource materials knowing the school does not have the funds to purchase more. In other instances resources were unnecessarily skimped, e.g. six paint cups shared among 17 children when some 50 cups were available (Jennings 2005: 18).
- **The Enhancement of Basic Schools Project** of the Ministry of Education started in 2002, funded by a Caribbean Development Bank (CDB) loan plus local funds. It set out originally to establish model schools in each parish and to refurbish all (then) 17 parish Resource Centres, rebuilding new ones where necessary. Six centres are now complete or very near completion. This project was conceived before integration, but was adapted in some measure to take some integration factors into account. For example, the public education campaign undertaken in partnership with the ECC circulated the new regulations and held public workshops across the country on what this meant for early childhood. Day care persons attended as well as basic school staff, board members and parents. Manuals for ECIs produced by the project were also amended to ensure requirements were in keeping with the new standards and legislation.
- **The Resource Centres Upgrading Project (RCUP)** was led by the Dudley Grant Memorial Trust, funded by the Environmental Foundation of Jamaica (EFJ) and the Bernard van Leer Foundation (BvLF). The project has equipped 15 Resource Centres to provide a range of services for early childhood practitioners, basic school teachers and parents; however, variability among centres and resources exists. In an evaluation of this project interviewees most often mentioned parenting education, as well as various skills training activities for parents, as new concepts promoted by the project (Chambers 2007: 4). The ECC intends to change the focus of the Resource Centres so that they have a greater impact on parenting programmes (Interview – Prof. Maureen Samms-Vaughan, Chair of the ECC). The Resource Centre Managers would be trained as parenting facilitators and the Centres would work more closely with the health clinics and ECIs to build clinic and practitioner capacity to provide parenting. A Case study of one such Resource Centre is appended to this Report (Appendix A) to illustrate the role, benefits, and some of the challenges of this central facility in each parish. At this writing the number of RCs has been reduced to 14.

An RCUP evaluation of the parenting programmes found that none of these programmes were funded by the ME. Implementing these programmes was therefore contingent on the levels of resourcefulness of centre managers and often this meant using their personal funds to purchase basic supplies and refreshments. Also the evaluation noted that most centres were attached to an ECI, and it was these ECIs that derived the most benefit from the resource centres. It also concluded that generally centre managers did not make good use of intersectoral opportunities and resources through parish health departments, private sector organizations, civic groups or service clubs and there was no evidence of formal or informal referral mechanisms for parents in need of other types of support (Bailey 2005).

6. The consequences of integration and subsequent developments

Opposition to Integration

Opposition to the integration of early childhood services has not been on ideological grounds, but rather is based on administrative concerns about how the Ministry's Early Childhood Unit would accommodate the Day Care Unit, and issues of ME staff parity and shared responsibilities. There were also, and to some extent still are, fears within the sector from both day care and basic school operators and staff that new government regulation would demand too much from them without provision of additional resources.

These issues were recognized within the earliest agenda items of the Integration Task Force, which included addressing the disparities in support for and training of all types of early childhood workers, whether in day care or preschool settings, greater investment in human capital by addressing salaries and status issues of disparate workers, and the need for greater resources extended to parent education.

This section of the report will look at the consequences, anticipated and unanticipated, of the major shifts that followed in the wake of the official integration of services for children from birth through entry to primary school within the Ministry of Education, and the consequent creation and expansion of the coordinating mechanisms of the Early Childhood Commission under the ME within a broader multi-sectoral remit. It is not within the scope of the study to give a scientific assessment of the consequences of this administrative decision, which for many advocates was the appropriate outcome to begin a more holistic approach to ECD. This should be borne in mind in reading this section.

Coverage

Table 1 on page 13 shows that the number of day care centres after integration increased by 30% between 1997 and 2007, the number of children attending increased by 14%, and the average staff-to-child ratio improved. However the centres still cater to a very small percentage of the total population age cohort and certainly less than the needs of working parents. The staff-to-student ratios for day care centre staff would, in some private centres in particular, include a cook and sometimes security or ground staff. Moreover it must be borne in mind that day care staff is often on shift because of the long hours, so low ratios can be misleading. However, no centre – and this is of particular importance in the case of small home centres – can operate legally without at least two child care practitioners.

Table 2 on page 14 shows that the number of basic schools increased by 15% between 1997 and 2006, the number of children attending remained the same, and the average staff-to-child ratio improved. The already high percentage coverage increased by 4% because there has been a decrease in the total population cohort.

This coverage does not include private kindergartens, suggesting that total coverage of three to five years old is virtually universal. A recent 2008 survey²² indicated that kindergartens and preparatory schools enroll just over 10,000 children which would mean this type of pre-school would account for about 7% of the total three to five year pre-school group.

Since we do not have comparable figures for 1987-1997, it is difficult to assess how much the 30% increase in day care centres and the 14% increase in number of children attending is likely to be a response to increased demand (over the same period female employment increased by 21%), and how much if any is due to integration. The positive increase in the average teacher: child ratio in all basic and infant schools is more likely to have been a direct result of integration, given the focus on improving quality, and teacher-to-student ratios.

Financing Early Childhood Institutions

Parental fees, minimal subsidies, perception of unequal treatment

Before and after Integration all day care centres except the few government-subsidized ones have been privately financed mainly or entirely through client fees. These government built centres served just 6% of the children attending day care in 1997 and 3% in 2007 (Table 1). It has been a great disappointment for day care operators and staff that no salary subsidy to mirror basic school subsidies was provided following integration in 1998. A great number of the centres barely survive although they cater to working parents, since many of these parents are in relatively low paying employment such as nursing, security services, or factory, retail store and domestic work.

Before and after integration, 90% of educational services for three to five years old have been privately provided and require fees. Government-run Infant Schools and Infant Departments make up the remaining 10% (Table 2) and tuition in these institutions is free.

However, unlike day care services, the majority of ECIs for 3-5-years-old receive government subsidies, a situation dating long before integration. All recognised basic schools (93% of all basic schools) receive an annual nutrition grant of J\$250 (US\$2.84) per child, since 2001 on par with the nutrition grant received by Infant Schools and Departments. This is an 11-fold increase on the former annual subsidy of US\$0.25 per child, and is due, it may be assumed, to integration and the increasing importance given to early childhood by the ME. A miniscule annual grant of J\$50 (US\$0.57) per child is received for materials.

Basic school teachers currently receive a monthly stipend of between J\$9,400 - \$25,145 (US\$106.80 – US\$285.74), aligned to qualifications and based on a ratio of 1 teacher per 30 children. The principal receives J\$500 (US\$5.68) more than the school's top salary.²³ These subsidies have increased since integration, but still are expected to supplement the fees paid by parents. The accumulated sum that basic schools reported receiving in 2006

from school fees gives an average of J\$278,545 (US\$4,222) per school per year²⁴. This is an extremely low sum for covering rent, utilities, cleaning materials etc. as well as, theoretically, topping up salaries. It must be noted that this is an average, so while some schools receive more, the schools in the poorest communities receive less from fees. Moreover the 140 unrecognised basic schools with nearly 6,000 children in 2006 (Table 2) rely entirely on parents' fees to pay salaries and to provide lunch.

If the average total school fees are divided by the average number of children per school (60 in recognised schools) the result is J\$4,642 (US\$70.35) per child per year. The majority of parents are from the lower socio-economic levels, and fee collection is unreliable even when fees are low. This has been a major problem with the basic school system - poorer schools usually attract poorly qualified staff and provide the poorest service to the children most in need. Recognised schools raised on average an additional J\$48,313 (US\$732) per school from donations and fund-raising. Again this varies widely from school to school.

Early childhood and children's rights

The integration movement has significantly contributed to the current widespread focus on the importance of early childhood development, and on strengthening parenting outreach programmes. This has happened in a context in which much greater focus is being placed on children in general in Jamaica, stimulated in part by the Convention on the Rights of the Child, then given a strong push at government level by the acceptance by all CARICOM governments of the 1997 Caribbean Plan of Action for ECECD. In 2004 the Child Care and Protection Act (CCPA) was passed which has among other things made not just the state but every citizen responsible for reporting if they know or suspect incidents of child abuse. Together these have brought more public attention to the care and well being of children. The CCPA also outlaws corporal punishment in any state children's home, and the Early Childhood Act forbids this in ECIs. These bans have been well publicized, particularly in light of cases of child abuse at state homes that have been given wide media attention, and seem to have had some restraining impact on abuse, at least within public spaces. The Minister of Education has announced that the next revision of the Education Act will prohibit corporal punishment and all other forms of violent, humiliating and aggressive disciplinary measures or instructions in all Jamaican schools.

This trend, however, goes against traditional attitudes to raising children among a large section of the population who believe literally in the Old Testament maxim, "spare the rod and spoil the child". The Evaluation Report of the Integration Pilot said among parents' suggestions to improve the programme was: "The authorities should put more rights in the hands of the teacher. The child rights argument should be curbed." (Morrison 2009: 47). The majority of teachers agreed, although from a different perspective, stating as a "job dislike": "The MOEY²⁵ now seems to be giving parents and children too many rights." (Morrison 2009: 39). While this is noted, it should also be borne in mind that the experience of parenting practitioners is that the average parent is open to advice, especially when helped to recognize within their experience that corporal punishment

frequently does not achieve the results they want. Thus among some of the same parents in the Evaluation “more listening” to their children and a decrease in corporal punishment following the parenting workshops were noted. The situation remains dynamic.

Impact on low income and disadvantaged groups

Approximately one third of Jamaican children under four years old live in poverty, with home environments seriously lacking in the basic elements needed for healthy development. However, only about 1% of these children are served by early childhood programming (UNICEF Situational Analysis, 1995 cited in Jarrett 2007: 4). The National Strategic Plan (NSP) intends to target health centres and clinics for more parent interventions, since virtually all Jamaicans have access to these services for the required basic immunization visits and basic health care needs. There is still a small percentage of young children of ‘hard-to-get-mothers’²⁶ who do not access even these basic services, or whose visits are far too few and far between to provide sufficient opportunities for significantly useful parenting support/advice. There are now proven methods using home visits that can effectively reach the poorest and most marginalized children and parents, providing stimulation that will improve these children’s life chances. It is hoped that the present expansion of roles of the Community Health Aids planned by the MOH comes to fruition and home visiting can become a sustainable part of regular services offered.

A disappointment with the Integration Pilot, according to the Early Childhood Unit, was its failure to sufficiently target and reach children with disabilities. A critical component of The National Strategic Plan is the screening of children zero to three for disabilities with subsequent referrals to specialists when necessary.

As a result of integration and the increased focus on early childhood, the society has clearly come to expect that a child will be in some form of pre-school by age four years. With 93% of basic schools now receiving subsidies, the Early Childhood Unit suggests that many parents are less concerned if they cannot pay the full fee and more concerned to ensure their child is in school.²⁷ In addition, a number of programmes (listed earlier) have served to assist the basic school sector, particularly within poorer communities. The figures in Table 3 below, taken from a highly reputable annual household government survey, suggest that coverage for poorer children has increased significantly since 1997. Whereas in 1997 there was a gap of 17.3 percentage points in gross enrolment between the poorest and wealthiest quintiles, 2007 presents the extraordinary achievement of 100% gross enrolment in both quintiles. This does not of course address the difference in quality between schools. The strength of Jamaica’s educational system is access; its weakness still remains inequitable quality, producing a bias against children in poorer communities that tend to have poorly resourced ECIs.

Table 5: Gross Enrolment of 3-5 years old in pre-school by socio-economic status

GROSS ENROLMENT 3-5 YEARS	1997	2007
Early Childhood Institutions and Primary Schools (gross enrolment)	84.2%	99.4%
Gross enrolment by quintile:		
Poorest Quintile	76.3%	100.0%
Wealthiest Quintile	94.6%	100.0%

Source: Planning Institute of Jamaica *Jamaica Survey of Living Conditions 1997, 2007*

The new ECD curriculum

The new curriculum is one of the most direct consequences of integration under one Ministry, although its later-than-scheduled arrival (a wait of about seven years) has caused frustration for many.

Preliminary assessment of new curriculum effects

The Resource Centre Manager and her Assistant in Mandeville cited the piloting of the “excellent new curriculum” for birth to three-years-old as largely responsible for the greater participation of parents in their children’s development. The new outcomes-oriented approach focuses on engaging parents in supporting their children’s learning. So they concluded that not only had integration brought benefits at the practitioner level, it had also increased the engagement of parents. They observed that the new curriculum was so comprehensive that it might “thwart creativity” for some or “make some teachers lazy”, but overall felt that the thoroughness ensured standards were maintained in the delivery of the curriculum. For those practitioners who had never worked with a curriculum (primarily in the day care sector) they believed that this new curriculum was welcomed, as “for the first time they actually had some teaching tools to work with, rather than trying to create their own lesson plans.” They thought the response to the new curriculum by all levels of early childhood personnel was generally quite positive.

For the head of the Early Childhood Unit, integration is realised via the curriculum: integration means “the twinning of day care and basic schools into a seamless stimulation programme with curricula that would support that activity”. She, too, believes that the day care sector has benefited the most by being brought into an integrated system by raising the bar for staff training, staff-child ratios, and environments to provide much more stimulation for young children’s development.

The basic/infant school sector, too, has generally responded well to the demands of the new curriculum, but for these personnel the requirements have been more incremental than for the day care sector. The NCTVET training curriculum for early childhood practitioners has also required that personnel who had formerly only worked with four and five years old now must also ground their work in an understanding of the earliest stages of child development.

The signs are that the new curricula--for the classroom as well as for the care giving and teaching cadre have the potential to be significant vehicles of integration. Not only are they aiding early childhood personnel to address the integrated needs of children across their developmental domains, they can serve to make more seamless the experiences of children from birth till their entry to Grade One.

Expansion of training

Training with certification is another direct consequence of integration. It has made a profound difference with a career path through certification now available for early childhood practitioners prior to reaching the fully-trained teacher standard. With the development of the NCTVET competency-based course of training at three levels for early childhood practitioners, many day care centre and basic school staff took the opportunity to obtain certification. From 1999-2006, 5,202 persons achieved Level 1 certification, 1,504 obtained Level 2, and 8, Level 3 (Ramocan 2004 and HEART/NTA in JASPEV 2008:155). The present target of the ME is to have at least one practitioner with a teachers college diploma or degree in each basic school. However in 2006 only 4% of basic school staff, or just over 200 persons, were trained teachers. In contrast, almost 600 teachers in Infant Schools and Infant Departments were trained at that time, constituting 89% of all staff in these institutions (Jamaica Social Policy Evaluation 2008: 154).

It was possible to implement this training system within a short space of time because of the capacity of Jamaica's national training institution, HEART-NTA, to provide the institutional framework. Under the ECC new regulations it is a requirement that staff receive recognised training. However, although staff subsidies at the basic school level increase with levels of training, this does not automatically happen in day care centres and is one of the complaints of the day care practitioners. This is bound to lead to the goal-defeating syndrome of persons leaving day care once they gain qualifications.

Programme quality

Overall programme quality has improved from a variety of perspectives. As indicated, the new curriculum is a further move away from 'schoolification', the traditional perspective of many parents and still too many teachers, and which has been a mark of government infant school education in particular. This view sees early childhood institutions for three to five years old as primarily preparation for more formal primary school, or as "junior partners making them school-like" (Moss and Bennett 2006: 2), producing a learning environment inappropriate and ineffective for this age group. In contrast, the more recent concept of a smooth transition between pre-school and primary school aims at bringing Grades 1 and 2 much closer to a more flexible learning environment with round tables, more space, more outdoor equipment, etc. The standards for basic schools and day care centres include adequate space with shade for play outside. This has not always been present in these institutions and there has been a general lack of appreciation of the importance of outside play and physical exercise. The new curriculum will support changes in both thinking and practice in relation to many aspects of indoor and outdoor

space uses, with its emphasis on much more child-directed activities as opposed to teacher-directed and rote activities. It is too early to give even a preliminary assessment of the impact of the curriculum for four and five years old in the basic schools as it was officially introduced only in early 2010, having been pilot tested at various stages of its development.

Teacher/Caregiver to Child Ratios

Teacher and Caregiver to child ratios, nearing developed country standards, are now required under the new regulations:

- Children <1 year – 1:5
- Children 1-2 years – 1:8
- Children 3-5 years – 1:10

This, however, will be one of the steepest challenges for most ECIs to meet, since basic schools have been operating on the long-standing formula for receipt of salary subsidies of 1 teacher to 30 children, and most day care centres run on very tight budgets with no subsidy even for those serving poor communities. Even with lesser-trained assistants acceptable in supporting trained teachers and caregivers, the cost challenge remains daunting for the majority of institutions. In the island-wide public education campaign to engage staff, boards and parents in discussion of the implications of the new regulations and standards, this issue was one of the most vexing. While most teachers endorsed the rationale - and welcomed it as making it much more possible to do what they had been trained to do - boards and parents are worried about where funds will come from to achieve this. It is not known how much this factor delayed applications for registration (73.8% registered one year after the call to register) and/or how much it remains a fear factor in the field.

Integration “on the ground”: Evaluating the Integration Pilot

Feedback from senior management

Feedback on Integration as a whole and on the 2-parish pilot project was obtained in separate interviews with the present Head of the Early Childhood Unit (in 1997 a Senior Education Officer in the Unit), the Head of the Day Care Unit (in 1997 also Head of the Day Care Unit but in Children’s Services, Ministry of Health), and the second Integration Coordinator (in 1997 a Senior Education Officer in St. Catherine, one of the pilot parishes). The following were the strengths identified:

1. **The concept of early childhood as a continuous process from pre-birth to eight years, requiring both care and stimulation, was readily grasped by the Education Officers and Day Care Coordinators and inspired them not only in the pilot areas but island-wide.** The ‘stigma’ about day care that was common 10 years ago among some of the Education Officers was overcome. “The Education

Officers believed in it after a certain confusion, as was expressed in an early meeting when one EO said, 'Day care is somewhere you go to clean babies' bottoms!'

2. **The quality of day care services has improved, especially in the pilot areas but also island-wide.** There is much more training, lower staff to child ratios, more print-rich environments, environments that can help children develop fine and large muscles, more cribs (centres can no longer put two children in one crib), and a new focus on the use of outside environments. Some Day Care practitioners in the pilot areas are now involving children in activities such as swimming and dancing. Parents are more informed and are looking more critically at what is being offered. In the pilot project, all the inputs to early childhood that are obtained from time to time, e.g. educational materials (posters, reading materials etc.) and food items, are shared with the day care centres.
3. **Training opportunities have widened and improved.** Caregivers became motivated to further upgrade themselves as upward mobility and self-development became possible through certification and the opening up of career paths. The in-service training has changed and now has a holistic approach. It involves parents and educates them about immunization and registration of births, there is a focus on nutrition, and there is training for the cooks which has had a positive impact. The new approach is to give ECD training to all personnel interacting with the children.
4. **In the pilot the inter-sectoral linkages worked and brought real benefits.** An inter-agency group incorporated persons from Health, Education, the Fire Department, the Social Development Commission²⁸, Service Clubs, NGOs, CBOs and anyone concerned with child and family issues. The meetings were bi-monthly or quarterly and strengthened intersectoral understanding, communication and partnerships as well as provided technical expertise as issues came up.

The areas of weakness identified were:

1. **The impact of the ongoing salary discrepancies between the DCCs and the EOs.** A major and grave error in the administrative process was keeping the EC and DC Unit separate, and the lack of parity for the personnel in the Day Care Unit. When the Day Care Coordinators upgraded themselves (by adding teacher training or a degree), as vacancies arose they applied and got EC Unit EO positions for a better salary, career path and job security, leaving a skeletal DC Unit.
2. **The long delay before evaluating the pilot has had deleterious consequences** (see next paragraph). Officers are confused about the future. Momentum has been lost and motivation has been dampened. It is felt that the focus of all the national programmes is being placed on the primary level that integration has been left behind²⁹.

March 2009: Final Project Evaluation and Strategic Report

For reasons that the authors have been unable to ascertain, this evaluation was seven years late, giving rise to a host of problems including the difficulty in distinguishing

impact of the pilot versus impact of other inputs, particularly the work of the ECC. The Report does not mention this as a methodological limitation. However prior to presenting the *Primary Survey Results to Date* the Report acknowledges one major problem resulting from this: “It is important to note that all respondents did not immediately recall what the Integration Project was about. As a result of this, interviewers had to use varying techniques to stimulate the memory of respondents” (Morrison 2009: 37). This obviously introduces potential bias in the findings.

While the authors understood that this Report was intended to evaluate the pilot Integration of Early Childhood Development (IECD) project implemented in the parishes of St. Catherine and Clarendon from 1997-2002, neither the report title or the report itself makes this clear, except in recounting findings from the primary data—interviews and focus groups with ECI staff and parents and a few community leaders. Otherwise it reads as though the Report is about the entire integration process across Jamaica, which, as in the two pilot parishes, has been influenced by many other events and processes since 2002. The wording in the scope of work at the beginning of the Report is also confusing as it speaks of the “National Integration Programme” when a reference to the pilot would have been expected.

The prescribed scope of work was two-fold:

- i. To evaluate the implementation and impact of the National Integration Programme in terms of:
 - Administrative re-structuring;
 - Development and alignment of EC curriculum;
 - Strengthening of inter-sectoral linkages;
 - Strengthening and broadening of service delivery;
 - Strengthening of community supports to ECD.
- ii. To determine the future of the National Integration Programme and develop a strategy for the creation/sustainability of mechanisms to coordinate IECD activities at the parish or regional levels island-wide.

The Report states that by 2002 the number of recognized schools in the parish of Clarendon was 205 and in the parish of St. Catherine 293. In the same year the number of day care centres was 25 in Clarendon and 125 in St. Catherine (Morrison 2009: 35-36). However the sample for institutions was only 25 and responses were only received from 17 persons (although the number actually stated is 22, all the other figures and percentages indicate it is 17). Nowhere is it stated what type of ECI these persons represent, whether day care centre or basic school. The sample size for parents was two from each of the 25 institutions in the sample or a total of 50. It is stated that responses were received from 38 parents but again all the figures and percentages indicate there were only 22 responses.

These limitations and many other discrepancies take away from the credibility and value of this Evaluation. However, we present the main findings, which are similar to some of the information from key informants, but with major reservations noted:

- a. **Administrative restructuring was operationalized.** There was detailed rezoning of areas to accommodate integration. At the parish level Parish Boards and Inter-Agency Committees were set up, bringing a level of management and co-ordination in the pilot project areas. However the resources to cover the needs existing in the pilot parishes of St Catherine and Clarendon were insufficient, particularly in the area of staffing.
- b. **The registration and licensing strategy has been evident with the provision of a Common Standards and Licensing Document** (This seems to be a case where an input external to the Pilot (which was supposed to begin the standards and registration process but never did), namely from the ECC, is being incorrectly included in the Evaluation.
- c. **The provision of training materials has been welcomed unanimously by all major stakeholders.** This is seen as a major plus for the integration movement. Some, however, say that the materials have been biased towards the basic schools and more materials need to be provided to nurseries and kindergartens.
- d. **The strengthening of intersectoral linkages has borne fruit.** There is strong evidence of major formal public and private institutions making contributions to the IECD within the pilot areas.
- e. **A strong health and education training partnership existed under the programme which never existed before IECD.**

This is evidenced by training of EOs, ECI operators and principals in:

- Dental health
- HIV
- Occupational exposure
- Immunization
- Blood borne diseases
- Respiratory Infections
- Breast Feeding
- Birth Registrations

N.B. Some of this training, if not all, was at the initiative of the ECC.

- f. **Assessment of the strengthening of community supports show that attempts were made to carry out this strategy.** The development and repair of resource centres and including parents in skills training programmes are

evident. However the IECD Programme is still far from seeing independent and sustainable community initiatives (whether income generating or not).

While there is occasional reference to the ECC during the report, it makes a list of general recommendations that take no account of the existence and enormous amount of work undertaken by the ECC since 2004. It is as though the same situation exists all over the island as existed when the pilot IECD officially ended in St. Catherine and Clarendon. The recommendations make little sense for this reason.

The integration of parents and positive parenting techniques

Analysis of programmes implemented by the Early Childhood Resource Centres (as well as the limited parental feedback in the above Evaluation) supports the usefulness of parenting programmes, from which parents have benefited in gaining knowledge and some new skills, and school/family partnerships have been strengthened. However programmes tend to be ad hoc and unstructured, coverage is limited and funding is inadequate (Bailey 2005). These findings are also in keeping with the Early Childhood Resource Centres Upgrading Project, Evaluation 2007, that concluded that *“In respect of parenting programmes, the intent was clearly a very good one... recognized as being of supreme importance given the context within which “today’s children” were being raised... (and) ...indicated that those who knew of and/or had attended sessions were beneficiaries of an important asset. But the problem was that few knew about the RCs and/or their programming.”*³⁰ And the cost... *of rural travel can be exorbitant....and often unmanageable where poverty is a consideration...*” (Chambers 2007: 86)

The society, generally, is increasingly focused on the need for parenting support and education, particularly given the high incidence of violence and aggression, with the majority of perpetrators and victims being young (under 30 years). However, the focus is often on punitive measures for the ‘indiscipline’ of children, or for the perceived negligence of parents, rather than on preventive approaches to strengthen parents’ and families’ capacities to deal appropriately with their children’s developmental and learning needs. Parenting in contexts of serious poverty compounds the challenges for many parents, particularly those who are sole support and/or teen parents. The ME is demonstrating its commitment to improving support to parents through its parenting policy and the germinal National Parenting Support Commission, being driven so far through the ECC Community Interventions and Parenting Sub-Committee.

Like the ambitious vision of the Early Childhood Commission, this thrust of government to coordinate and expand services to parents will be very dependent on the level of human and financial resources that can be marshalled to achieve its objectives. In the present global economic climate, the government’s ability to sustain current levels of service is already challenged. Meeting parenting support needs will further challenge not only the government, but the entire society, calling for greater levels of voluntarism, collective solutions, reduced ‘turfism’, and commitment to the most vulnerable populations. However the fact that the World Bank has put resources into parenting components of the NSP and is promoting it as a best practice model is significant and suggests the government may be able to raise more of the required resources.

To date there has been no visible impact on affordability of early childhood services, particularly for low income and disadvantaged groups. However where parents are involved in the outreach of the Resource Centres, empowering them to self-organise income generating projects, there is potential for some impact. However, the reach remains far too limited in most regions, with virtually no resources to assist.

Monitoring and inspection

The necessity for all ECIs to now work towards being licensed requires a strengthened system for ongoing inspection and support. Until the ECC, the inspection functions and the developmental/training functions resided in the single post of Education Officer within the Early Childhood Unit. With the creation of a separate inspectorate under the ECC, and the considerable delay in acting on the approved move of the development/training functions of the ECU to the ECC, a disconnect has developed that has left the ECIs with very limited clarity and support about how they are to meet licensing requirements. The Education Officers were also left in limbo, experiencing tension and stress in relation to their future in or outside the system. It is surmised that at least some of the disgruntlement at the perceived “top down” directives and the lack of sufficient on-the-ground guidance is due to this unresolved situation.

Throughout its history the early childhood sector as a whole has maintained a very supportive, hands-on approach, working with largely untrained persons to achieve its commendable reach of over 90% coverage. Despite the ME’s general commitment overall to improving teacher and principal accountability linked to performance pay, and while recognizing the tremendous constraints of the context in which people in the educational system are working, many have disagreed with the decision of the ME to shift the early childhood unit function to the centralized ECC. The “intrusion” (as it feels to some) of legislated requirements and seemingly unreachable standards has created some fears and resentments. For some the ECC seems ‘top down’, eager to push its vision without the time to listen to others, thereby denying itself support and ownership.

With only a 73.8%³¹ application rate in Year One, and licensing still to follow, it is early days to assess whether these fears will dissipate with the eventual support of a revised cadre of development officers, and whether compliance and licensing of some ECIs will help spur or discourage others. Government subsidies will soon be linked to applications for registration. Private sector companies, foundations and government agencies are working with the ECC and do not provide support to ECIs unless the ECC confirms there is an application for registration. It will be important to track how this situation unfolds.

The fact that the ECC has undertaken a number of studies suggests it takes seriously the importance of data collection, monitoring and evidenced-based decision making. The Ministry of Education itself has not been sufficiently demanding in this regard and it is extraordinary that data are often not readily available, if at all, e.g. on independent schools and even on some public schools, and that educational institutions are not sanctioned or even pressured through public exposure (even in a generic way) when they do not send in required data.

Funding for the early childhood sector

The public debate has opened around the differences in funding between educational levels and between children and adults. The Social Investment for Children Initiative, a coalition of government, NGO and International Development Partners received UNICEF

funding to conduct an analysis of real government expenditure on children from 2003-2006. This study showed that real government expenditure on children steadily declined between 2003 and 2006 (Witter 2006). The Minister of Education himself has referred to the disparate size of the spending gap between tertiary and early childhood. There is little doubt that integration, and particularly the work of the Early Childhood Commission in budgeting for long term planning, has ratcheted up this awareness and concern.

Cross-sectoral linkages

Integration has meant improved cross-government linkages between ministries concerned with children and families, namely the ME, the MOH (especially the public health services) and the Ministry of Labour and Social Security. The ME and these ministries already work closely together on a conditional cash transfer welfare programme “Programme of Advancement through Health and Education” (PATH), in which transfers for children are dependent on attendance at school for older children and health clinics for children under six. The ECC’s Board and its structure of sub-committees recognize the importance of coordinating across sectors if it is to achieve the National Strategic Plan for Early Childhood. The ECC’s expanded organizational structure, recently approved by Cabinet, brings staff complement to over 170, including a Cross Sectoral Coordinator who will supervise five Community Intervention Officers working in the country’s five regions.

Officers in the Early Childhood Unit felt that the success of the Inter-Agency Committee, set up primarily in relation to the integration pilot parishes, was an example of true integration in the sense that “[...] you could begin to share activities and build on these common areas” (Day Care Director). The partnership with, and training by, the Ministry of Health with regard to immunization was seen as particularly helpful. The Integration Pilot included training for cooks and there is an increased focus on nutrition under Integration as part of the critical set of supports needed by young children for optimal development. However there is no health data to assess impact.

Unequal integration

Equitable access and equivalent outcomes have been articulated as a central value in the present Early Childhood System: “It is clear from the evidence presented that for us to progress as a country, it is not just necessary, but critical for us to develop a comprehensive, highly organized Early Childhood Care and Development Programme for all children, particularly for those who are most disadvantaged.” Prof. Maureen Samms-Vaughan, Chair of the Early Childhood Commission, May 19, 2004, quoted and supported by the Task Force on Educational Reform (2005: 16). Whether or not these outcomes are actually ‘pursued as a central value’ with the dynamism and focus suggested by that phrase, is debatable. There is clearly a good distance to go before the society, government and the education system fully absorb the implications of what happens to children in the early years and the critical importance of parents’ and society’s interventions. The fact that only two ministries³² have day care facilities for their staff (and not the Ministries of Education and Health) is telling. Only a few private sector

firms supply this service for staff. The systemic salary discrimination between day care officers and early childhood officers, and between early childhood officers and primary level officers, suggests the traditional view that no serious professional specialization or science is needed to 'look after' young children.

Despite the undoubted increase in awareness and action in support of ECD generally, the focus has in practice remained largely on the three to five years old. Enrolment of this age cohort in the preschool system is almost universal, there is a long history of active community engagement for this cohort, and government subsidies are virtually all spent here. Access to high quality services is seen as a universal entitlement for this age group. While this is true of high quality health care for the zero to three-year-old group, it is not true for other supports to this cohort. Day care is still the 'poor cousin'.

The voiced intention of some stakeholders to carry early childhood approaches and an integrated pedagogy upwards into early primary school has not been achieved. Given the other priority areas in the earlier years this may not receive focused attention for several years.

Integration on two tracks

As has become obvious from the above sections, since 1998 two parallel tracks and understandings of 'Integration' have emerged. These two tracks are in fact complementary but for some seem to be at odds. The original concept, and the one being still pursued by the Early Childhood Commission, is that early childhood learning is a continuous process from pre-birth to eight and involves much more than "schooling" approaches; parents, communities, schools, health services, government and the private sector are all partners in achieving the broad developmental goals of children. The ECC Chair has described it as "a single comprehensive approach. The child is at the centre – able to receive all the services s/he needs in a coordinated manner" (Interview). Virtually the whole sector would agree with this definition *in principle*.

The parallel approach, via the Integration pilot project in a particular geographic area, has focused more on the specifics of delivering and testing an integrated day care and early childhood education service of improved quality with higher staff qualifications, expecting the evaluation of this to lead to island-wide recognition and implementation. However the evaluation of the Integration Pilot did not begin until 2008, six years after the end of the planned run of the pilot and well after the establishment of the Early Childhood Commission, the Early Childhood Act and all the activity that has taken place since then. Thus the final evaluation report is not only seriously compromised but has lost much of its relevance.

These parallel approaches are not oppositional; they have both occurred under the Ministry of Education, but the ME has not coordinated them. For example, it is odd that neither the two KPMG reports nor the Task Force Report refer significantly to the Integration Pilot nor did the ME raise the Integration Pilot for serious consideration in these fora.

The evaluation of the pilot, which for the EC Unit was a main focus of integration, never happened at the appropriate time. In its absence profound organizational changes have taken place. The functions of inspection and development have been separated. The function of inspection has been removed from the Education Officers in the Early Childhood Unit. This in itself could have been seen as making their heavy load lighter and more focused, but for some this seemed like a reduction in their authority. Organizational changes are often resisted because they can seem to threaten or shift power.

Addendum 8/2010: *As of May 2010 the EC Unit was dissolved, with the remaining functions of the Early Childhood Officers moved to the ECC; all officers within the Unit were retired or made redundant. The Education Officers had opportunity to apply for positions of Development Officers, but few did so, given the considerably lower salaries assigned to the new posts. Processes like this require preparation and counselling of those involved, but this appears not to have been done by the ME or ECC, despite the several years between the decision to transfer functions and the actuality. The legacy of the long delay has left some hard feelings behind, and has resulted in the new ECC development unit being generally unable to benefit from the accumulated years of experience represented by the EOs.*

It is also noted that although the ECC's sub-committee system is generally exemplary in its representation and in the sub-committees' work, the Early Childhood Unit was not represented on most of the major committees or on the ECC Board. With the dissolution of the EC Unit in 2010, this issue has become moot, although this reality over the past few years may have contributed to some of the "two-track" thinking about integration.

Varied responses to the ECC's expanded role and to general reform

From the above, it is not surprising to read frustration and tension in the concerns expressed in interviews with EC Unit Officers for this report:

- “Who or what will the belated Evaluation of the Integration Pilot inform? The idea of the ECC was born out of integration but ECC has not carried it. When and how did the ECC mandate change? Part of my pain is that it is necessary to use the past to inform the future – *not to decide it, but to inform it*. It was only when I became an Education Officer in the EC Unit that I really began to understand the basic school experience, the kind of commitment, dedication and hard work that was involved – one cannot ignore these sacrifices. And you cannot know them without seeking to find out about them the fact that these basic school institutions were established and maintained by ordinary untrained people, driven by their love for children and the need for a job.”
- Another person expressed deep concern about the changes over time in the ECC mandate. “Originally the EC Unit was to supervise registration and then to recommend to ECC, who would actually license the ECIs. The ECC would quality

control the entire ECD process, keep the EC Unit abreast of theoretical advances in ECD, undertake research and oversee data collection, but not implement.” The speaker feels this change is a profound mistake. They commented that the consultations the Minister told ECU staff would take place before the EC Unit was subsumed into ECC “[...] would seem to be a euphemism for interviews. Officers know that some will get early retirement, some will go elsewhere.”

- “More collaboration and fact-finding is needed between ECC and ECU. The evaluation of the Pilot needs to be completed. The ECC should stick to its original mandate, seeing to registration and facilitating upgrading, being the catalyst to coordinate all the parts: the parenting groups, the interagency groups. It should be the interface for early childhood between the public and the MOE, sharing the vision of what is required. At the moment there is no partnership between ECC and ECU. We have not met the ECC Officers and Inspectors. There is exclusion.”
- With regard to the link between Integration [the Integration Project] and the ECC we thought it would be integral to the Commission. After all, the Commission evolved from the Integration project. We have not seen this as strongly as it should be. We also understand that they do not think integration is that important. There is no focus on where integration is now. What is happening to the scaling up? Day Care is not getting the thumbs up – 3-5 years old are getting more attention although the EC Act covers birth to eight years. “
- “We think the Early Childhood Commission should have taken up Integration [the Project] and taken on the Integration Coordinator but there is no sign of this. The Integration Coordinator has been invited to sit on a number of ECC sub-committees but she has never been called on to present on Integration or to discuss it.”
- “To have rebirth integration needs to be picked up by the ECC since it has this authority. Government should be made aware, through the Evaluation, of what is best. The ECC needs to be sensitized that there were many stakeholders before the Commission was established – some are foundation stakeholders. The Commission needs to be guided by what came before. The Minister has not spoken to the people on the ground nor [has] the Head of the Commission³³. How do you effectively take over something you do not know about? This is going to create estranged relationships – people have no trust. From day one the Commission should have been working in tandem with the Unit so that when the time came for join-up it would be easy. It is not going to be easy now. There is great concern. The stakeholders - Education Officers, Parish Boards, parents who have such a close relationship - are very worried. They are asking questions: Will there be the same close interaction? Will you be there when we need advice? There is a disconnect. It needs to be addressed through communication and respect.”
- Other comments from child development specialists and management consultants outside both the ECC and the ECU have suggested that:

- The ECC is taking on an enormous load for which there are no ‘lessons learned’ to reflect upon and no examples of structures against which to contextualize the recommendations, such as other well-functioning bodies in Jamaica or ECD bodies in other countries.
- There may be very negative consequences for the ECC of following this un-signposted path, which will carry a heavy burden, among them:
 - Limiting the potential for the ECC to be a ‘light’ and authoritative body, responsive to the rights of the most vulnerable children, flexible in meeting new needs, and innovative in devising critical interventions (in advocacy, policy, research, programming, etc.) in the ECD sector, i.e. having the working space to provide cutting edge leadership.
 - Limiting the potential for the national development process to learn from the mainstreaming, dynamics and innovation in ECD services and interventions. Throughout its development in Jamaica’s history, ECD has tended to be groundbreaking in its multi disciplinary approaches to planning and programming, its multi agency and donor cooperation mechanisms, its services that have had to converge in the service of human development, its evidence based research for economic and social empowerment of citizens and many other areas. The ECC, if enabled to do so, could become a critical leader in the national development process, participating in national strategic planning, advising/vetting the allocation of international and national resources, and scrutinizing the attainment of national and international goals not only for children but also for the adults they will become.

7. Lessons, implications and remaining challenges

Lessons and Implications

1. **Persistent and well-informed advocacy pays off when the timing is right.** When conducted in a participatory way with a wide cross-section of stakeholders in the public, private and civil society sectors it leads to strong unity. In this instance the specific factors that contributed to successful advocacy towards integration of early childhood services included:
 - early childhood specialists, who were familiar with the latest research and practice;
 - local expertise and international funding available to carry out in-depth studies of early childhood institutions;
 - studies which included local players on the ground in the processes, i.e. the EOs in the Early Childhood Unit of the ME, who were involved in these earlier studies and felt ownership in their conclusions;
 - meaningful consultation with stakeholders when the studies' findings were complete; their views were taken into consideration before the final conclusions were written;
 - the formation of an action group following the studies that engaged in discussion with a wider group of stakeholders and developed strategies collectively.

All this led to unity of purpose and a body of well-argued evidence to put before agents of government.

2. **Strong leadership is essential to lead major change,** and this has not been consistently present, causing serious challenges. There was strong leadership within the group of advocates. Some of this leadership drive was dissipated when integration under the Ministry of Education was accepted by government and the ME took over the reins. There was lack of coordination and direction. Integration started to appear to be running on two 'tracks'. One track, still designated "integration" within the Ministry of Education, struggled with the ambitious tasks of the original Pilot Integration of Early Childhood (IECD) Project with very limited resources, confounded by weak administrative links that left those directly responsible for the project with very limited authority to advance the project's objectives. Salary discrepancies, which still remain, were in direct contradiction to the direction and philosophy of integration. Nevertheless the power of this philosophy inspired Day Care Coordinators and Education Officers, despite enlarged case loads and internal responsibilities that impinged on their direct early childhood monitoring functions. The long delay in evaluating the impact of this initiative, which unfortunately

contributed to its low visibility, has now led to demoralisation and demotivation. Although within the Integration Pilot project there was considerable effort and success in coordinating the delivery of parenting education/health support services in the pilot parishes³⁴, the KPMG cited no “lessons learned” from this Project in stating:

[...] day care and preschool facilities (which are tied with the Ministry of Education) have no formally established links with the other sector services involved with children’s health and welfare. Hence, the breadth of service tends to be narrowly focused on education and/or care, with health, nutrition and social welfare aspects of children’s development receiving less emphasis.

It is also noteworthy that no reference to the pilot IECD project was found in the Task Force Report on Early Childhood Education. The apparent failure by the ME representatives to place this on the agenda of this important working group is inexplicable.

The second ‘track’ seemed more informed by the original advocates’ push for “mainstreaming” early childhood, and the KPMG consulting team was steered by its stakeholder consultations down this track, setting inter-ministerial policy making and management as a first priority. The establishment of the ECC was the outcome. Strong leadership has now emerged through the Chair and Board of the Early Childhood Commission but the gap between the two tracks has not been closed. Were change management processes considered? Who if not the ME should have been responsible for implementing these?

3. The **broader “track” towards integration**, involving collaboration and cooperation among multiple sectors within and external to government, **is a slower and more complex process than the track seeking to integrate several early childhood services under one sector Ministry**, because of its very nature in seeking to get more sectors on board and participating in the overall vision. Progress has been further slowed by the fact that these “two-track” realities were not dealt with more directly and earlier in their development. This lack of decisive action has fed misunderstanding and perceptions of “top down” decision-making that may be less true than perceived, but insufficiently transparent to encourage broader buy-in and collaboration.

Unresolved Challenges

A number of issues have emerged that are as yet unresolved. Most have a link to the status of very limited resources, within and outside government. This has to be a serious concern, given the resource constraints of a deeply indebted small island developing state in a context of global recession affecting Jamaica’s three main sources of foreign exchange, namely remittances (already down 15% at time of writing), tourism holding steady to date but at greatly discounted prices, and bauxite/alumina earnings projected to be down 70% this year with 1,850 job losses in this sector and 14,750 in other sectors up

to April 2009. In this scenario, financing the 2009/2010 budget is posing problems of a most serious nature, requiring external support.

These yet-to-be resolved issues include:

- The challenges in **implementation of the mandatory standards** for individual registered ECIs, especially in relation to staff-child ratios but also in other areas, e.g. space requirements, sufficient learning materials, upgrading of staff qualifications. This issue is complicated by the nature of the “non-ECC” track resistance/misunderstanding which includes the elements of the network of Parish Boards, needed to support and assist their area schools to meet these standards.
- The **inequity of the current subsidy system** for basic schools as compared to day care programmes. The historical link of salary subsidies to the 30 children to one teacher ratio is also no longer relevant with the regulatory lowering of child-staff ratios. There has long been discussion of providing subsidies on a more targeted basis related to community and/or parent need, but the present subsidy system still prevails, even though the categories and criteria of “recognised” and “unrecognised” schools no longer exist. Clarity of intent and reform of the system accordingly is strongly called for.
- The **continuing lack of attention to the zero-to-three age cohort**, threatening to render less effective the considerable attention given (financially and otherwise) to the older preschool group. Within the younger cohort, there is even greater attention needed for the most vulnerable children and families.
- **Definitive interpretation of the lessons learned from the Integrated Early Childhood Development Pilot.** This experience needs to be debated in relation to all later developments within the sector and resolved among those most affected stakeholders.
- **The inter-personal and inter-departmental communication obstacles** from the slow pace of the merger of ECU functions into the ECC. Left unaddressed, they will continue to slow progress that requires all stakeholders to be on board and pull their weight against real organisational and external challenges.
- **The need for systematic approaches and funding of island-wide programmes of parenting education**, making use of the established parish structures of the early childhood resource centres. Effective impact will not result from the limited self-financing which now obtains.
- **Full funding for the National Strategic Plan**, required to supplement committed external funds and achieve remaining objectives.

Dealing with these challenges requires unity of purpose, dialogue to resolve tensions, and the recognition that this admittedly ambitious programme still must be realistically paced, given current resource constraints, without losing or compromising the final vision.

Appendix A: Case Study of a Model Early Childhood Resource Centre

The first Early Childhood Resource Centres were set up on the initiative of Dudley Grant in the 1980s and eventually spread to every parish. They are a community based institution under the National Basic School Parish Boards. However, they receive some support from the Ministry of Education for the salary of the Resource Centre Manager and a subsidy for the RC Assistant. The Ministry of Education also provides an annual grant of \$20,000 (US\$227) for materials. The original concept of the resource centres was that they were to become a local resource for ECIs, to train basic school teachers and staff in ECD and teaching practices and be a resource for parents with children three to six years old. As the concept of integration developed, resource centres started offering similar resources to day care centres as well as including parenting programmes on understanding early childhood developmental stages and age appropriate behaviour management.

One such resource centre is located in the parish of Manchester in its capital, Mandeville, on the grounds of one of the largest teacher training colleges in the country. It is a bright welcoming building that was purposively built, under the Enhancement of Basic Schools Project to house an early childhood centre. On entering the centre it is evident that display areas are designed according to particular themes and the staff explained that displays are developed for the full age range of birth to five years. The birth to three curriculums was the first to be rolled out of the new early years' curriculum. Displays change each term to reflect the content and focus of the curriculum throughout the school year. At the time of visiting the centre the birth to twos curriculum focused on animals. The display area for this used mats, soft toys, pictures, books and textures and activities. The theme for the three years old focused on healthy foods, using pictures, model fruit, vegetables, meat, with associated activity plans. The themes for the four and five years old were "People who help to protect us" and "Traveling in and out of our community" respectively.

The centre also had other thematic areas; the first that caught the attention on walking into the centre was the area of Self Esteem. This included pictures and news clippings of Barack Obama, the first African American President of the United States, and a quote from F. Scott Fitzgerald 1896-1940, "*Either you think, or others will have to think for you and take your power away from you*" and another "*Attitude is a little thing that makes a big difference*" and pictures of Bob Marley.

Another area provided information on ECI regulations, policies and laws and there was a poster on the immunization schedule for early years. Another incorporated health through graphic visual displays on recognizing common early childhood illnesses and how to intervene and control outbreaks in an ECI. The ME HIV Schools Policy on the management of HIV in early childhood settings was also displayed.

"If my children do not learn the way I teach, I must teach the way they learn." This motto displayed in the teaching section of the resource centre also captures the essence of a well conceptualized resource centre, which also offers accredited courses in

collaboration with the HEART Trust for NCVET levels I & II for untrained staff of ECIs and as part of the aim to upgrade staffing qualifications and improve pedagogy. The centre also offers workshops for early childhood practitioners as well as parenting workshops that have led some parents to take the Jamaica School Leavers Certificate course and NCVET courses which the centre provides. These qualifications have enabled some of them to acquire teaching posts in Basic Schools.

The centre offers a book loan scheme for parents, photocopying facilities and a computer lab with four computers that are available for EC staff and parents to use.

When one asked about links with Day Care, resource centre personnel said they have little connection with day care facilities and explained that this was because there are no day care officers in the region. This reveals the staffing problems of the Day Care Unit and the impact on what is supposed to be an integrated service.

This resource centre is reputed to be one of the best resourced and managed in the island and is often used as a model. However accessibility to the centre is hampered by the hilly geographical area that is made up of four zones, some of which contain deep rural communities. Transportation costs to and from Mandeville, therefore, inhibit access. Within the ECD services there are no subsidies or financial resources to facilitate and encourage access, therefore ECIs that do tend to use the centre, do so because they are close by and traveling to the facility is not an issue. A similar scenario obtains for the parents whose children usually attend ECIs in close proximity to the centre. They also said that it is rare to see a father accessing the centres and this is a gap that needs to be addressed.

Centre staff also said that as excellent as the new curriculum is, authentic implementation as originally intended is severely hampered by space (especially in basic schools) and lack of equipment, resources and even the most common commodities such as paper, toys and books. The ECC provided them with a list of eight organizations that could be of assistance to them, but as this list was given to all other ECIs, the support that they could offer in light of the demand was very limited.

Appendix B: List of Interviewees

Interviewee	Position	Date of Interview
Mrs. Ceceile Minnott	Project Director, Dudley Grant Memorial Trust (DGMT)	26 January 2009
Miss Evadne Vennor	Assistant Chief Education Officer Head of the Early Childhood Unit Ministry of Education	3 February 2009
Mrs. Gloria Patterson	Senior Education Officer Integration Coordinator (2 nd) Ministry of Education	3 February 2009
Ms. Suzette Smith	Resource Centre Manager Mandeville, Manchester	3 February 2009
Ms. Janice Sinclair	Assistant RC Manager Mandeville, Manchester	3 February 2009
Mr. Fitz Brown	Head of the Day Care Centre Unit Ministry of Education	4 February 2009 12 February 2009
Prof. Maureen Samms-Vaughan	Chair, Early Childhood Commission Professor of Child Health, Child Development and Behaviour, University of the West Indies	5 February 2009 15 May 2009
Dr. Rose Davies	Head of the School of Education, Member of the Early Childhood Commission and Former Integration Task Force Member	17 February 2009
Mrs. Lola Ramocan	Quality Education and Early Childhood Specialist UNICEF	6 March 2009
Mrs. Sian Williams	Caribbean Early Childhood Development Specialist and former Integration Task Force Member	6 March 2009
Dr. Deanna Ashley	Former Director, Health Promotion and Protection Division, Ministry of Health, and current Chair of the Violence Prevention Alliance (VPA)	14 May 2009

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