Effective ECD Programs that can be scaled up

Parallel Session C-4
The Cost of ECD Interventions

Evaluating the Costs of Scaling up ECD Interventions: the World Bank Costing Model with Burkina Faso and The Gambia

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ACRONYMS

Burkina Faso

CDMT  Medium-Term Expenditure Framework
CSLP  Strategic Framework for the Fight against Poverty
DSRP. Development of the Strategy for the Fight against Poverty
EECE Areas of Community Mutual Aid/EECE/Bisongo
MASSN Ministry of Social Welfare and National Solidarity
PNDIPE Policy Framework Document for the Integrated Development of Early Childhood in Burkina Faso
TFP Technical and Financial Partners

The Gambia

CRD  Central River Division
DWR Department of Water Resources
ECD Early Childhood Development
ECCD Early Childhood Care Development
EFA Education for All
EPI Expanded Programme on Immunization
IMCI Integrated Management of Childhood Illnesses
MDG Millennium Development Goals
LRD Land Resources Development
NaNA National Nutrition Agency
PRSP Poverty Reduction Strategy Paper
RCH Reproductive and Child Health
Introduction

This text presents two case studies which concern the identification of programmes for the development of early childhood activities. The first concerns Burkina Faso and the second, The Gambia.

Before giving details of these case studies, it is interesting to note that in each one of the two cases, a strategy had been developed by the national teams, supported by international aid, particularly by UNICEF, both through its regional offices as well as through its consultants, who came specifically to help in the process. In one of the two countries (The Gambia), this strategy was the object of political validation, whilst in the second this validation was programmed but delayed, due to the national election procedure.

However, in both cases, the strategy, including the principles it contained, was general in nature, and no details were given about the basic functioning of the programmes that might result from the application of such principles. Without wishing to enter into a semantic discussion of the meaning of the word strategy, there is no doubt, on the one hand, that i) the idea of validation is hardly relevant with regard to the principles, because everyone is basically in agreement as far as early childhood activities are concerned and, on the other hand, ii) while the definition of a general strategy of principles undoubtedly constitutes a useful stage in the procedure, it should have been accompanied by operational proposals needing the validation of both the government and of those external partners involved in their eventual financing. The following should have been described:

i) the anticipated coverage of the young population (the proportion of children in the age cohorts concerned) by the services foreseen, at a given date (the year 2015 is, in general, the reference given with regard to the objectives of the Millennium);

ii) the services proposed and their concrete modes of organization, in relation to the age cohorts of the young people (more or less from zero to 3 to 4 years of age), for which activities are targeted within the family, and for the following age cohort (from 3 or 4 to 6 or 7 years of age), for which the activities are targeted in the centres where the children are regrouped; in particular, it is necessary to define the differences between the classical services and the community-type services by the identification of the persons involved, the training and the support they have received, and the goods and the services provided;

iii) the unitary costs of the services provided and their aggregated budgetary transcription, taking into account the coverage of the populations targeted by the programme.

iv) finally, a programme cannot simply be defined and calculated on a budgetary basis (which is nevertheless necessary), the question of its financing must also be explored, and, in the broad sense of the term, its medium-term sustainability, as a good programme which cannot be financed loses both its usefulness and its operational credibility.

The case studies presented below attempt to cover this stage. A lesson drawn from the experience gained by the national teams of these two countries is that this phase, other than its fundamental virtue of the making of an indispensable financial assessment, brings to light various concrete questions that remained latent when the strategy was defined. A second lesson is that the use of a simulation model is very useful, and that the model used as a framework proposed by the World Bank can, on the one hand, be easily adapted to
incorporate the specificities of the services envisaged in each country and, on the other hand, be easily appropriated by the national teams for the definition of their programme.

However, it should be noted that the stage concerning the operational definition of the development of early childhood activities is an important one, notably to help in both the understanding of and the defence of these activities, as well as helping the programme to obtain political validation and its inclusion in more extensive programmes, especially in the country’s documents concerning the Strategic Framework for the Fight against Poverty (CSLP), within the Development of the Strategy for the Fight against Poverty (DSRP).

Another aspect to be taken into consideration is that the finalization of the overall structural political choices represents an important stage in the work, but not the end. Once the validation of the framework has been obtained, it is important to continue carrying out work orientated towards the implementation and the definition of the plans relating to the activities for early childhood over the next three years; then the order of the day would be to write them into the country’s Medium-Term Expenditure Framework (CDMT).
1. **Introduction**

Within the framework of the process of the development of the policy framework document for the integrated development of early childhood in Burkina Faso (PNDIPE), a multi-disciplinary team was made up of representatives from various ministries, technical and financial partners (TFP) and NGOs. This team carried out its work from September 2002 to February 2005, with the technical and financial support of the Association for the Development of Education in Africa (ADEA), UNICEF, UNESCO and NGOs like the AXIOS Foundation, HKI and OSEO.

Whilst waiting for the adoption of this document by the Council of Ministers and in order to create a favourable framework for the mobilization of human, material and financial resources for its efficient implementation, it was agreed that a simulation model would be developed which would allow for various scenarios to be used. This note clearly defines, in an operational manner, the various implications of choice with regard to each scenario for the implementation of the PNDIPE.

The objectives of this note are as follows:

1) To present clearly and succinctly the present position of the early childhood sector in Burkina Faso: the various groups targeted and their needs, the different services required and their cost; the situation as regards the personnel employed in the sector (experience, numbers, payment); the sharing out of the costs of the sector between the State, the communities and the families; the resources presently allocated to the sector from the State budget; …;

2) To single out clear principles with regard to the policy of the PNDIPE in Burkina Faso by planning the medium- and long-term operations and by outlining their implications in terms of political choices, strategic orientations, financial conditions, and the mobilization of resources.

3) To outline clear and realistic perspectives for a provision of services that is both more efficient and more extensive with regard to the development of the young child.

2. **Principles for the development of the system**

The principal actors in the development of early childhood are the family, the basic communities and the institutions. The Programmes conceived to this end must be integrated into an overall strategy in order to respond to the needs of the young child. The recommended age cohorts are from 0-4 and 4-6 years of age. With regard to the first age cohort, the child’s development takes place within the family, but it receives assistance, on the one hand, from the councils (parental education; a programme for the reinforcement of the parents’ skills so that the appropriate care is given to children from 0-4 years of age) and, on the other hand, through the improvement of the child’s home environment. With regard to the second age cohort, the children are looked after within certain external facilities to ensure
socialization and cognitive development; the period in which the children remain within these facilities has been reduced to two (2) years instead of three (3), because the third year does not appear to give the children any additional benefits.

As the development of early childhood is an overall and continuous process, particular emphasis has been placed on the co-ordination of activities in the areas of priority that are: health, nutrition, hygiene, water and its purification, and education. This means working in synergy with other facilities that are involved in dealing with early childhood, whilst at the same time placing contextual activities into certain categories (those that take place in non specific instances of early childhood), as well as specific activities based on the provision of services of quality targeted to benefit young children. With reference to both the Dakar Forum and the Millennium objectives, priority will be particularly given to those children coming from underprivileged backgrounds. The contextual activities are all those that can be taken into account in the other sectoral programmes; the programme, for which the costs are estimated below, is limited to activities of a specific nature.

On the one hand, emphasis will be placed on the development of community structures, because they are adapted to the rural environment (and it is there that the majority of children are to be found who are in a vulnerable situation) and, on the other hand, because they cost four or five times less than the formal facilities, with a level of performance that is equivalent, as long as the managers can benefit from local supervision.

3. The present situation

The framework document for the National Policy for the Integrated Development of Early Childhood (PNDIPE) in Burkina Faso was finalized in February 2005 during a national forum which brought together representatives of the various actors intervening in the provision of services at a national level for the development of early childhood. This document is the product of nearly three years of work. This framework document should contribute in the search for solutions to the various problems which slow down the rapid development of the early childhood sector in Burkina Faso.

In a general manner, the early childhood sector in Burkina Faso is at present characterized by:

1) a weak coverage (hardly 1.2% in 2005) by the departments dealing with early childhood of the children from 0-6 years of age;
2) a high level of concentration of early childhood management facilities in the large urban centres (Ouagadougou and Bobo-Dioulasso) to the detriment of the small towns and, above all, the rural areas;
3) the predominance of the private facilities over the public ones;
4) enrolment costs in these facilities are very high and are not yet regulated;
5) a great demand is made on the communities to pay for the management personnel involved in early childhood activities;
6) the difficulty, or even the incapacity, of the communities, because of their poverty, to pay for the group facilitators who work within the community facilities and who are involved in the management of early childhood activities;
7) the limited number of Technical and Financial Partners (TFP) who invest in the sector for the development of early childhood, which makes it difficult to mobilize resources for the sector;
8) the absence of a policy of harmonization regarding the provision of services and their costs within the early childhood management structures;

9) the low level of the part of the State’s budget that is given over to early childhood;

10) the successful experiment concerning the Areas for Community Mutual Aid for Children (EECE)/Bisongo in the rural and outlying urban environment;

11) the existence of a policy framework document for the integrated development of early childhood which has been put forward for adoption by the Council of Ministers. It should favour the appeal, at both a national and international level, for an increased allocation of financial resources by the government and its development partners for the development of the young child;

12) the complementary nature of the PNDIPE framework document and the present note with regard to more efficiency in the planning and implementation of the interventions.

4. A simulation model and scenarios for the identification of a policy sustainable in the medium term

4.1 The model

With regard to the general principles which have been presented above and to the initial document presenting thoughts on the whole educational policy in relation to early childhood, it is important to give an idea of the cost of the contents of the work envisaged. These elements concern both the plan for the system's coverage (the number of young children concerned or the proportion of the age cohort which could benefit from the services) and the modes of organization of the services provided, taking into account that the essential dimensions that have to be considered at one and the same time are, on the one hand, the concrete feasibility of the programmes that could be envisaged and, on the other hand, the costs, particularly the public ones that are implied. As it is potentially possible to envisage numerous programmes concerning the development of activities for early childhood, it is important to be able, first of all, to identify those that correspond at one and the same time to the national objectives with regard to this subject as well as those that are both logistically and financially realistic.

A financial simulation model has been established in order to identify these programmes, to formulate their definition in a structured manner (in terms of coverage and of quality of the services provided), identify their costs for the State and the possibility of financing them. It shows the estimates of the public resources which could reasonably be expected to be mobilized together with the estimated costs (current expenditures and capital expenditures), which depend on the objectives related to the coverage of the system and the qualitative characteristics of the services provided. This model is based on data from the year 2004 and anticipates development up to the year 2015 (the year of reference chosen at the Dakar Forum and in respect of the Millennium targets). This structure allows for various scenarios to be estimated, taking into account that the target of the analysis concerns the year 2015, the point at which both the quantitative and qualitative aspects of the development of early childhood, the costs involved, and the financial sustainability of the programmes will be examined.
4.2. The various scenarios

4.2.1 Scenario I: Desirable ambitions in terms of coverage and quality

This first scenario is relatively ambitious in terms of the anticipated coverage of the system as well as the quality of services to be provided. This scenario will be described in quite a detailed manner as it will serve as a basic scenario with reference to which all others will be modelled.

In terms of the coverage of the system, Scenario I (see Table 1) anticipates a rate of coverage of 40% of the children from 0 to 6 years old for the year 2015; this rate is the same for the population of 0 to 4 years of age (parental support) and for that of 4 to 6 years (within specialized facilities). In Scenario I, the number of children from 0 to 3 covered by the programme will be 992,000 in 2015 and that of the 4 to 6 age cohort will be 457,000.

Ø For children of 0 to 4 years of age, the programme envisaged is made up of three components: 1) activities of a contextual nature organized by other structures (Ministry of Health, Hydraulics, and Agriculture), representatives of which are brought together to work in synergy for early childhood; ii) activities which concern giving advice to parents in order to improve behaviour with regard to the development of young children, and (iii) concrete contributions to ‘enrich’ the lives of young children and compensate for the lack of certain elements (supplementary nutrients with regard to the health programme, game kits, complementary nutrients for the most deprived cases). With regard to the latter, in Scenario I, it is envisaged that each child from 0 to 4 could benefit from a package (the contents of which have yet to be defined more precisely), of which the annual value has been fixed at 6 US dollars. Furthermore, it is anticipated that 25% of the children concerned by the programme (the most vulnerable or the most exposed to under-nourishment) would receive nutritional support (the form of which has yet to be defined) by means of the allocation of an annual sum of 21,000 CFA francs, covering the present period.

Ø For the children from 4 to 6 years of age, the services are provided within the reception facilities where they are brought together under the surveillance of an adult. The strategy of reference being to privilege the supply of services for the most vulnerable children, the Scenario I (like the following ones) anticipate that 75% of the children who benefit will be from rural areas; for these, the facility of reference is that of Bisongo with modes of organization that are more or less comparable to those at present in existence. It should be noted however that the various scenarios anticipate i) a State subsidy for the community monitors (young mothers and young fathers who receive training) of an average sum fixed in Scenario I of 14,000 CFA francs, covering the present period\(^1\) (to ensure the recruitment of competent monitors and to be able to control their work efficiently), and ii) the close support of a competent adviser (1 adviser for 10 Bisongos in Scenario I) who accompanies the monitors and checks on both the reality and the quality of the services given. For the 25% of the remaining children, the service is that of the classical pre-school level (children from an urban

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\(^1\) It must be noted that this refers to an average value, and that it is envisaged that in one half of the Bisongos the subsidy will only be 10,000 CFA francs, with a complementary sum given by the community, whereas in the other half of the Bisongos (in the most deprived areas, the definition of which should result from both a factual analysis and the use of transparent criteria), the subsidizing would be fixed at 18,000 CFA francs in order to avoid asking families to make an effort that they would be unable to make.
area); in the year 2015, it is anticipated that three-quarters of these children will be schooled in public facilities and a quarter in private facilities. Scenario I anticipates that the personnel in public pre-schools will be placed in a new category (working under a C1 contract), that the teacher/pupil ratio will be 35 in the year 2015 (it is 28 today), and that the State will ensure the expenses with regard to their functioning (at the moment they are subsidized by the families).

### Table 1: Parameters of the programme and the impact of alternative policies in 2015

<table>
<thead>
<tr>
<th>Anticipated values for the year 2015</th>
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<tbody>
<tr>
<td>Scenario I</td>
</tr>
<tr>
<td>Mobilization of resources</td>
</tr>
<tr>
<td>Education budget (%)</td>
</tr>
<tr>
<td>Ministry of Social Welfare and National Solidarity (MASSN) budget (% GDP)</td>
</tr>
<tr>
<td>Current resources (in billions of CFA francs in 2004)</td>
</tr>
<tr>
<td>Functioning and costs of the services</td>
</tr>
<tr>
<td>Coverage of children from 0-6 years of age</td>
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<tr>
<td>Number of children covered from 0-4 years of age</td>
</tr>
<tr>
<td>% children from 0-3 years of age covered by the nutrition programme</td>
</tr>
<tr>
<td>Number of children covered from 4-6 years of age</td>
</tr>
<tr>
<td>Number of children from 4-5 years of age in the formal system</td>
</tr>
<tr>
<td>……of which the following number are in the public system</td>
</tr>
<tr>
<td>Number of children in the community system</td>
</tr>
<tr>
<td>Current expenditures (in billions of CFA francs in 2004)</td>
</tr>
<tr>
<td>Capital expenditures (average over the period in millions of SUS)</td>
</tr>
</tbody>
</table>

On the basis of the chosen parameters in Scenario I for the coverage and the quality of the services, the level of current expenditure is estimated at 10,663 billion CFA francs (constant values for the year 2004) and those of the capital expenditures of 3.9 million US dollars per year, on average, over the period from 2005-2015. It is now important to determine to what extent these expenditures can be financed. In order to do that, and on the basis of what has been observed in other countries of the region, it can be anticipated that the resources for early childhood could come from two sources: i) from the education sector, pre-school being a component of the overall sectoral programme; of course, it is a minor component, but it has been observed that it can nevertheless obtain between 3% and 5% of the sector’s budget; ii) from the social welfare sector and the sum (complementary to the education sector’s financing) could correspond to something between 0.06 and 0.10 percent of the country’s GDP, according to practices observed elsewhere. Scenario I represents median figures perceived as minimal and maximum for both sources (4% of the anticipated financing for the education sector, and 0.08 percent of the GDP for the MASSN). With these figures, the sum of the resources for early childhood can be estimated at 6,686 billion CFA francs in the year 2015 (as from the year 2004).

The examination of the expenditures (10,663 billion CFA francs in 2015 for current expenditures) and the resources (6,686 billion CFA francs) shows that it would lead to an
imbalance. It would thus appear necessary to revise the expenditures by envisaging a less ambitious programme (in terms of coverage and/or quality of the services provided.)

### 4.2.2 Scenario II: Maintenance of the quality and reduction of the coverage to ensure sustainability

This scenario has been developed with a view to maintaining the quality of the services provided whilst reducing the rate of coverage in order to ensure financial sustainability in relation to the resources that can be mobilized. Scenario II, in terms of structural policy is based on the following hypotheses:

Ø The rate of coverage from now until the year 2015 will be decreased to a level of 25% of the children targeted (0 to 6 years of age). This population, and more precisely, the children from 4 to 5 years of age who are provided with pre-school facilities, will be spread out in a similar manner to that method retained in Scenario I. Thus, 75% of the targeted population will be financed by the community system in a rural area and 25% by the formal system in an urban area. The formal system will be financed at a level of 75% by public funds and 25% by the private system.

Ø The hypothesis will be retained that current public expenditures for pre-school education will represent 4% of education expenditures and 0.08% of the contributions of the MASSN, as a percentage of the GDP.

Based on this, as shown in the preceding scenario, the mobilization of public resources can be established at 6.7 billion CFA francs (constant values for the year 2004) in the year 2015. But if the current expenditures continue, they would rise to a level of 6,668 billion CFA francs in the year 2015. The reduction in the rate of coverage would allow the level of current expenditures to be brought down to the same level as that available by means of the mobilization of public resources.

### 4.2.3 Scenario III: Modest readjustments in the quality for a maximum coverage within a sustainable framework

Within this scenario, modest readjustments are made in the quality so that maximum coverage may be obtained within a sustainable framework. These adjustments do not call into question, in a significant manner, either the contents or the quality of the provision of services.

With regard to the quality of the services provided, the following should be taken into account: i) a small reduction is made in the “nutrition/medicine” expenditures, which go from 6 to 5 US dollars per child in the 0 to 4 years age cohort; ii) a reduction from 25 to 20% is made in the rate of targeting the deprived areas, and iii) a reduction from 2.1 times the GDP, per head and per group of children, to 0.8% times the GDP, per head, is made for consumables in the community facilities for the children in the 4 to 6 age cohort.

These relatively limited adjustments with regard to the definition of services provided allow for an increase in the rate of coverage of the targeted population of 25% in the preceding scenario to 27% in Scenario III. This increase may appear to be modest, but it allows for an increase of 50,000 in the number of children in the 0 to 4 age cohort to be covered by the services (and of 22,000 in the number of children from 4 to 6 years of age), in relation to the preceding scenario.
The simultaneous taking into account of these adjustments in the definition of services and the increase in the coverage, such as described above, allows for a maintenance of the level of current expenditures at 6.6 billion CFA francs (constant monetary value in 2004) in 2015, thus ensuring the financial sustainability within the framework of the realistic hypotheses previously taken into account concerning the mobilization of national public resources.

4.2.4 Scenario IV: Minimalist perspectives in case of possible unfavourable decisions

This scenario has been developed on the basis of minimalist perspectives in view of possible unfavourable financial decisions being taken. In this scenario, for early childhood, only 3% of the education sector budget is mobilized and 0.06% of the GDP in the MASSN’s specific budget. The result is that the volume of resources which can be mobilized in 2015 is reduced to 6.7 billion CFA francs in the preceding scenarios and 5 billion CFA francs in this scenario. No supplementary adjustment is anticipated in Scenario IV in relation to Scenario III with regard to the definition of services provided and their unitary costs. The reduction of available resources thus implies reducing the coverage of the system for early childhood to 21% against 27% in the preceding scenario (to ensure the financial sustainability on a new but less favourable basis for the mobilization of public resources.)

4.2.5 Scenario V: Development perspectives in case of favourable decisions

Contrary to Scenario IV, which was based on the reduction in the mobilization of public resources for early childhood, Scenario V anticipates the possibility of a reasonable increase in the mobilization of resources. Thus the proportion of the education sector’s budget for early childhood would be fixed at 5% (against 4% in the first three scenarios), where the specific budget of the MASSN for these activities could represent, in the year 2015, 0.10% of the country’s GDP (against 0.08% in the first three scenarios). These better figures (but which in any case remain quite reasonable and realistic) should lead to the sum of 8.4 billion CFA francs (constant value in 2004) of public resources being mobilized for early childhood in 2015 (against 6.7 billion in the first three scenarios).

These additional resources, in relation to those envisaged in the first three scenarios and using the same parameters as those taken into account in Scenario III for the definition and the quality of services to be provided, means that around 32% of the targeted population could be covered. Scenario V may be perceived as a policy which reaffirms the preponderant position of pre-schooling in the objectives of universal education, whilst keeping in mind the desire to attain the Millennium objectives for development.

5. Perspectives

At the end of this presentation, it is important to underline the aim of this note which is to help policy-makers to progress towards concrete decisions by knowing the facts, that is, by knowing the necessary public commitment with regard to resources, and by showing them the quantitative and qualitative objectives for the population of the young children of the country in the year 2015.

It is important, however, to underline that numerous scenarios could be envisaged both in relation to the level of the resources mobilized as well as to the corresponding services provided (in quantity and quality) to ensure financial sustainability in the medium term. In this respect, the 5 scenarios that have been proposed, as interesting as they might be, must be
considered as essentially illustrative. Other scenarios can easily be considered once the simulation instrument is constructed. The policy-maker could thus hope to mobilize fewer resources and measure the consequences on the services provided. The coverage of the services provided could also be improved, if so desired, in order to better respond to a certain social vision, and thus the consequences could be evaluated in relation to the mobilization of public resources. The simulation instrument is available with a view to finalizing these overall structural choices.

A second perspective to be taken into consideration is that the finalization of overall structural political choices is the next stage that needs to be determined. Once this has been done, work should be undertaken that is oriented towards implementation. Then the definition of plans for early childhood activities and the application of the framework decisions for the next three years (within the Framework for Medium-Term Expenditures) should be put on the agenda.
National ECD Policy Framework Costing
The Gambia

1. Introduction

The Gambia Early Childhood Development (ECD) Policy framework aims primarily at providing an integration of basic services for the holistic development of children. These services include health, education, nutrition, water and sanitation and protection. The approach lays emphasis on the role of the family and communities in providing quality care for children at this tender age of growth and development. It therefore targets the age cohort 0-8 years but with particular emphasis on age cohorts 0-3 years and 3-6 years.

In this policy framework services conventionally provided by Departments of State such as Health and Social Welfare, Education, National Nutrition Agency, Water Resources, and Community Development are regarded as contextual. What this means is that regardless of the existence of a national ECD Policy, government would undertake and provide services for children in health, nutrition, education and protection. This implies that these services will bear no costs within this Policy framework. However there is need for coordination of the different sectoral interventions to identify gaps and maximize synergy for effective impact on children’s survival and development.

Expanding and improving ECD provisions to address gaps created as a result of the level of coverage and nature of the contextual services and consequently increase the survival chances of all children including those with Special Needs, is also an objective of this policy. These gaps will form the specific activities that have funding implications that this policy seeks to address thus complementing the various sectoral efforts for improving child survival and development. This paper therefore defines the possible funding framework that could be adopted through which the objectives of the policy can be achieved by 2015. It explains the current situation of coverage and quality of services and five different scenarios of results that could be achieved following different funding patterns. The two (2) main age cohorts focused on in the costing model are 0-3 years and 3-6 years.

2. Situational Analysis

The Gambia is a small country with a population of 1,364,507 with a population growth rate of 2.8% and a population density of 128 persons per square kilometre. The current estimate for population of children 0-3 years is 141,000 and 3-6 years is 177,000. Most rural families depend on farming for their survival. Presently, agriculture equates with poverty, owing to the decline in value of traditional crops such as the groundnut, and the failure of other crops in volatile climatic conditions. Poverty is increasing with 50 per cent of the Gambian population rated extremely poor and 17 per cent poor (National Poverty Survey, 1998).

Sectoral divisions respond to the needs of young children and their families as part of the wider population. This means that there is no coordination and integration of services as they relate to young children. Furthermore, the focus of early child care interventions has been
confined mainly to the urban areas and to the private sector. The 1990s witnessed an expansion in early child care services. The number of Early Child Development (ECD) centers increased by nearly two fold between 1992 and 1998, from 125 to 265. Despite this, the overall national enrolment rate for children aged 3-6 years is still low at 19%. There are also marked disparities in access between rural and urban settlements. In urban settlements, 20% of children attend ECD centers compared with 14% in rural areas. In absolute terms the number of children attending such ECD centers was estimated at 28000 in 2004. In general 90% of these centers are provided by the private sector and 10% by the community based systems. The fact that access dependent on affordability, only the rich and less poor families benefit from these services. Very young children aged 0–3 years are generally missed out as far as comprehensive ECD interventions are concerned.

A short-term training for pre-school facilitators is provided by Gambia College and is fee charging. The government’s role is limited to monitoring, supervision and regulation of services. Of recent, some of the primary schools have started running ECD programmes at their levels. Some Pre-schools in the rural areas are benefiting from the school-feeding programme supported by the world-Food Programme.

The National Nutrition Agency (NaNA) is the lead agency for the provision of regulations for nutrition services in the Gambia. It supports the improvement of nutritional status of children 0-5 years through the following strategies:

- Baby friendly community initiative (BFCI): this a strategy that promotes exclusive breastfeeding practices through advocacy, training on infant and child nutrition and promotion of food security. The BFCI is being implemented in two hundred and sixty-three communities reaching 50,000 children. Currently, 8 men and women in each community serve as Village Support Group members who are trained on the strategy. Coverage of training is at 40%.
- Nutrition Surveillance: this is undertaken at establishing the nutritional status of Gambian children. The findings and recommendations of this exercise lead to the implementation of specific nutrition interventions.
- Micronutrient supplementation: This includes the administration of vitamin A to postnatal mothers and children from 6 months to 5 years. The national coverage of vitamin A supplementation is 52.3%.
- Salt Iodization: is geared towards the control and prevention of iodine deficiency. Currently only two salt production sites are producing iodized salt but NaNA is working towards attaining 80% consumption of iodized salt.

Despite these interventions, malnutrition still persists as 4% of children nationwide are wasted, 17% undernourished and 17% stunted.

The provision of potable water through boreholes, wells, and hand pumps is community based meaning that children within all communities covered are expected to have access to safe water through community water supply facilities. At present 30% of the population do not
have access to safe water supply and over 60% of the population lack access to proper sanitation.

The Department of state for health is charged with the responsibility for the provision and maintenance of quality health services for the people of the Gambia and children are no exception. Among the services available for children are:

- **Expanded Programme on Immunization (EPI)** which include the immunization of all children against childhood illnesses such as Hepatitis B, Haemophilus influenza type, Tuberculosis, Diphtheria, tetanus, pertussis and poliomyelitis. The national coverage for immunization is over 80%.
- **Reproductive and Child Health (RCH) services**: which include vaccination of antenatal mothers against Tetanus toxoid (coverage is 72%), growth monitoring, Birth Registration, health education and screening of children. The coverage for growth monitoring of children age 0-18 months is 80%.
- **Integrated Management of Childhood Illnesses (IMCI)**: this is currently limited to two divisions – 35,000 children in CRD and LRD benefit from this strategy. Nationally three other administrative divisions are not covered. This strategy promotes the holistic management of children with infections or disease condition.
- **Pediatric services** are also available for children, which include among others, the provision of pediatric drugs and pediatricians.
- **Services are available for the prevention of parent to child transmission of HIV/AIDS.** This is however limited to 13 facilities including four private facilities.

Reliable data on coverage of service for young children to do the costing of the Policy has been generally difficult to come by. Thus, the best possible estimates generated from available sources were used. These were gathered from the central Statistics Division, the Departments of State for Education, Health, Local Government & Lands and the National Nutrition Agency.

Most of the children 0-6 years have not been benefiting from the holistic development of services to enhance a good start to life.

3. **Principles underlying the Policy Framework**

The issue of poverty alleviation is dominant in the Gambia’s PRSP strategy. This policy therefore, will contribute to its renewed offensive on poverty by targeting strategies for the poorest and underprivileged young children and families. Children and families in remote and deprived regions of the country will be especially targeted with an overall national coverage of 40% of the total number of children 0-3 years and 0-6 years. As indicated earlier, sectoral policies and interventions have not adequately addressed the holistic needs of children as such this policy framework will complement the overall sectoral and national development plans and thus lay emphasis on building on existing structures and sectoral polices, promoting the integration of services to comprehensively meet the needs of young children. In this way it is envisaged to strengthen capacity in ECD and ensure efficient use of resources through
coordinated programming, implementation, monitoring and evaluation. Also the gaps in the sectoral policies would be addressed through increased synergy to be borne by the inter-sectoral approach advocated for in this Policy framework.

It should also be noted that there is growing awareness on the government’s intention of improving primary school education in order to meet the EFA, PRSP and MDG goals. This policy therefore advocates for appropriate budgetary consideration and attention needed to give children the best start to life and a smooth transition to Primary school.

4. The costing model and the different scenarios for the expansion of ECD by 2015

The costing model used in that exercise assumes certain basic elements that are necessary to indicate the total resource requirements for a given coverage and quality of ECCD services. It looks at population figures beginning now up to the year 2015 and depending on an agreed coverage it provides real costs and total revenue to be realized over that time frame. Such costs may or may not be affordable and it makes room for trade-offs in terms of either reducing the coverage and maintain quality services or reduce quality and maintain coverage. In both scenarios sustainability of the services are not compromised.

In the following scenarios the basic assumptions relating to level of funding that can be mobilized from the Education budget and the other sectors such as Health, Department of Community Development, NaNA and Water Resources are indicated as percentage of the GDP of the country. Also included is the possible coverage for the different age cohorts. This costing therefore serves as a useful tool for decision makers in making appropriate decisions and choices of services for children for their holistic development.

**Scenario I**

This scenario outlines a total ECD service coverage in the year 2015 of 40 % of the population of children under 0-3 years (66,000 children that benefit from ECCD services) and 3-6 years (84,000 children that benefit from ECD services, of which 54,600 from the community-based support systems.

This scenario assumes that 5 % of the total Education sector recurrent budget and 0.09 % of GDP to support the recurrent resources of the sectors such as Health DWR, and DCD will be mobilized in 2015. To achieve coverage of 35 % enrolment of children aged 3-6 years in formal pre-schools, 70 % in formal private preschool, with 65 % in community based systems, this scenarios gives a total public resources of 48.3 million dalasis and a spending of 77 million dalasis by the year 2015. This shows clearly that there is a funding gap of 28.7 million dalasis meaning that resources are inadequate to meet the desired coverage and quality of services. In all subsequent scenarios, as can be seen in the table the resources base as well as the coverage and quality of services have been changing to provide us with a reasonable scenario that is feasible and affordable.

Attached for your review is the summary of the 5 scenarios.
### Scenario II

This option keeps the quality of services as in scenario I, but recommends a reduction in coverage in both 0-3 years and 3-6 years since the coverage of 40% in scenario I is not affordable. Thus reducing the coverage to 28% in 2015 for both age cohorts and maintaining a 35% enrolment in formal preschools (85% for formal privately financed preschools, 15% enrolment in publicly financed preschools), and 40% enrolment in community-based preschool system; the model gives total public resources of 48.3 million dalasis and a spending of 48 million dalasis by 2015. This scenario presents an affordable cost with a reduction in coverage (by reference with scenario I), while keeping the quality of services; but scenario II offers a balance between resources and spending (it is financially sustainable).

### Scenario III

The third scenario explores the possibility to adjust marginally down the quality of service (by reference with that in the two previous scenarios). The consequence is that it allows an increase in coverage from 28% to 32% for the two age cohorts, amounting to gains respectively of about 6,000 and 9,000 in the numbers of children that would benefit from ECCD services in the two age groups. The resulting effect when the model is run is that 48.3 million dalasis will be mobilized and spending will be maintained at 48 million dalasis as in scenario II. This model presents an even better argument as the coverage for the population aged 0-3 and 3-6 years have been increased without any corresponding increase in terms of the costs. This scenario therefore presents a reasonable situation in which specific activities in the policy could be addressed with affordable costs without compromising quality and sustainability.
Scenario IV

In this scenario the proportion of the recurrent budget for Education for ECCD activities in 2015 (preschool) is reduced to 4% (from 5 percent in the three previous scenarios) and the public recurrent resources of the other sectors also reduced to 0.07% of the country’s GDP in 2015 (the figure was 0.10 percent of GDP in the previous scenarios). The consequence is that the amount of public resources anticipated in 2015 declines from 48 million dalasis in previous scenario to 38.3 million dalasis in that scenario. While keeping the quality of services as in scenarios II and III and keeping the structure of enrolments between the different types of structures for the 3 to 6 age-group (65% in community based centers and 35% in formal pre-schools; and within the formal system, a distribution of 15% in publicly financed pre-schools and 85% in privately financed pre-schools), the reduction in resources implies a reduction in coverage from 32% for both age cohorts to 29%; In such circumstances, recurrent spending would be brought down to 39 million dalasis, remaining in line with the resources likely to be made available in 2015 in this scenario. This scenario IV, obviously less ambitious than the previous scenario, presents however a progress in the availability of ECCD services by reference with the actual situation; it, as can be seen, can apply in a situation where resources for ECCD would be scarce or not easily forthcoming.

Scenario V

This scenario presents the case that more resources will be available and thus more could be done in terms of increasing the coverage and the quality of the services without compromising sustainability. In this scenario, which implies that 6 percent of the overall budget for education be devoted to preschool and that 0.12 percent of the GDP of the country be allocated to cover other than preschool ECCD activities, a total amount of 60.3 million dalasis is made available to ECCD in 2015.

In scenario V, improvement is considered in the quality of services (number of children per teacher in both public pre-schools and community-centers is reduced from 35 in scenarios III and IV to 30 in scenario V, while the resources per child in the 0 to 3 age group are increased from 4 to 5 dollars; then, the proportion of children that can benefit from a nutrition program increases from 15 in scenario IV to 20 percent in that scenario); the distribution of enrolments by type of structure for the 3 to 6 age group is remained unchanged. These improvements in the quality of service increase the cost per child but it remains however possible to increase at the same time the coverage of the system that moves up from 32 percent in scenario III and 29 percent in scenario IV to 35 percent in that scenario for both age cohorts. This results in a total recurrent expenditure of resource of 60 million dalasis in 2015 that matches the amount of resources estimated at 60.3 million dalasis at the same date. Again this scenario is realistic provided more funding is available. We see here that with an increased funding more children will be covered and the quality of services will be improved and sustained.

Over and above, examining all the five case scenarios, scenario III presents the best option for the policy framework. In this scenario we have seen that it is possible to have a reasonable coverage with modest costs, without compromising quality of services and sustainability. It is therefore recommended here that efforts should be made to provide these requisite but modest
resources to cover ECCD services for children in the age cohorts mentioned here. Obviously if the resources envisaged in scenario V could be made available (they remain probably within reach), this would help to gradually build a better ECCD system between now and the year 2015. It is however to be stressed that scenario V covers only 35 percent of the young population in 2015 and that more ambitious programs could be contemplated; this would obviously require that additional public resources be mobilized.

In any event, it is important to note that the technical national team has produced 5 scenarios in this note, but that other scenarios can easily be estimated to help the decision maker upon demand. The tool (simulation costing model) is available to explore further arrangements concerning both coverage and the quality of service on the one hand, the balance between spending and resources on the other.

When a structural decision is made by the government, a detail implementation plan, with specific activities that will contribute to the attainment of the stated objectives for the two age groups (children 0-3 and 3-6 years respectively) by the year 2015, will be developed.