



Evaluation Report

National Action Plan 2013 - 2014 Early Childhood Care and Education

March 2015

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Acronyms and Abbreviations

AER	Auto Acoustic Emission Screener
ANC	Ante Natal Clinic
BFHI	Baby-Friendly Hospital Initiative
CEO	Chief Executive Officer
DA	District Administrator
DDSG	District Disability Support Group
ECCE	Early Childhood Care and Education
ECD	Early Childhood Development
EFA	Education for All
IECD	Institute of Early Childhood development
NGO	Non-Government Organisation
NRA	Neighbourhood Recreational Activities
SABER	Systems Approach for Better Educational Results
SITE	Seychelles Institute of Teacher Education
SELF	Seychelles Early Learning Framework
MLUH	Ministry of Land Use and Housing
NAP	National Action Plan 2013 – 2014 for Early Childhood Care and Education
NCCE	National Coordinating Committee for Early Childhood Care and Education
SF	Seychelles Framework for Early Childhood Care and Education
UNESCO	United Nation Education, Scientific and Cultural Organisation
UNDP	United Nations Development Programme

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Section 1: The Setting

Introduction

The Dakar World Education Forum held in 2000 reaffirmed the world's determination to continue to work towards the Education for All (EFA) goals that were established by the Jomtien World Conference on Education in 1990. The Dakar declaration emphasized that to achieve EFA by 2015 would require, in addition to increased participation, a general increase in the quality of education and this would include expanding and improving Early Childhood Care and Education (ECCE) (Goal 1) so that all children will benefit from improved provision with measurable outcome.

At the first UNESCO World Conference on Early Childhood Care and Education, held in Moscow in 2010, the world's decision to adopt a broad and holistic approach to ECCE for all children aged zero to eight years of age was ratified. It was emphasized that ECCE is an indispensable foundation for lifelong learning, with proven benefits in health, nutrition, improved educational efficiency and gender equity, greater employability and earnings, and better quality of life; and governments were encouraged to develop national plans for ECCE. In 2011 in the First ECCE Conference in Seychelles, Dr. Marope praised the Government of Seychelles for making a decisive move in placing ECCE on the national agenda by establishing the Seychelles Framework for ECCE (SF) which was being launched.

SF was developed by a multi-sectoral team. It was inspired by international research findings, UNESCO documentation, and other countries' existing frameworks but it is deeply rooted in the context of the socio-economic realities, parental needs and childcare provision of Seychelles. It outlines the new vision, principles and priorities of ECCE in Seychelles, delineates broad expected outcomes and proposes monitoring and evaluation structures.

The National Action Plan 2013 – 2014 for Early Childhood Care and Education (NAP) emanates from the Seychelles Framework and is a short-term response to give momentum to ECCE. It adopts a multi-level approach to respond to the challenges of integrating ECCE across organizational divides and promoting collaboration amongst sectors. NAP is the official document that provides strategic direction to the harmonization of ECCE policies, programmes and services in the country. Marope (2013) in the Second Biennale Conference on ECCE in Seychelles, when NAP was

launched, asserted that NAP was well aligned with the principles and goals of global holistic child development initiatives, and predicted that the implementation of the principles and goals of the NAP would serve as a platform for evidence-based ECCE policy planning.

The coordinating mechanism of NAP is located within the Institute of Early Childhood Development (IECD) that has been described as the anchor for ECCE (World Bank Country Report on ECD, 2013), and one of the tasks of IECD is to evaluate the NAP which has been in the process of implementation for the past two years.

Aim of the Evaluation

The main aim of the evaluation is to provide information on the level of implementation of the NAP in relation to the following Priority Areas: ‘Realign ECCE policies and programmes’; ‘Expand access’; ‘New financing mechanisms’; ‘Mechanism for early detection and intervention’; ‘Build child-friendly communities’; and ‘Provide quality parenting’. More specifically the evaluation will seek to:

- assess the relevance of the NAP in relation to the country’s aspiration for ECCE
- assess achievement in relations to strategies and activities in each sector and across sectors
- relate achievements to stated expected outcome
- determine the impact of the NAP on ECCE
- Make suggestions for future planning

Research Approach

A generic evaluation framework (Figure 1) was designed to capture the following sequences: strategies and activities, specific products, resulting outcomes, and possible impact.

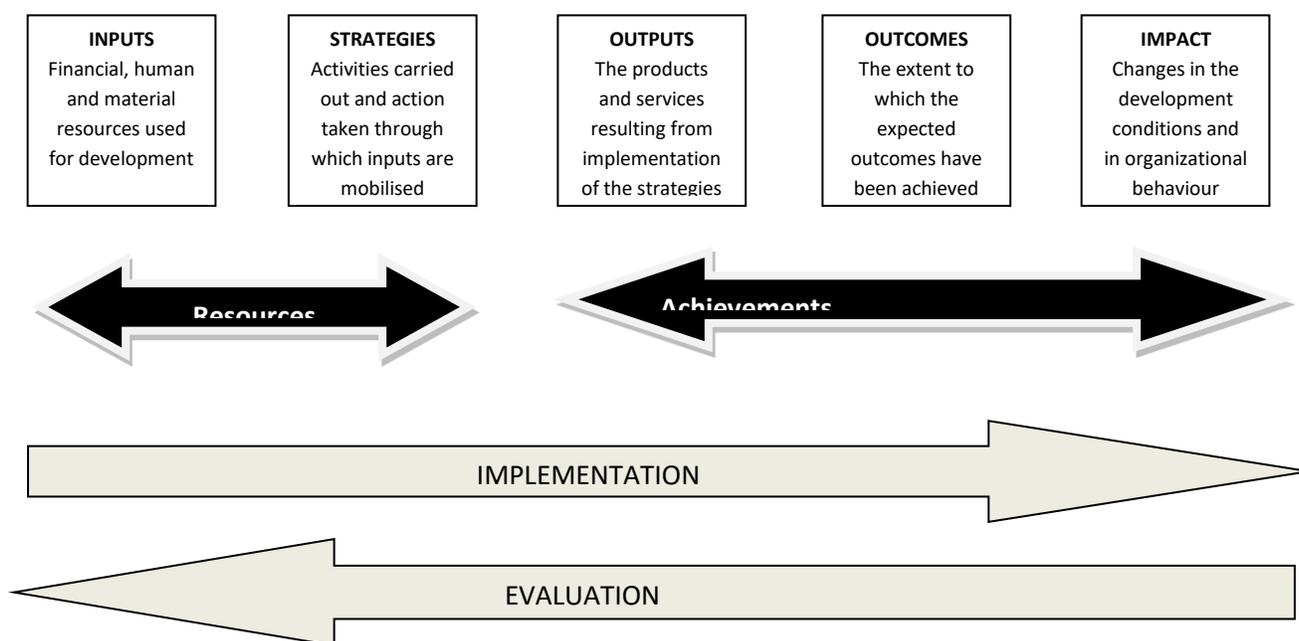


Figure 1: Evaluation Framework (Adapted from United Nations Development Programme, 2006)

Data source

NAP was implemented through the ECCE Technical Team in the four line Ministries for the Education, Health, Social Affairs, and Community Development and Sports sectors, and relevant statistical data have been collected from the sectors (including IECD). Moreover, project documents, programme information, documented reports, guidelines and frameworks, legal documentation have been reviewed as evidence of achievements.

More numerical information has been obtained from a questionnaire targeting the Technical Team Members. The questionnaire consisted of three parts. In the first part, questions on specific achievement outcomes for the Priority Areas for which strategies have been developed by the sector were posed. The second part contained questions about IECD in its coordinating and implementation role. General questions on the plan itself, the operational management of the plan and the impact of the plan were included in the third part.

The questionnaire has been used to support statistical indicators, documentary and qualitative information as a measure of progress, achievement of milestones, assessment of the achievement of stated outcomes, and as a proxy measure of impact. In designing impact indicators the following have been considered: changes in resource inputs and working style; and changes in service delivery and target groups.

Data Collection

Data have been collected using four main methods: document compilation, data extraction, mini-survey and interviews. Each Technical Team Chair completed a form which identified the Goals and Priorities for their sector, the strategies which have been implemented, the list of related documents, and statistical information available. The completed form was accompanied by a compilation of relevant documents. In addition the questionnaire was administered to all Team Members followed by a focus group interview. Moreover, individual in-depth interviews were carried out with the Chairperson of the Technical Team and the CEO of IECD.

Analysis

The discussion on the assessment of achievements in this report integrates the analytic process and synthesizes information on the implementation of the plan. It identifies emerging themes and extends the discussion to generate a reflection on possible impact of the overall plan, and to suggest follow-up action.

Relevance of the Priority Areas

The NAP forms part of the national drive to place early childhood development at the forefront of the country's priorities. In The Seychelles Framework for Early Childhood Care and Education four main themes have emerged as national concerns. Reference has been made to the:

- a) Realignment of policies and programmes to take into consideration new research findings in the critical nature of early childhood development experiences;
- b) Necessity to take into consideration changing demographic patterns and social life in Seychelles by supporting families in the upbringing of children and through community provisions;
- c) Importance of protecting children from some of the impact of the by-products of modernization, globalization and modern lifestyle;

d) Requirement of common standards in service delivery to reduce fragmentation and duplication between sectors; the improvement of provisions for children with special needs and disabilities; and the need to address issues of accountability and data availability.

NAP is based on the nine Priority Areas identified in the Seychelles Framework for ECCE. It is stated in the NAP that these priority areas have been selected on the basis of wide consultation by the sectoral ECCE Technical Teams (appointed by the Ministers of line Ministries). Moreover, many of the priority areas were linked to on-going activities within those Ministries. It is understandable that the NAP had a sector focus with the intention of developing collaborative partnership. This in itself was a challenge necessitating a different approach to the guarded isolation in which many sectors were delivering ECCE services. This will become clearer as the analysis develops.

The eight Priority Areas which have been adopted by the different sectors have been summarized in Table 1. The ninth priority area -to promote research - has been noted as cross-cutting within the implementation period. However, the information in the table has been subjected to some adjustment following a post-validation workshop and to a lesser extent during the implementation phase. For example, IECD worked on the ‘inventory of terminologies and definitions’ and attended to the ‘Childminding services’ which were originally included in the plans of the Education and Social Affairs Sector, respectively; the Social Affairs sector concentrated on the Children’s Act and left out the training of professionals in the principles of the Convention of the Rights of Children, and the development of services for absent parents. The Department of Community Development and Sports included the “Baby Gym” activities within the plan as Ministerial responsibilities shifted.

Priority 1: Realign ECCE policies and programmes

The need to attend to policies and programmes which can affect the development of children is quite explicit in the ECCE Framework. With emerging research findings, it has become necessary to review policies to ensure that they are in harmony with ECCE principles and vision. Addressing this Priority was also expected to stimulate intersectoral coordination amongst sectors.

As it can be seen from Table 1 all sectors attended to Priority 1. The Education Sector intended to review legislation, regulations, policies and guidelines to provide an integrated vision and approach to the needs of children aged 0 – 7⁺. Moreover, the Sector was to engage in curriculum revision for all ECCE providers and teachers to ensure continuity in provision for child development and early learning, and to ensure harmonization of care and education. This priority is also featured in the Health Sector plan where revision of guidelines is included – the sector intended to move a step beyond and increase public awareness regarding these guidelines as a means of advocating for ECCE. On the other hand, the Social Affairs Sector was to focus on revising the Children’s Act whilst the Community Development and Sports Sector made special reference to community initiatives and community life guidelines. As part of the coordinating process, IECD intervened to implement the Terminology Project to review operational definition of Early Childhood Services to reflect new roles and “eliminate erroneous connotations”.

Goal/Priority 2: Expand Access

Seychelles has been commended for its excellent record of educational access for all. However, concerning children aged 0-3 years, access to ECCE are somewhat limited. The Sector for Community Development and Sports wanted to address this in two ways: Firstly, to increase the number of Day Care facilities at community level, and, secondly, to provide a range of out-of-school activities targeting children in the 0-3 age group. The need to build more Day Care Centres had been expressed by Government (Cabinet Paper, 2008). The Government was concerned with the large number of children under 3 years of age who were not in regulated facilities such as Day Care Centres. It was noted in the ECCE Framework that only “about 21.9 per cent of the total estimated population for the age group 0-3 was benefitting from Day Care Services.” Moreover, only half of the districts had Day Care coverage. The Sector for

Community Development and Sports wished to make a difference by increasing access to Day Care Centres in the community.

The necessity to increase the number of options for children as an extension of school activities had already been a priority for the Department of Community Development and Sports. The Department was operating Community Life Programmes, such as, the Neighbourhood Recreational Activities (NRA) for the 5-15 age group children. In the NAP, the Community and

Sports Sector for ECCE decided to lower the age for those activities and make provisions for a range of options “to meet the needs and expectations of parents”. The following ECCE children grouping were specifically targeted: child minding services, Day Care Centres, Pre-schools, after school clubs, playgroups, holiday clubs.

Goal/Priority 3: New financing mechanisms to increase investment and resources.

One of the challenges in the provision of ECCE was debated in the National ECCE Conference in Seychelles (2011) and it concerns the financing of ECCE. It was pointed out that “there should be a serious commitment by the Government to manage funds... .” A range of options was suggested, such as a special budget for ECCE and establishing partnership with private sector for funding. These suggestions were translated by the Education and Health Sectors, respectively, as “ensuring adequate resourcing and financing of ECCE from state budget based on improved statistical information”, and involving the private sector in contributing towards resources.

Goal/Priority 4: Improve and expand training and professional development.

The training of teachers for Early Childhood level has not been given adequate attention. Leste, Valentin and Hoareau (2004), showed that graduate teachers did not form part of the teaching force in Primary Schools which included children between 5-7 years of age. In addition, over 21 percent of teachers in Crèche and Primary I did not have a teacher training qualification (Choppy, Benstrong and Leste, 2012). Nonetheless, with the opening of the Seychelles University, the first cohort of newly-trained Early Childhood teachers graduated in the year 2013. It is perhaps, in that context that the Ministry of Education wished to expand its training programme and develop partnership/mechanism with training institutions to offer on-going relevant and high quality ECCE training to respond to the needs of children (0 to 7+ years). Moreover, the Seychelles Framework recognises that staff qualifications and professional development for all sectors, especially, those working with children in the 0-3 age group, as a major challenge in the provision of ECCE.

Goal/Priority 5: Mechanisms for Early Detection and Intervention

Information on child development outcome has remained problematic, nationally. This has restricted early detection of delays and timely remediation action. Data on young children’s early

literacy skills has only recently been collected through the ALAP Project (Choppy, Benstrong and Leste 2012). However, information on development outcome can be obtained from well-child visits, school health programme, and the Denver Development Screening Test (DDST). The compilation and analysis of these data would be of utmost importance to improve ECCE in Seychelles.

Three Sectors, Education, Health and Social Affairs took up this challenge in the NAP. The Education Sector which had already developed a profiling system, had the intention of extending it to include health-related aspects; The Health Sector had ambitious plans to review the “Health to Road Card” to keep appropriate profiles on children that can be shared with professionals and parents at appropriate times, conduct mental, psychological, and psycho-motor screening for all children entering Crèche and Primary classes, followed by appropriate early intervention, and strengthen newborn and early childhood screening programmes. The Social Affairs Sector reactivated the designing of a Risk Indicator Framework and initiated the task of strengthening antenatal and post natal parenting programmes. The sectors had the intention of gathering appropriate information to monitor the cognitive, physical, emotional, and social development of young children.

Goal/Priority 6: Improve Accountability and Service Delivery

The need to develop or revise core standards and suitability checks to regulate all areas of ECCE is well articulated in the Seychelles Framework. One salient concern has been the childminding services for 0-3 age-group children. In 2008, dissatisfaction with the large number of children in the 0-3 age group who were in other “parallel services” (including childminding) most of which were not “managed by any official organization” was expressed in a Cabinet Memorandum on Day Care Projects. Suggestions were made to carry out a survey, the outcome of which “would guide Government in further developing policy” to make more provision for the 0-3 age-group. Although at first, this priority was under the purview of the Social Affairs Sector, IECD in promoting research to shed some light on the status of this informal service, in a bid to find out what would be necessary for quality provision in this service, implemented a research study. Subsequent to the research, IECD was mandated to regulate childminding services and it took over the task of working towards assuring the quality of those services.

Goal/Priority 7: Build Family and Child Friendly Communities

The vision of vibrant and committed communities providing strong family support and enabling environment for the overall development of children has been explored in the ECCE Framework and a range of child-friendly initiatives has been mentioned. With national programmes such as Social Renaissance and Living Values, the Government has shown its commitment to community engagement, community solidarity and the need to stimulate children to set personal goals and targets and motivate their sense of achievement. It is the Department of Community Development and Sports which through the district administration structure encourages, designs and supports community-based projects. Within its Neighbourhood Recreational Programme (NRA), the Community Development Sector for ECCE intended to expand innovative holiday and after school programmes for children, encourage NGO participation, and promote the use of child-friendly zones in the community.

Table 1: Summary of the main activities of the National Action Plan for ECCE 2013-2014

Priority/Goal	Education	Health	Social Affairs	Community Development and Sports	IECD
1. Realign ECCE Regulations, Policies and Programmes	a) Review existing regulations, policies and guidelines b) Develop/revise programmes for 0-7+	Review existing regulations, etc... to provide an integrated approach to ECCE	Review Children's Act	Review regulations and guidelines in regards to community life programmes and projects	Inventory of terminologies and definitions
2. Expand access				a) Day Care Services in districts b) Community initiatives – NRA, Kid's Gathering, Baby Gym	
3. New Financing Mechanisms	Ensure adequate resourcing and financing, of ECCE	Access to effective Aids for children with special needs			
4. Improve and expand training and PD	Review/ revise teacher education to incorporate ECCE				
5. Mechanisms for early detection and intervention	a) Profiling system to include health aspect of ECCE b) improved advisory service to parents	a) Road to Health Card b) Pre-crèche and pre-school screening c) strengthen: screening for hearing, Risk Indicator Framework, Baby Friendly Hospital initiative	a) Risk Indicator Assessment b) strengthen antenatal and postnatal programmes		
6. Improve accountability and service delivery					Childminding Services
7. Build family and child friendly communities				a) Expand holiday activities options b) District environment assessment, green spaces, safe zones	
8. Provide quality parenting programmes			Produce quality parenting programmes		
9. Promote research	Cross- cutting (IECD)				

Section 2: Outcome

The NAP was a short term plan to establish an ECCE focus in the different sectors and propel the sectors to initiate actions and strategies that would lead to improved provision and services for ECCE children and their parents. The sectors incorporated within their plans actions relating to policies and programmes, financing and budgeting, detection and intervention, accountability and monitoring, training and access, and community and parenting. Within the plans expected outcomes derived from the priority areas had been set. The results presented in this section is intended to assess achievements in terms of output and the level of progress towards the expected outcome for the implementing ECCE Sector, and, therefore within that context *factors which has inhibited or facilitated achievement of expected outcome are also identified*. They represent issues which would need to be addressed for future planning.

Three types of indicators have been used to provide a measure of progress towards the expected outcome: the perception of Sector Technical Teams of the level of achievement, documentation of achievement, and more direct quantitative data, when available. Technical Team Members were presented with the ‘Priority/Goals’, which they identified for their sectors, the ‘Strategies’ which they developed, against ‘Expected Outcome’ which had been stated. The judgement ratings were as follows:

To a large extent =4

To some extent=3

To a limited extent =2

Not really achieved=1.

The mode was used as measure of the level of achievement of the outcome. The discussion arising from the data was matched with documentary evidence and numerical information.

Education Sector

In Table 2 the results for the 7 outcomes expected for the three priorities adopted by the Education Sector have been presented. It can be seen that out of the 7 outcomes, one has been judged not to have been achieved (Outcome V), limited progress has been recorded for Outcomes I, II and VII, some achievement can be noted for Outcome VI, whilst a high level of achievement have been registered for Outcomes III and IV.

It is understandable that Outcome V (to have trained personnel for ECCE) has not been achieved mainly due to organizational reform in delivering teacher education. The precipitated system change from teacher training being undertaken under the aegis of the University of Seychelles to the re-establishment of a teacher training institution, Seychelles Institution for Teacher Education

(SITE) within the purview of the Ministry of Education has retarded the strategic linkages between institutions to develop plans to ensure that teachers and care workers in ECCE are qualified and competent. “A Consultancy Agreement for the development of Teacher Assistant training package between Early Childhood Section and SITE has yet to be signed”.

However, although preliminary activities have been initiated to begin to address Outcome I (to review policy documents), Outcome II (programmes for the 0-3) and VII (information to parents with disabled children) these have not been followed up.

Table 2: Outcome results for Education Sector

Priority	Expected Outcome	Achievement
1 Realign ECCE, Regulations, Policies and Programmes	(I) Harmonised laws, regulations, policies and guidelines which ensure that all sectors cater effectively for the needs of the age group 0 to 7+	Achieved to a limited extent
	(II) Comprehensive child-friendly programme which cater effectively for the holistic development of children 0 – 3 years	Achieved to a limited extent
	(III) Comprehensive curriculum frameworks which cater effectively for the holistic development of pupils from crèche – Primary 2	Achieved to a large extent
3 New financing mechanism to increase investment and resources	(IV) Approved budget allocation which will adequately cater for all ECCE resources.	Achieved to a large extent
4 Improve and expand training and Professional Development	(V) Qualified and competent ECCE personnel who contribute towards the development and well-being of children from 0 – 7+	Not really achieved
5 Mechanism for early detection	(VI) Comprehensive profile of every child available, ensuring shared information to all stakeholders	Achieved to some extent
	(VII) All parents are aware of established procedures and can access services to seek advice and help for their children.	Achieved to a limited extent

It may be presumptuous to extract reasons for the tardiness in policy review (Outcome I) but perhaps a summary of the views of some Technical Team Members might be elucidating. The following are some of their statements accompanied by analytic interpretation:

1. “The review of the policies should have involved other sections of the Ministry” – *lack of inter-divisional and inter-section articulation.*
2. “Policy documents are many and bulky ... the committee only looked at gaps in the policies” – *lack of prioritization.*
3. “Only two documents were reviewed, the Education Act and National Curriculum Framework” with very little inputs from the ECCE Team – *lack of coherence.*

These are pointers which seem to indicate that ECCE has not yet been integrated within the Ministry of Education.

Regarding Outcome II and VII limited progress has been recorded and this may be due to reasons associated with structural changes and limited planning. Activities for Outcome II, which is related to realignment of programmes to focus on ECCE, has not been realized as other urgent systemic events had to be attended to while progress towards achieving Outcome VII was retarded since the guidelines for parents with children with disabilities have only recently been produced and need to be pursued further.

For Outcome II (comprehensive child-friendly programmes), progress has been delayed because of lack of follow-up action during which time the activities proposed were overtaken by events. Consultancy report on four Day Care Centres was produced to provide a model for situational analysis and the development of tools to assess Day Care Centre Operation in Seychelles. This was to lead to a revision of programmes for the 0-3 age-group (specifically in Day Care Centres). However, with the implementation of the nation-wide survey on childminding and the resulting policy consultation, it was recommended that an Early Learning Framework which would be a pre-requisite for the development of subsequent programmes for children aged 0 to 3 years (in Day Care Centres and Childminding Establishments) should be developed.

For Outcome VII, the guidelines document is still in draft form. However it contains very detailed information concerning assessment and referrals, intervention and support, the legal rights of parents, and information on the emotional consequences of having a disabled child. *Nevertheless, in order to make further progress towards the achievement of this outcome not only should procedures for parents to access assessment and intervention services and to seek advice be fully developed but also sensitization sessions had to be organized and the views of parents on the effectiveness of the guide would need to be sought.*

The progress made towards achieving Outcome VI, rated as 'Achieved to some extent', has some merit. A detailed termly checklist for children in Crèche Year I and Year II has been designed. It is intended to trace the progress of children and covers cognitive, psychomotor, language and pre-mathematic development. It evolves from the Early Learning Framework since it uses the main learning areas of the framework. *It would need piloting and further consultation.*

It is pleasing to note the two major achievements (Outcomes III and IV). The two outcomes have been judged by all the Technical Team members (except for one non-respondent) as having been largely achieved. It is necessary to describe some of the key elements which have contributed to such responses.

A comprehensive curriculum framework for Crèche to Primary II was expected for Outcome III, and the SELF, Seychelles Framework for Early Learning has been produced. Through extensive consultancy work which included a major intensive developmental workshop, a draft Early Learning Framework was produced. The Seychelles Early Learning Framework (SELF) has been developed within the educational policies and educational context of Seychelles. Inclusion, Special Needs Education, family and community participation have been addressed. Five chapters have been devoted to the concept of early learning and the facilitation of early learning activities and programmes. The nine learning areas of the National Curriculum Framework have been reconstituted as six learning areas: Well-being, Identity and Belonging, Communication and Language Development, Early Mathematics, Arts and Creativity, Knowledge and Understanding of the World, to provide a comprehensive framework for early learning from conception to 7+. The SELF is intended to provide direction to the development of specific programmes in Day Care Centres, Childminding Establishments, Crèche, Primary 1 and Primary II classes. With such accomplishment, it is to be expected that Outcome III has been judged as largely achieved by respondents in the Education Sector. The process of nationally validating the SELF has begun. *However, usage of the SELF by all stakeholders would need further consultation and general agreement.*

An approved budget documentation has become available and this accounts for the high judgment rating for Outcome IV. The Performance Programme Based Budgeting (PPBB) approach promoted by World Bank and being piloted by the Ministry of Education has contributed greatly to this result as financial resources have been allocated for the implementation of the Programme for Formal Early Childhood Care and Education in the Ministry of Education. Moreover, outcome indicators have been set which will provide information on performance. *It has been suggested that the budget should be made visible to the ECCE Technical Team.*

Health Sector

The Health Sector has anticipated the achievement of five outcomes. As it can be seen from Table 3, as judged by Technical Team Members, two of those have been largely achieved, two have been achieved to some extent, and one has been achieved to a limited extent.

Table 3: Outcome results for the Health Sector

Priority	Expected Outcome	Achievement
1 Realign ECCE, Regulations, Policies and Programmes	(VIII) Strong comprehensive policies enacted providing access to reproductive, maternal, newborn and child health care	To some extent
3 New financing mechanism to increase investment and resources	(IX). Improved access for every child to effective aids, ensuring the fulfillment of their potentials and improved learning	To a limited extent
	(X) Comprehensive profile of every child available, ensuring shared information to all stakeholders	To some extent
	(XI) All newborns have their hearing screened at birth	To a large extent
5 Mechanism for early detection	(XII) Maternal and child care strengthened through improved breast feeding	To a large extent

The expectation of improved access of children with special needs to effective aids has not been realized (Outcome IX). Some action has been taken through the implementation of a survey to identify the children needing aids and to make decisions about the kinds of aids that would be needed. However, after the collection of data, the project met with some major human and financial resource problems, to analyse the data, to write the survey report in order to develop the necessary mechanism for children to access the appropriate aids. It can be assumed that the judgment ‘To a limited extent’ is associated with the survey activities which involved questionnaire design, training of data collection and the data collection process itself. In fact, one respondent judged the outcome as ‘not really achieved’ which is probably a better judgment since there is only an output indicator, that is, the database the content of which is still unknown.

In the opinion of the respondents, Outcome VIII and X has been achieved to some extent. It may be necessary to examine some of the strategies and activities which have been implemented in order to assess progress towards these outcomes.

For Outcome VIII the Immunisation Policy has been revised and drafted, validated and is being implemented. However, although the “Routine Post Natal Care Guidelines for Women and their Babies”, and the “Guidelines for the National Routine Child and School Health Services” have been updated they still need to be reviewed and validated.

The intended strategy in order to achieve outcome X was to extend the Denver Development Screening Test (DDST) for children in Crèche and the first two years of primary education. Within

the revised school health programme, School Health Nurses would be responsible for the administration of the test. However, although School Health Nurses for the 14 Health Centres underwent a refresher training programme, conducting the testing sessions for pre-school and primary school children met with human resource difficulties and planning problems. Therefore, “a comprehensive profile of every child is not available.” *Besides, in order to be able to share the profile of children from the DDST there need to be a revision in the way the data is captured and presented.*

Table 4: Number of children undergoing AER Hearing Test

Months	No of Babies Born	No. of Test	Test Passed	Retest	Test Failed	Referred
Jan -March	360	354	291	63	0	0
April-June	391	454	338	111	5	5
July-Sept	388	348	266	78	2	2
October	121	155	128	26	1	1
Total	1260	1311	1023	278	8	8

Source: Quarterly Report from Maternity Unit, Seychelles Hospital

Conversely, the Hearing Test Project has been very successful and, it is not surprising that all respondents rated Outcome XI as achieved ‘To a large extent’. The following are strong indications of success: An effective proposal have been drafted for the procurement of an Acoustic Emission Screener, funds have been mobilized, 23 nurses and midwives have been trained and certified by a competent audiologist, an early hearing and intervention guidelines in accordance with international specification have been developed.

The statistics in Table 4 confirm the level of implementation of the hearing test. Data were collected for the first three reporting quarters in 2014 - the last quarterly report being due in December. From the second and third column it can be approximated that over 100 newborns were being born and tested every months. With more babies born between July and August, these figures were somewhat higher. Some of the inflated figures of the numbers tested against the number of births are probably due to babies born just previously to the testing period. It is useful to note that close to 300 babies did not pass the test the first time, and were therefore re-tested (third column before last) and those who failed the test after the re-test were referred (last column). This represents less than one percent of newborns. Overall, the information collected throughout the Hearing Test Project provides ample evidence of the achievement of the expected outcome.

Similarly, the breastfeeding promotion campaign has worked very well. There is overwhelming agreement amongst the Technical Team Members that Outcome XII has been achieved. With the

descriptive statistics extracted from monitoring reports, it was possible to examine change indicators.

Table 5: Monitoring results on breastfeeding

Year	Information from ANC	Support provided	Breastfeeding rate
	%	%	%
2010	70	69	79
2011	77	75	80
2012-2013	80	83	94

Source: G. Mein (2013) “Breastfeeding Evaluation in the Maternity Unit”, Seychelles Hospital

Just under 2000 mothers were administered a questionnaire on their experience and practice of breastfeeding between 2010 and 2013. Three indicators have been selected from the result of the survey to assess the level of achievement in improving breastfeeding as a means of strengthening maternal and childcare. The indicators as shown in Table 5 are: ‘Information from ANC’, column 2, ‘Support provided’, column 3, ‘Breastfeeding rate’, column 4.

The figures in Table 5 represent the percentage of mothers who acknowledged that ANC (Antenatal Clinic) was the main source of information on breastfeeding, that they received advice and support on such practices as positioning, milk expression and storage from the Maternity Ward, and that they practiced exclusive breastfeeding. What is clear from this table is that for the period 2012-2013 the figures for the three indicators had increased and interestingly enough the breastfeeding rate had augmented by about 15 percentage points compared to 2010. This would provide some evidence that the promotion of breastfeeding as part of the Baby Friendly Hospital Initiative (BFHI) to improve ‘the role of the maternity services to enable mothers to breastfeed their babies for the best start in life’ (Ministry of Health, 2013) has produced some positive results. *A proposal for an external assessment of the BFHI has been drafted* (Bibi, 2014).

Social Affairs Sector

In Table 6 the level of achievement of the three outcomes (column 2), as judged by the Technical Team, expected for the three Priority Areas (column 1) has been shown. A range of activities associated with the three outcomes have been implemented within the sector and, at times, in collaboration with other sectors, particularly the Health Sector. Let us examine in what ways these activities have marked progress towards the achievement of the expected outcomes.

Table 6: Outcome results for Social Affairs Sector

Priority	Expected Outcome	Achievement
I Realign ECCE, Regulations, Policies and Programmes	(XIII) Modern and responsive legislation in place to better protect and safeguard the wellbeing of our children	Achieved to some extent

5. Mechanism for early detection	(XIV) Improved support to children at risk	Achieved to some extent
8. Provide quality parenting programme	(XV) Enhanced quality of parenting programmes	Achieved to a large extent

For Expected Outcome XIII, the focus has been on the review of the Children’s Act. Through a UNDP consultancy, departmental meetings and stakeholders consultation (one of the stakeholders being the National Commission for Child Protection) a draft Bill was prepared. However, consequential amendments were proposed in relation to other Acts (Employment Act, Penal Code, Civil Status Act). The proposed amendments, reformulations, and specific requests from child related service providers have been considered. A Draft Bill has been produced by a special committee in the Social Affairs Department, presented to and approved by the Cabinet of Ministers. The Act is in the drafting process at the Attorney General’s Office. It may be fair to acknowledge that some progress have been made towards the achievement of this outcome.

Originally, the Social Affairs Sector proposed two Expected Outcomes for Priority 5 ‘Mechanism for early detection’. However, activities carried out seemed to relate mostly to one expected outcome, that is, ‘Improved support to children at risk’, in the context of the Risk Indicator Framework, rather than to timely interventions for newborns and their parents. For the sake of clarity, it was decided in the evaluation that participants would respond to the expected outcome as shown in Table 6 (2nd row). Activities linked with parents were considered alongside Priority 8.

The Risk Indicator Framework has been conceptualized as a method to assess the risks and needs of babies, children and young people using a holistic approach. A Risk Assessment Form which is to be used by professionals, particularly, those working with people and the community, has been designed. This Form consists of two parts: Part 1 contains the client’s and the client’s family details (to be filled by the assessor); in Part 2, the assessment details of risk factors are filled out (by the practitioner who receives the referred case). Besides this information of the client, other details such as source of information, behavior checklist, recommendations for action, and case review are included. A detailed manual has been developed for training and as a reference.

Training workshops have been carried out on Mahé and Praslin. It was noted in the training that the risk assessment was especially for early childhood and participants were sensitised to targeting that age group (0-7⁺). Participants ranged from nurses, Public Health Officers, MLUH representatives, Social Workers, teachers and School Counselors. Over 100 professionals were

trained to use the RIF. The training workshops consisted of presentations on Risk Indicator Assessment and Child Protection supported by case studies, group work and plenary sessions.

Implementation of the RIF became official after the launching ceremony in early 2014. So far five risk assessments have been completed by the Social Services Section of the Department and three of those have been referred to the appropriate professional agencies. *One would have expected a more wide spread implementation but some of the challenges as enumerated by the Technical Team members such as human resource capacity, time, work overload of professionals, organizational bottlenecks, unwillingness to provide information may need attention.* Nonetheless, another step has been taken towards improving the support to children at risk and some achievement can be recorded.

The parenting programme was found to be quite promising. Four out of seven respondents rated Expected Outcome XV as achieved to a large extent and three rated it as achieved to some extent. Perhaps, a closer look at some of the indicator of progress might be illuminating.

Firstly, a substantial ante-natal parenting manual for trainers and parents has been produced with the aim of preparing parent-to-be for the arrival of the new baby or babies in the family. The manual addresses some of the psychological impact of pregnancy and having a baby; the importance of nutrition and the dangers of certain substances. It also addresses issues of budgeting, stress management, communication and bonding, and preparation for hospital. It suggests active participatory adult learning methods and can be used as a reference and resource manual.

Table 7: Number of parents or parents-to-be attending parenting sessions

REGION	Jan-March		April-June		July-October		Nov-Dec		Total		
	M	F	M	F	M	F	M	F	M	F	
	English River Health Centre	13	37	22	70	8	31	5	90	48	228
Seychelles Hospital	14	40	34	80	15	33	0	8	63	161	
AnseBoileau	3	38	10	69	16	54	2	55	31	216	
AnseRoyale	13	33	16	54	16	70	20	88	69	245	
Praslin	1	6	0	16	0	0	0	10	1	23	
									Grand Total	212	873

Source: Adapted from the Parenting Report, 2014, from the Social Affairs Department

Secondly, it was possible to have an indication of the level of participation. Table 7 contains figures for the number of parents-to-be or parents who attended the parenting sessions organized in regional areas. A grand total of 1,085 attendances including 873 females and 212 males can be

calculated. It is also apparent that participation had been generally consistent throughout the quarterly periods except on Praslin where there were no participants during the third quarter of the recorded period – communication problem was reported. On the whole, there has been a remarkable increase in attendance during the four quarterly periods, in particular, at Anse Royale (from 46 attendances to 108) and English River Health Centre (from 50 to 95). These figures would lead one to conclude that participants found the parenting programme helpful and this could point to the good quality of the programme.

Thirdly, a post-delivery parenting manual has also been designed to provide interactive sessions with parents. A training of trainer 4-day workshop was carried out in which the following topics were highlighted:

- Communicating between parents, babies and other family members
- Changing responsibilities and relationships, skills on decision making
- Physical and emotional changes reactions to birth and motherhood & support
- Facts about Feeding and weaning
- Gender
- Abuse
- Child safety
- Coping with a new baby, approaches to baby care (patterns of behaviour & routines)
- Role of father

The manual will be produced as an extension of the pre-delivery parenting programme.

With this level development, the range of activities, the quality of products, and the monitoring effort, one would feel that this outcome has been largely achieved.

Community Development and Sports Sector

In Table 8 the level of achievement of the four outcomes for the Community Development and Sports Sector based on the judgment of the Technical Team Members have been presented. The review of regulations and guidelines in regards to community life, the provision of optional activities to meet the needs of Early Childhood children and the expectations of their parents have been viewed favourably. However, no Day Care Centres has been built (Outcome II) and much needs to be done to promote the use of secured and nurturing communities.

Table 8: Outcome results for Community and Sports Sector

Priority	Expected Outcome	Achievement
1. Realign ECCE Regulations, Policies and Programmes	(XVI) Reviewed regulations and guidelines in regards to community life programmes and projects related to ECCE	To some extent
	(XVII) Completion of two Day Care Centres in response to community needs catering for 50-60 children	Not really achieved
2. Expand Access	(XVIII) Authorities informed of needs and expectations of parents with regards to Child Minding Services/ More available opportunities for EC aged children	To some extent
	(XIX) Secured and nurturing communities	Not really achieved
7. Build Family and Child Friendly Communities		

Nonetheless, the processes which the Community Development and Sports Sector initiated that would lead to the actual construction of Day Care Centres were quite extensive as summarized below:

- **A Standard Day Care Centre Building Design** which takes into consideration site and community issues, interior design and space, external design and play elements, architectural design and child-friendly facilities have been drawn up. This well-researched document which has been authenticated by international and local experts is meant to be used as a guide “to support the development of facilities that are child and family oriented, environmentally safe and secure, that would promote healthy growth, that are aesthetically pleasing, functional in their design, and are cost effective to operate.”
- **A proposal for building of the Anse Etoile Day Care Centre** was prepared. This was to for the development of a project to construct a facility that would be suitable for a quota of 40 -50 infants. It would be equipped with appropriate furniture, up-to-date equipment, and core educational materials. A budget of 3 million had been proposed and site and construction plan had been drawn.
- **A Project Memorandum** to build a similar facility for the district of Grand Anse Mahé and Grand Anse Praslin had been written.

All these activities demanded consultation, expert inputs, negotiation and a high level of commitment to increase facilities for ECCE in the districts. It is unfortunate that due to complex land dispute and financial issues none of these projects have materialized and the Sector was unable to achieve the expected outcome.

With regard to Outcome XIX, the designing and developing of secured child-friendly communities, some desk research has been completed and a proposal is being written but it is clear

that in order to make any progress in achieving the expected outcome, *field-based research would be needed and the concept of “green spaces and safe zones” thoroughly investigated and contextualized.*

Reasonable progress have been made, from the judgment of the Team Members, to achieving the other two outcomes, (XVII) policy review and (XVIII) meeting the expectations of parents and providing opportunities for EC children. Further information may help to establish the extent to which this outcome has been achieved.

In attending to Priority 1, the Community Development and Sports Sector decided to review regulations and guidelines in regards to four social and community life groups: Neighbourhood Recreational Activities (NRA) Committee, District Family Council (DFC), District Disability Support Group (DDSG), and a Committee named Senior Citizens of Seychelles. The roles of the first three groups which are described below have been revised specifically to include EC children.

- **Neighbourhood Recreational Activities Committee** – It groups children for various recreational activities, especially during the school holidays, under the supervision of an adult (Animator). Its main purpose is to promote community spirit, provide developmentally appropriate learning experiences from a play-based approach, and develop programmes that are suitable for early childhood children.
- **District Family Council** – Its main role is to promote and defend the welfare of the family. It provides support to parents before, during and after the birth of a child; it offers activities, specifically targeting the 0-3 age-group, it organizes with other partners on-going parenting sessions.
- **District Disability Support Group** - It is a platform to encourage the participation of persons with disabilities in the communities. It promotes the welfare of the disabled in the district, encourages and assists the disabled with sports, leisure and recreational activities, and create a social network. In collaboration with relevant partners, it facilitates the setting up of support groups for parents and care givers looking after children with disabilities, especially those children from 0 -7 years of age

This framework is a strategic document which has been developed in consultation with Departmental Managers, Programme Officers, District Administrators, and members of the district associations, to guide District Social Committees and groupings to achieve “clearly defined outcomes”. However, the framework is yet to be validated and programmes would need to be planned for implementation. Nevertheless, much progress has been made and the rating “to some extent” is endorsed.

Outcome XVIII is in two parts: informing authorities of the needs and expectations of parents with regards to child minding and making available more facilities for Early Childhood children.

According to the Technical Team Members, this outcome has been appraised as having been achieved to some extent. A project entitled “Kids Gathering” provides ample evidence of the promising direction taken by the Sector to work towards the achievement of this outcome. The purpose of the project is to promote “the holistic development of children (3 months - 4 years old) attending childminding services by increasing their accessibility to quality learning and developmentally appropriate district-based facilities”. The project which is to be piloted in 6 districts entails negotiating and supporting childminders by allowing them free access to a variety of developmentally appropriate learning materials and toys in the District Community Centre. Guidelines have been developed to clarify the role of the DA’s Office, the role of resource persons, and the role of the childminder. *The implementation of the pilot is being anticipated.*

One of the outcomes for the Priority 7 was to increase targeted activities for children within the Early Childhood age-group during school holidays. The programme for the special activities for April and August organised by the Programme Development and Special Events Division of the sector has been reproduced in Table 9 to show the range, coverage and participation.

Table 9: Holiday Special Activities Organised by District (April and August 2013)

District	Activities Organised	No. Participants	EC Participants
Anse Aux pins	No activities organized		
AnseBoileau	Craft and Cooking Ateliers, Educational & Spiritual activities, Sports and Indoor Games	60	20
AnseEtoile	No activities organized		
Anse Royale	Discover your District, Educational Games, Sports, Drawing & Reading, Exchange inter District	40	5
Au Cap	No activities organized		
BaieLazare	Flower making atelier, Sports, Educational Games	60	None
Beau Vallon	No activities organized		
Bel Air	No activities organized		
BelOmbre	Flower making atelier, craft, Traditional Dance, Discover your District	60	8
Cascade	Visit, Informative talks, outings	60	10

English River	Moutya Atelier, Art & Craft, Picking of shells on the beach, Exchange visits	50	5
Glacis	Visits, Craft Atelier	25	None
Grand AnseMahe	Visits, Tree Planting, Swimming, Cooking Atelier, Sports	40	10
Grand Anse Praslin	Visits, Nature Walk, Traditional Dance & Cooking Aterlier, Tree Planting	50	None
La Digue	Camping, Environment Activities	80	5
Les Mamelles	Cooking Atelier, Indoor Games, Exchange visits, Swimming	50	10
Mont Buxton	Film show, Educational Talk, Picnic, Visits	55	10
Mont Fleuri	Sports & Educational Activities, Swimming, Exchange visits, Cooking Atelier, Glass Painting, Camping	110	12
Perseverance 1	Sports, Tree Planting, Excursions, Visits	40	No
Perseverance 2	Visits, Cooking Ateliers,	60	10
Plaisance	Sports, Craft Atelier, Talk by Social Worker, Visits, Story Telling, Reading	50	8
Pointe Larue	Craft, Visits, Reading, Story Telling, Games	70	10
Port Glaud	Craft Atelier, Indoor & Educational Games	40	3
Roche Caiman	Visits, Cooking Atelier, Indoor Games	60	No
St Louis	No activities organized		
Takamaka	Sports, Camping, Educational & Spiritual activities	40	15

It can be gleaned from Table 9 that an array of activities was on offer for children. They included Arts and Crafts, Sports, Dance, Cooking, Indoor Games, Environmental Activities, Spiritual Events, Flower Making, Educational Visits, Film shows, Cooking Educational Games, Story Telling, Talks, Excursions. Almost 90 percent of the 27 “districts” were making provisions for those activities and the participation rate was very good averaging to about 50 – 60 children per “district”. More important still, provisions were made for Early Childhood children and there was an average of about 10 children in that age-range attending in each of the “districts”. These results indicate that action has been taken to expand access to holiday activities for Early Childhood Children. *It is anticipated that as part of the implementation of the Community Life Framework more Early Childhood children will benefit from the holiday club.*

Moreover, as part of the community life programme, a programme entitled “Baby Gym” has been expanding. This programme is designed for children aged 4 months to 9 years who are taught by physical movement experts, the fundamentals of movement and physical activity. The activities are specifically designed for gross motor development, to increase flexibility and strength, muscle control and coordination, balance and rhythm. Moreover, the specialized instructional methods and lively peer interaction also has personal and socialization benefits for the children.

The programme covers 11 pre-school establishments in Central, South and North Region of Mahé, and it has recently been introduced on Praslin. In 2014, about 350 Early Childhood Children in private and 150 children from state institutions attended sessions. However, *more information will be needed to assess the level of the expansion and the quality of the programme.*

Institute of Early Childhood Development

IECD embarked on two projects: the Terminology Project and the Child Minding Project in response to Priority 1, the realignment of policies and Priority 6 relating to accountability and improvement of service delivery. The Terminology Project featured in the NAP with the Education Sector taking the lead. However, since the project demanded a more intensive collaborative partnership between the four ECCE sectors including the private sector, IECD with a view to strengthening its coordinating role became the leading sector for that project. On the other hand, improvement of the quality of childminding services was on the agenda of the Social Affairs Sector but IECD in its quest for more information on the childminding services implemented a research which is, in fact, addressing Priority 9, ‘Promoting Research’, as a cross cutting strategy to trace policy directions for the childminding services.

Table 10: Outcome results for IECD

Priority	Expected Outcome	Achievement
1. Realign ECCE Regulations, Policies and Programmes	(XX) Standard Terminologies used by all stakeholders and partners in early childhood	To a large extent
6. Improved Accountability and Service Delivery	(XXI) Improved Quality of Childminding services	Some Achievement
9. Promote Research	(XXII) Childminding Study	To a large extent

Since Technical Team Members from the four Sectors participated in Terminology Project they were all asked to rate the extent to which the expected outcome (XX) has been achieved. There was overwhelming agreement that the standard terminologies to be used by all stakeholders and partners in ECCE had been developed. In fact out of 24 respondents one did not respond (did not participate in the project) one acknowledged that there was some achievement and one judged that there was “very little had been achieved” (some concerns were expressed that the exclusion of some of the terminologies, particularly the medical terminologies was arbitrary and that the purpose of the terminologies was not adequately clarified). All the others judged that the Expected Outcome had been ‘Mostly achieved’ (Table 9).

The project went through quite a prolonged trajectory with internal development sessions within sectors and multi-sectoral sessions across sectors, coordinated by IECD. These consisted of conceptualization workshops in which the methodologies were discussed and agreed; research and writing committees organized at sector level to develop the terminologies; clinics with individual sectors directed by IECD, editing sub-committees in sectors to revise the terminologies; writing workshops facilitated by IECD to motivate the sectors, sector validation sessions to ensure visibility; editing workshops to share terminologies between sectors and for cross sector input; mini-validation workshops at IECD. A national validation workshop with outside partners was also carried out when further modification were entertained. The final document was compiled by

IECD and went through an independent professional editing process. The document is in print and a partnership arrangement has been negotiated with a private sponsor for printing the document. The status of the document would endorse the judgment made by members of the Technical Teams that the expected outcome has been mostly achieved. *Adissemination plan would need to be outlined and implemented to maximize the use of the document by all stakeholders and partners in ECCE.*

Unlike the Terminology Project, even though not all members of the Technical Team participated in the Childminding Project, all Technical Team Members were invited to respond to the question to what extent they thought that the expected outcome to improve the quality of the childminding services had been achieved. With two missing responses and two other responses which indicated limited achievement, all the others acknowledged that there has been some achievement (Table 10). This must be examined in the context of the urgent need to attend to the childminding services.

Although at this stage improvement cannot be readily assessed, the following necessary conditions have been set.

- The status of the child minding services has been established through a research study
- Recommendations have generated policy consultative meetings with concerned sectors
- Draft Guidelines for key components of the childminding provision have been produced
- A standards outline for childminders has been drafted through international consultancy
- A legal framework for childminding services has become operational
- A regulatory structure has been set up
- Each childminder (147 of them) have their own individual profile on their level of provision for quality improvement
- A national base line has been established to measure the quality level of service delivery

With such an array of accomplished indicators, the measurement of change overtime (hopefully improvement) will become possible and this confirms that there have been considerable achievements concerning the quality of the childminding services.

Section 3: Administration and Management

The management structure for ECCE has been proposed in the Seychelles ECCE Framework. Since there was national recognition of the importance of the framework and there was Government's commitment to its implementation, multi-sectoral Technical Teams (chaired by a designated person) were appointed by the respective Ministers in line Ministries. It was stated that Technical Team Members would be "... responsible for developing, implementing, and evaluating

action plans in their allocated area of work.”To “... provide leadership and strategic directions for developments in early childhood”,it was recommended that an Early Childhood Centre would be set up to collaborate “with other Ministries and agencies providing services and support to EC”. Policy directions would be provided by a High Level ECCE Policy Committee chaired by the Vice President and consisting of Ministers from line Ministries. An Advisory Committee would be established for academic support.

By the time NAP was being implemented major changes had taken place and the proposed Early Childhood Centre had evolved into the Institute for Early Childhood Development (IECD) which had become fully functional with a promotional, coordinating and regulatory structure. Through the National Coordinating Committee for ECCE (NCCE) chaired by the CEO of IECD and comprising the Chairpersons of the Technical Team, the plan has been monitored and supported. This evaluation takes place within that context. Management of the NAP is through the ECCE Technical Team in each sector led by a Chair. The Chair has the task of ensuring the implementation of the actions in each of the departments and units and reports back to the NCCE.

The ECCE Technical Team

In order to evaluate the functioning of the Technical Teams in the sectors within the Ministries, members of the Technical Team responded to questionnaire items on their level of involvement in projects arising from the NAP, major problems they may have encountered in administrative, academic and monitoring aspect of the NAP, relationship between Technical Team Members, and their respective Senior Management Committee. The analysis is substantiated by information from group discussion and individual interviews.

Level of Involvement

Sector projects on ECCE have been expected products of the NAP. The Education Sector had the Early Learning Framework, Day Care Centre Programme, Profiling System, Budget Preparation. The Health Sector reviewed policies such as Immunisation, Post Natal Care Guidelines for Women and their Babies, Routine Child Health Services. The sector also carried out a survey on special needs, and implemented the Hearing Test Programme. The Social Affairs Sector prepared and delivered a pre-delivery and post-delivery parenting programme, developed and implemented

the Risk Indicator Framework. For the Community Development and Sports Sector the Community Life Programme was revised, a Day Care Centre Project was initiated, the Baby Gym Programme was reinforced, and Neighbourhood Recreational Activities were expanded. It is to be understood that all members of the Technical Team were fulfilling their professional roles in their Ministries or Departments, the involvement which is being evaluated here are those directly related to the NAP.

Table 11: Percentage of Technical Team Members Participating in Projects

Not involved	Consultation	Writing
%	%	%
16	48	36

The results in Table 11 would point to a high rate of participation of the Technical Team Members. About 85 of respondents said that they were involved in consultative work or writing-up. The figure for those ‘Not involved’ represent four team members and the reason for their lack of involvement varied: one member had just joined the team, one was “mainly involved with the logistics” of the projects; one did not form part of “sub-committees” working on projects; for another member the projects were not within her “area of expertise”. Nevertheless, the involvement rate, on the whole is commendable. Consultation included discussion, meetings, workshop activities whilst writing-up included research, monitoring report, observational activities, developmental work. It would appear that the responsibility of the Technical Teams for developing, implementing and evaluating sector-based actions plans as noted in the Seychelles ECCE Framework is very much confirmed.

Roles and Responsibilities

It has been assumed that since the sectors were delivering ECCE services, Technical Team Members would easily implement their respective aspects of the plan as part of their professional roles. The views of Technical Team Members were sought by asking them if they encountered problems in some of their tasks or responsibilities relating specifically to the ECCE plan. They were presented with a list (Table 12, column 1) and they had to indicate whether they considered these tasks or responsibilities as ‘A major problem’, ‘Quite a problem’, ‘A bit of a problem’ or ‘No problem’. For the analysis the first three categories were collapsed.

From the results in Table 12 a number of observations can be made concerning some of the tasks and responsibilities of ECCE Technical Team Members. More than 90 per cent of them seemed

to have experienced problems in integrating their everyday work within the demands of the ECCE plan. Over 80 per cent had problems with certain administrative, and monitoring duties such as attending meetings, carrying out observation work, and collecting evidence. Procuring the appropriate documentation for projects seems to be a lesser problem with a figure of 68 per cent. However, only half of the Team Members identified reporting as a problem.

Table 12: Percentage of Technical Team Members reporting problems

	%
Attending Meetings	84
Integrating everyday work within the ECCE plan	92
Getting the appropriate documents for projects	68
Carrying out observation or monitoring work	81
Collecting evidence	88
Reporting	50

The message that can be deduced from these results is that work associated with ECCE in the sectors placed added demands on the team and this may be reflected in the time they have to allocate to the ECCE work plan. Some of the comments from a discussion with team members are quite pertinent: “Much of the work is done outside working hours” – from the Education Sector; “We have to do the work in our own time, for example, when we were working on the Terminology Project” – from the Health Sector; “We have to balance ECCE workload against our caseload” – from the Social Affairs Sector; “We find ourselves with another set of tasks which clashes with our daily activities” – from the Community Development and Sports Sector. These remarks may also explain that only fifty per cent of team members found it a problem in ‘Reporting’. It can be assumed that most of the writing up of reports is done outside working hours whilst many of the administrative and monitoring activities have to be accommodated within working hours. This may lead to work overload as team members have to manage contending tasks. *Those findings would suggest that there may be a need to review the role and conditions of Technical Team Members.*

Chair of Technical Team

The Seychelles Framework for ECCE referred to an ECCE Technical Team which will “report on progress to the Policy Committee through their Ministers.” In the ECCE Plan (2013 - 2014) chairpersons for ECCE Technical Teams were nominated and they were “to report on progress through their Principal Secretaries who in turn will brief their Ministers as necessary.”

However, the role of the Chairperson was never fleshed out. The key role of the chairperson as the plan was being implemented need to be understood in order to evaluate its effectiveness.

Table 13: Aspects of roles and responsibilities

		Mean
1	Using the budget for ECCE only	3.50
2	Getting a budget for ECCE	2.75
3	Having control of the budget	2.50
4	Getting the commitment of members of the team	2.25
5	Getting the involvement of other professionals	2.25
6	Devoting time to the implementation of the plan	2.00
7	Developing an operational plan	2.00
8	Organising working meetings	2.00
9	Developing an operational plan	1.75
10	Promoting the ECCE Plan	1.50
11	Getting the support from higher authorities	1.25

The four Technical Chair Persons were presented with a list on aspects of their roles and responsibilities (Table 13, column 2). These were selected from information following a general discussion with the Technical Chair Persons when some broad concerns were expressed about each one of those items on the list. They were selected because of (a) their potential to impact upon the smooth implementation of the NAP in the sectors and (b) their capacity to reduce the effectiveness of the role of Chair Persons.

The Technical Chair Persons were invited to rate the aspects of their roles and responsibilities as to whether these aspects were considered to be a ‘Major problem’, ‘Quite a problem’, ‘A bit of a problem’ or ‘No problem’. It must be conceded here that this broad rating system was not a precise measure but when considered alongside interview records it was expected that they would provide some general trends that would add to the discussion on the roles and responsibilities of the Chair Person. In Table 13, the mean for each of these aspects have been presented and ranked. From the results in Table 13 a pattern of responses emerges which can be used to comment on the roles of the Chair Persons.

The first three items (with the highest mean) relate to budget. Being given a budget specific to ECCE, having control of that budget, that is managing the budget would seem to be quite a problem whilst reserving the budget for ECCE matters only, can be a major problem. These results confirm some of the difficulties which have been experienced by Technical Chair Persons. For example, one chairperson has to make a request for expenses under the recurrent budget, another explained the convoluted procedures to obtain funds from donors, another complained about funds being re-directed. *It was recommended by the World Bank that an ECCE budget should be*

made available within each line Ministry and the Programme Performance Based Budgeting being piloted by the Ministry of Education could be the way forward. The Chairpersons would be in a better position to implement the ECCE plans if they actually have control of the budget.

The next set of items refer to building up a working relationship with team members and other professional whose expertise are crucial to the implementation of the plan or in providing information to monitor projects or aspects of the plan. It has been reported, for example that some members of the Technical Team had difficulties in attending meetings, there were also instances where members had not attended any of the monthly Technical Team Meetings; it has been suggested also that other departments or sections should be made aware of the plan in order to get their cooperation to avoid the tendency to associate the ECCE plan only with the Technical Chair Person or with certain members of the Technical Team. *These concerns bring out the necessity of giving professional recognition to major responsibilities of the Chair Person.* The Technical Chairperson has a key role in driving the implementation of the plan in the sector and coordinating ECCE activities within the sector. To do this effectively, the Chair has to gain the co-operation and commitment of all members of the team as well as the professionals involved in ECCE activities and delivering ECCE services.

Items 6 to 8 seem to capture the administrative management functions in the role of the Technical Chair Persons. As with the Technical Team Members, the chairpersons also expressed, during the individual interviews, their concern with workload and their not having enough time to concentrate on the plan. *There is a need to take into consideration the nature, complexity and national responsibilities of the Technical Team Chairperson and the extension of their professional roles, and the academic responsibilities of monitoring the plan and reporting back.*

The last two items are related to support. There was general agreement amongst Technical Chair Persons that they received adequate support from their Ministers. They all claimed that they were “satisfied” (The options were “Not satisfied at all”, “Not really satisfied”, “Satisfied” and “Very Satisfied”) with the support they receive from the senior managers of their respective sectors. However, they felt that there was a need for Chairpersons to “become more visible to senior management”. Perhaps, as the NAP was being implemented the Technical Chair Persons were establishing themselves as pivotal to the development and promotion of ECCE in their sector and nationally and this *must be acknowledged at the highest level.*

Section 4: Impact

The NAP was conceived as a means of initiating immediate action for the period 2013 to 2014. It is therefore part of the wider scope of the ECCE Framework and, as such, it is very much part of more detailed processes and can be viewed as a way of focusing on ECCE policies and programmes. It is clear that in all sectors many activities and programmes have preceded those of the plan and have been incorporated in the plan. Although it may be too early or perhaps, more specifically, data on developmental outcome are not available to measure impact on the target

group, that is EC children and their parents, it may be possible to identify some of the impact of the NAP on the ECCE landscape generally.

In order to do this a number of indicators have been constructed to evaluate possible areas of impact. Four elements of impact have been selected: changes in knowledge, changes in working style, changes in service delivery, changes in human resource capacity, and level of satisfaction with the implementation of the plan.

Knowledge

Technical Team Members were asked to rate the extent to which they had developed or acquired knowledge and skills through the implementation of the NAP. They had to say whether it was ‘To a large extent’, ‘To some extent’, ‘To a minimum Extent’, or ‘Not at all’. They were also given the option ‘I don’t know’. There were 9 statements as listed in Table 14 and the percentage of members who rated the statements ‘To a large extent’ has been presented.

Table 14: Percentage of Team Members developing or acquiring knowledge and skills

	%
Reflection on ECCE	64.7
Communicating what you are doing	62.2
ECCE provisions	60.0
Making groups decisions	50.4
Validation	48.0
Evidence gathering	37.5
Observation skills	33.3
Self-assessment	25.0
Planning your work	24.0

At the top of the list, it can be seen that about two-thirds of members said that the implementation of the plan had prompted them to reflect on ECCE, helped them to be able to and communicate their work to others, and has given them more knowledge of ECCE provisions. In the general discussion, as part of the information gathering exercise, members enthused about their knowledge of ECCE. There were personal statements, such as, “I have learnt a lot about ECCE”, “I can now appreciate the importance of ECCE”. “I see my own kids in a different way now”. There were sector-wide statements, for example, “Everybody has got the hang of what ECCE is all about”, “ECCE is now a focal area in planning and programme implementation”. There were all encompassing statements, for example, “It has helped all sectors to become more aware of their roles towards the well-being of our children”. As it was mentioned before, sectors had been implementing a range of ECCE- related projects and programmes. However, strategies and activities associated directly with ECCE were somewhat hidden within the larger plan of the sectors. With the NAP, ECCE has become a more salient feature of sector activities. It is better

understood and is permeating organizational plans and programmes. “The implementation of the NAP has been instrumental in propagating the language and culture of ECCE” – IECD’s anthropological expression of the impact of the NAP. *Working towards the integration of ECCE activities within and across sector plans must be pursued.*

The third and fourth entries in Table 14 would indicate that activities associated with the implementation of the NAP have helped, ‘To a large extent’, about half of the team members, to acquire or develop decision-making skills. Technical Teams have to carry out many of their coordinating, developmental and reporting activities in groups. As mentioned previously monthly team meetings are convened at sector level and at central coordinating level at IECD. Besides sub-committees are formed to work on specific aspects of a project or programme, and validation has become an indispensable process in the formulation of guidelines, standards, programmes, frames of reference and policies. Perhaps, it is the success of the diverse cooperative group work that that have prompted members to acknowledge the impact of the NAP on group decision making. *This should be exploited.*

Similarly, at least one-third of members felt that the NAP has played a major role in enhancing their skills in and knowledge about gathering evidence and carrying out observation (entries 6 and 7). As the implementation of the plan gathered more momentum, monitoring and reporting became essential processes for effective coordination and timely support, and *provided capacity building opportunities.*

The last two entries may be referring to the style of work. As Team Members orientated themselves to the demands of the plan and reviewed their inputs, they may have felt that they needed to assess their capacity to contribute to the NAP and to plan their work accordingly. This may account for about one-quarter of the Team Members who ‘To a large extent’ acknowledged that.

The Collaborative Approach

The Seychelles Framework makes broad reference to an “integrated approach” as a required implementation strategy. In the NAP it is stated loosely that “while the Action Plans are presented at the level of sectors, the activities ... are to a large extent collaborative and cross cutting.” One area of impact may be the development of working approaches which are synergetic, supporting and dynamic. Two sets of indicators have been used to assess the level of collaboration: the working approaches in the implementation of the plan and relationship between sectors and IECD.

Working Approaches

For the first set of indicators, Technical Team Members were asked to rate the extent to which they thought that the five working methods (listed in Table 15, column 1) have been developed through the implementation of the NAP. They had to make the following choices: ‘To a large extent’, ‘To some extent’, ‘To a minimal extent’, ‘Not at all’.

The results presented in Table 15 are quite encouraging. More than 90 percent of Team Members were of the view that positive working approaches have developed at least to some extent as the NAP was being implemented. In effect, the rating to ‘To a minimal extent’ was registered for only one member regarding ‘Coordinating support’. These results will lead one to assume that on the whole Team Members have had very good experiences of the working committees and sub-committees within their sectors and across sectors. Moreover, working partnership has also been strengthened, for example, between the Health Sector and the Social Affairs Sector in the development of the antenatal and post natal manual, and the Risk Indicator Framework; between IECD and all four sectors through the Childminding Study and the Terminology Project. There have also been professional linkages with external partners as is the case of the Community Development and Sports Sector where planning personnel from the Ministry of Land Use and Habitat (MLUH) and external ECCE experts discussed and agreed on the Day Care Centre architectural plan.

Table 15: Percentage of Team Members rating working methods

	To a large extent	To some extent
	%	%
Working meetings	41.2	52.9
Supporting Committees	42.9	50.0
Coordinating Support	85.7	7.1
Working in Partnership	41.2	52.9
Working in Collaboration	66.7	33.3

There are two items that stand out from the Table 15: a) the rating for ‘Working in collaboration’ and b) the rating for ‘Coordinating support’. The figure registered for the first rating would indicate that two-thirds of Team Members felt that their working style have been influenced by the collaborative work which they have been involved in. The figure for the second rating is overwhelmingly in support of the coordinating mechanism which has evolved. *These findings would strongly suggest that the promotion of “multilevel collaborative actions” and the development of effective multi-sectoral coordination has been a major impact of the NAP.*

Relationship with IECD

IECD's role is pivotal in the coordination of the NAP and it has the complex and daunting task of build working relationship with the sectors and across sectors. One element of impact may be the relationship between IECD and the sectors in promoting ECCE and implementing the NAP.

Table 16: Percentage of Team Members rating effectiveness, coordination, relationship

	Very Effective	Acceptable	Not Very Good	Poor
	%	%	%	%
Effectiveness of sector collaboration with IECD	52.0	44.0	4.0	0.0
	Very satisfied	Satisfied	Not very Satisfied	Not satisfied at all
	%	%	%	%
Level of coordination by IECD	22.2	72.2	5.6	0.0
	Collaborative	Facilitative	Authoritarian	Interfering
	%	%	%	%
Nature of relationship	31.6	52.6	10.2	5.6

The general picture in Table 16 creates a good impression of the relationship which has developed through the implementation of the NAP. However, we may need to interpret the table with some care. Firstly, for the first item, the Team Members were rating their sector and we would not have expected a 'Poor' rating. On the contrary, more than half of them said that their sector collaborated 'Very Effectively' with IECD. But a substantial minority (44%) recognized that the level of collaboration was somewhat 'Acceptable' with a concerned person admitting that the collaboration was 'Poor'. Taking these figures a little further we can comment that although on the whole sectors felt that they were trying to collaborate with IECD as much as possible, in terms of responding quickly and efficiently to the task at hand and to correspondence and providing information that was necessary, *there is still a need for further consultation and dialogue to synergise the relationship between IECD and the sectors to reduce the promptings and the reminders and, at times, the cajoling in the collaborative endeavour.*

This may explain the pattern of figures for the second item in the Table 16 where, the majority of Team Members almost three-quarters of them acknowledged that they were 'Satisfied' with the level of coordination from IECD, and another quarter of the Team Members admitting that they were dissatisfied.

Perhaps the interpretation of the last set figures may clarify the situation. Generally, Team Members would describe the relationship with IECD as facilitative (more than half of them), that is, IECD supports them, have incisive productive inputs in some of their implementation strategies, and assist them with procedural matters in ECCE. Moreover, IECD works alongside Team Members, to implement certain aspect of the plan, such as in the Terminology Project and, at the

same time, took over the responsibility to coordinate the project. What may be reflected in those results are the contending demands between facilitation, collaboration and coordination.

The following summarized statement captures the essence of the maturing relationship between IECD and ECCE Technical Teams.

It demands considerable effort to establish rapport between IECD, the Technical Chair Persons and ECCE Team Members. Guidance is needed to establish communication links between IECD staff and ECCE sectors. Some Technical Chairs are more proactive than others but this is understandable as there are workload problems. It is necessary to find the right way to communicate with professionals and specialists in their own fields and each Chair has to be approached differently. They need to see that IECD is there as support, as a complimentary partner as adding value to what they do and not just there to monitor their work and demand information. Besides, IECD has also to implement ECCE projects when their inputs and cooperation are needed. (IECD)

The results presented above substantiated by the qualitative information from IECD highlight the demanding coordinating role of IECD, not only as the guardian of the plan, the defender of the plan, championing activities within the plan but also as facilitator, counselor, teacher, collaborator, motivator, implementer, and a source of knowledge. IECD shoulders a high level of collaborative responsibilities with the daunting task of nurturing co-operation as in the Terminology Project and the all-encompassing demands of attending to cross-cutting issues such as the implementation of the Childminding Study and the delicate supervisory role in monitoring the plan. *The multi-faceted role of IECD need to be recognized and financial and consultancy support would be of tremendous importance in developmental, cross-cutting, and research activities undertaken.*

Furthermore, the IECD maintains a direct link with the High Level ECCE Policy Committee. The committee gives policy directives at the national level and IECD provides policy suggestions and information. However, IECD attends the High Level Committee when certain information is needed. *Perhaps, the top-down relationship between the High Level ECCE Policy Committee and IECD can be fruitfully moderated if IECD is represented on that Committee.*

Impact on ECCE and Service Delivery

For two years the NAP has been in the process of implementation. It was conceived as a national plan to focus on ECCE, expand on, or initiate ECCE projects, promote ECCE in the country and improve ECCE service delivery. In order to evaluate possible impact of the NAP on ECCE, the role of the NAP in the development of ECCE is explored, and the possible effect of the NAP on service delivery is predicted.

Table 17: Percentage of Team Members rating level of impact

NAP played a role in the development of ECCE		
	Significant	Large
	%	%
	42.1	57.9
Impact regarding service delivery		
	Some impact	Considerable impact
	%	%
	64.7	35.3

Technical Team Members were asked their views on the role of NAP in the development of ECCE and on the impact of NAP on Service Delivery. The options for responding were ‘None’, ‘Minor’, ‘Significant’, ‘Large’ for the first item and ‘No impact at all’, ‘Very little impact’, ‘Some impact’, and ‘Considerable impact’ for the second item.

The results in Table 17 are quite persuasive. Nobody endorsed the two lower options for both items although for a fair minority (just over 40%) the role of the NAP for the promotion of ECCE is only ‘Significant’. Some descriptive comments can help to clarify the responses.

With regards to the development of ECCE through the NAP, there wasample evidence of the pervasiveness of ECCE from the views of members in the different sectors. The Education Sector described it as “a road map” and emphasized the multi-sectoral cohesive partnerships. The Health Sector considered it as a valuable tool for national and international cooperation on ECCE. The Social Affairs Sector underlined its awareness-raising aspect for the public and conscientious-raising for care workers in the “new approach” to ECCE. The Community Development and Sports Sector commented on the possibilities that it creates for networking and coordinated attention to EC. IECD defined it as a “booster” for ECCE initiatives. These illustrative comments bring out the facts behind the figures that the NAP has generated a growing interest in ECCE and a growing recognition by ECCE sectors of the fundamental importance of ECCE.

The responses to the second item indicate that contrarily to responses to the “the role of ECCE” the larger majority (67%) of Team Members conceded to “Some impact concerning Service Delivery”. These results have to be interpreted in the context of some of the progress which has been made in relation to Service Delivery. The Hearing Test Project from the Health Sector, the Parenting Programme from the Social Affairs Sector, the “Kids Gathering” Project from the Community Development and Sports Sector, and the Childminding Project from IECD are some examples. In the Hearing Test Project early detection services have been advanced. For the Parenting

Programme more parents were accessing the reviewed programme but unfortunately the actual quality of the service has not been assessed. On the other hand, the Kids Gathering Project has the potential to impact positively on community service provisions. The Childminding Project with its detailed and comprehensive quality marker where the level of service provision for each childminder has been set, the improvement in service provision can be systematically assessed. The point here is that there have been developments which would certainly have an impact on service *delivery but unless indicators are produced as in the Childminding Project impact measures although anecdotally acknowledged still need to be substantiated with concrete evidence.*

The Use of the NAP

An interesting indicator of the spread of the reputation of the NAP is how it is viewed and used within sectors. This is captured through the degree of involvement of the Team Members in the development of the NAP, perceived frequency of consulting the NAP, and the NAP as a quality document. Table 18 contains the statements (column 1) to which Team Members responded, and the percentage figures for the four level of responses.

The impression we gain from the results in Table 18 is that the NAP is seen as a tangible and well appreciated document in the ECCE Sectors. About half of the Team Members have been involved in the development of the NAP. Thus we can assume that overall there is adequate knowledge of the document and its content. Obviously, those who were involved were those appointed originally as members of Technical Teams. During the course of the implementation of the NAP, there have been other formally appointed members or informally co-opted members.

Table 18: Percentage of Team Members claiming involvement in development, carrying out consultation and rating quality of the NAP

Involvement in the development of the NAP	Very much involved	Some involvement	Very little involvement	No involvement at all
	%	%	%	%
	47.6	9.5	23.8	19.0
Consulting the NAP during work concerning ECCE	Yes, often	Yes, occasionally	Yes, at first	Never consulted the NAP
	%	%	%	%
	47.6	33.3	4.8	14.3
Quality rating of the NAP	Poor Quality	Moderate Quality	High Quality	Very High Quality
	%	%	%	%
	0	14.3	47.6	38.16

However, about 90 percent of Team Members claimed that they consulted the NAP, at least, occasionally, in the course of their work. Moreover, the NAP is judged as a high or very high

quality document by the large majority of Team Members. These results can be further qualified by some of the information received from the group.

Overall, Team Members believe that The NAP is a quality document. It sets the vision for ECCE. It is an “overarching document which sets out clearly how ... to improve ECCE” and contains information which are necessary to draw up an operational plan and develop specific strategies within the sector to achieve ECCE goals. The plan has been consulted to ensure that organizational plans are in line with the ECCE objectives and it has been used in the Education Sector in the Medium Term Plan. The NAP has also been used to obtain both national and international cooperation from partners, as is the case with the Baby-Friendly Hospital Initiative, the Risk Indicator Framework, and the Kids Gathering Project. However, the plan has been described as ambitious (which perhaps explains the moderate and high ratings for quality) with a time frame which is “not realistic”. There was a suggestion that the plan need to be “reviewed and adjusted”.

These comments would lead one to conclude that there is ownership of the plan by the Technical Team Members, that the plan is a useful planning resource for ECCE, and that it has an a wide-spreading effect. *These findings should be brought to the attention of Senior Managers in the ECCE sectors through consultative meetings for future planning.*

Section 5: Summary and Recommendations

The final declarations of the Jomtien (1990) and the Dakar World Conference on education both encouraged governments to interpret the concept of “Education for All” in a manner that acknowledges the importance of the quality of education, and particularly the delivery of improved and measurable learning outcome. The Moscow Conference recommended a holistic approach in the achievement of expanded access and quality of ECCE. The Ministry of Education adopted the Seychelles ECCE Framework as the policy document to integrate ECCE provisions in Seychelles. The NAP was a response to the SF to initiate immediate multi-sectoral action in ECCE for the period 2013 to 2014.

An evaluation of the NAP has been carried out using a generic model to assess relevance, outcome and impact. Three main methods have been used to make judgment about the achievements of the

NAP in a manner that is congruent with the multi-sectoral approach and the promotion of ECCE nationally as advocated in SF. The specific methods were: questionnaire administration, interviews and document review.

Relevance

The nine Priority Areas were found to be in line with the vision and principles of SF. However Priority 9 as cross-cutting is reported accordingly, the relevance of the eight priorities to the ECCE aspiration of Seychelles can be summarized as follows:

a) Priority 1 has been linked with the development of curriculum framework as an overarching document for ECCE (Education), the review of maternal and child health guidelines with a sharp focus on ECCE (Health), the design of a legal framework for better child protection (Social Affairs), the conceptualization of a Community Life Framework to facilitate out-of-school activities and community support (Community Development and Sports), the production of a Terminology Directory for consistency and ECCE-related information (IECD).

b) Priority 2 has been taken up by the Community Development and Sports engaged in increasing access to Day Care facilities and to recreational and development activities.

c) In addressing Priority 3, the Education Sector has prepared a financing document for Early Childhood and the Health Sector has carried out an investigation for children needing special aids in order to seek private sector sponsorship.

d) For Priority 4 (Education) structures are still being negotiated to establish training programmes for ECCE professionals.

e) Priority 5 - A mechanism for early detection of children at risk has been put in place by the Social Affairs Sector and a new system for early detection of hearing problems in children has been introduced by the Health Sector.

f) As a preliminary measure to address Priority 6, a research study has been carried out by IECD on Childminding Services and ensuing quality standards are being established.

g) With Priority 7, the Community Development and Sports Sector has been extending its recreational and educational activities to cater for Early Childhood children.

h) For priority 8, the Social Affairs Sector has been developing parenting manuals with the view of improving the quality of parenting programmes.

i) IECD carried out a research study on child minding in addressing Priority 9.

Expected Outcomes

Of the 22 'Expected Outcomes' in the NAP, 9 has been considered as mostly achieved. Considerable progress has been made towards the achievement of 5 'Expected Outcomes', whilst for the other 8 although limited progress has been made mainly due to system change or other unforeseen eventualities. Throughout the analysis suggestions have been made (in italics) on improving strategies or strengthening actions that would facilitate the achievement of some the expected outcomes or that would lead to follow-up activities. More specific recommendations stemming from these considerations have made.

Recommendations

Expected Outcome III - The SELF as a comprehensive document will be used by childminders, Crèche Teachers, parents, teacher trainers, care givers and other stakeholders. Although considerable progress has been made to produce this document there is a need for intensive consultation with all stakeholders to decide what will be the best way to proceed to utilize the document in early learning.

Expected Outcome V - In partnership with and other stakeholders, the Ministry of Education should use the SELF as a resource document to develop instructional programmes for teachers and ECCE workers.

Expected Outcome VI – The Early Childhood Section of the Ministry of Education should organize working meetings with key partners (such as Health Sector, IECD) to carry out consultative review. The profile will need to be tested out. The reviewed profile would need to be used to set a baseline for monitoring developmental and learning outcome so as to be able to “share information and report on progress”.

Expected Outcome VII– The guidelines for parents with disabled children is still in draft form and will have to be reviewed with feedback from other parents and professional partners. A

sensitization programme should be planned and information from parents on how helpful they find the guidelines should be sought

Expected Outcome IX–The Rehabilitation Services at the Ministry of Health may need to recruit a consultant to analyse the data and write a survey report. The results can then be used to identify children with special needs and the special aids which would be needed. With this statistical information it will be possible to seek sponsorship.

Expected Outcome X – Definite considerations should be given to the administration, collection and reporting of the Denver Development Screening Test. Without an appropriate database to manage child development outcome information, benchmarking and monitoring child development outcome will not be possible. The Ministry of Health should investigate the possibility of consultancy partnership to develop the mechanism to track children from birth through early childhood.

Expected Outcome XIV – The Social Affairs Sector would need to promote the use of the RIF and a mechanism must be engineered so that it will be possible to monitor usage, referrals, support and intervention.

Expected Outcome XV–The attendance data for the parenting programme has been found to be very useful. However, it will be necessary to gain further information from the parents or parents-to-be-themselves to assess the quality of the programme and associated benefits.

Operational Management

NAP is administered and managed at sector level by a specially appointed ECCE Technical Team led by a chairperson. We have seen in our analysis that this demands considerable engagement time on the part of Technical Team Members and places added responsibilities on the team in the fulfillment of their roles. At the same time, we have investigated the demanding role of the Chair Person and identified mitigating factors which may have an influence on the effectiveness of their roles. The gradual empowerment of the Technical Team has been described as follows:

At the first stages of implementation the sectors were carrying on with their respective projects or programmes at their level. When IECD convened the NCCE, which was to some extent neglected because of staffing issues and other demands, it was a wake-up call for the sectors as they realized that they had to report on progress and give an account of their projects or programmes linked with the plan. (IECD)

Without the proactive monitoring role of IECD, the ECCE Technical Team would have remained de facto implementers of aspects of the plan. However, through collaborative efforts the Technical Teams evolved through the process to begin to own the plan and to activate their responsibilities and reconstruct their roles. It is clear from the data that as this happened more was demanded of them in the context of the plan. Throughout the discussion, some suggestions have been proposed (in italics) to strengthen the decisive role of the Technical Team and the following recommendations can be made.

Recommendations

a) Develop Terms of Reference for the Technical Team Members with relevant remuneration strategies. Four broad strands were apparent from the analysis: involvement with the planning document (develop plan, prepare operational plan, integrate the plan), liaising within and outside the respective ministries, working sessions (meetings, workshops) implementation projects or programmes from the plan, monitoring (research, write-ups).

b) Develop Terms of Reference for the Chair Person of the Technical Team with appropriate remuneration package. The Chair Person is the life force behind the implementation of the NAP at sector level. Apart from the roles listed above for the Technical Team Members, they have added leadership role which include coordination, organization, representation, archiving information, and reporting.

c) Ensure that ECCE is an agenda item at Senior Management Meetings.

Impact

The NAP has had considerable impact within sectors. It has increased knowledge and understanding of ECCE within sectors; it has had positive learning effects on Members of the Technical Teams it has promoted the collaborative approach; it has begun to address service quality and it is viewed as an important document for ECCE. However, associated challenges have also emerged and some suggestions have been made to be taken into consideration in the next planning cycle.

Recommendations

- a) Integrate ECCE plan within the sector plan so as to ensure coherence and reduce role diffusion and competing demands.
- b) Consideration should be given to the capacity building potential of the ECCE plan and capacity sessions should be planned accordingly.
- c) Consideration should be given to expand the collaborative private-public, international-local consultancy partnership with IECD. This will allow IECD to maximize its coordinating capacity and reduce role diffusion effects.
- d) Attention should be given to the development of indicators and the establishment of baseline to monitor service delivery and assess the impact of ECCE programmes.

Section 5: The Way Forward: Discussion and Comments

The NAP evaluated here has clearly resulted in the promotion of ECCE in Seychelles. There is substantial evidence to show that the objectives of the NAP are important for the development of ECCE provision in Seychelles. Through the implementation of the plan sectoral projects and programmes have been designed and some of them implemented, collaboration within and between sectors have been initiated or strengthened, partnership across sectors have been built or enhanced with potential for capacity building initiatives. However, in order to plan for the future, some emerging issues need to be discussed.

When the Technical Team Members judged the quality of the NAP, from their comments it would appear that they were referring to the amount of information contained in the NAP and the uses of the NAP in disseminating ECCE information but not really on the technicality of the plan. Four main issues were identified: the top-down adoption of an Action Plan Template, lack of follow-up with sectors to monitor progress on the use of the template to develop the sector plans; difficulties for some sectors to set priorities and produce sectoral plans; lack of overarching structure to provide guidance and support in writing the plan (the plan was compiled by an external consultant); lack of time to reflect and integrate feedback from the validation of the plan.

Initially, the implementation of the plan was disjointed and isolatory. It is really when IECD became operational that a rapid review was undertaken when a re-writing and editing workshop was organized to begin to coordinate the process of action planning and to set up the NCCE to keep members “on track through periodic reporting of progress”. The collaboration and partnership

which is a strong feature of the evaluation has evolved as the plan was being implemented and as IECD experimented with a consultative-collaborative model of monitoring and support.

To build from what has been achieved as the evaluation results indicate a common framework for action planning need to be established. It is envisaged that sensitisation through presentation and discussion of the evaluation report, planning workshops for prioritization based on the results of the evaluation and the recommendations from the Third Biennial Conference on ECCE, working meetings within sectors and if necessary across sectors to write the plan and finalise arrangements for monitoring and evaluation will be organised. These activities should be carried out with the commitment of the Principal Secretaries or Chief Executive Officers and leadership of the Technical Chair Persons of the ECCE Sectors and IECD as the coordinating organisation. Some of the pertinent issues arising from the evaluation are discussed below with further recommendations.

Expected Outcome Statement

From the analytic judgment of the expected outcome, we have seen that some of the expected statements are output statement. For example, “All newborns have their hearing tested”, “Reviewed regulations and guidelines in regards to community life programmes and projects related to ECCE”. Moreover, some of the outcome statements need qualifiers, for example, “Enhanced quality of parenting programmes”, “Improve the quality of childminding services”. Therefore, many of the recorded achievements have been evaluated in terms of output and progress made towards achieving the expected outcome. There is a need to ensure that outcome criteria of specificity, measurability, and achievability are adhered to in conceiving and writing outcome statements.

Performance indicators

In the development of the NAP and the setting of outcomes, very little attention has been given to performance indicators. For example, how do we know that the parenting programme which has been provided by the Social Services Sector has been ‘enhanced’? In a similar way, what would be the indicators for “improved access for every child to effective aids” as intended by the Health Sector? It is not recommended to have too many performance indicators since they would tend to cloud the issue but at least one or better still two performance indicators should be designed for each outcome. Performance indicators can be both qualitative and quantitative but they are a means of assessing progress against specific outcomes and they should be included in plan.

Baseline

Collecting data to establish baseline is a weakness in ECCE service and programme delivery and it is a weakness in the NAP. However, where it has been done the results are quite astounding. It was possible to assess breastfeeding rate from the Health Sector because there was a baseline from 2010. Baseline data establishes a foundation from which to measure change over time (UNDP, 2006). Therefore, although at this moment the achievement of “improved Quality of Childminding Services” outcome cannot be measured, with the establishment of the levels of provision framework, each childminder has a personal detailed itemized profile on all aspects of the childminding service in the establishment. Thus it will be possible to measure impact, at least on the childminders in the future.

Timeframe

In the discussion with ECCE Technical Team Members one of the shortcomings of the NAP was the unrealistic timeframe. There was a general impression that the NAP was ambitious. Perhaps it was the remarkable enthusiasm of the Technical Teams and because some of the projects had already been initiated, there was a tendency to outstretch the human resource capacities of the sectors.

Too many programmes or projects were being implemented. For example, the Health Sector selected three priority areas and with five expected outcomes, five different project or programmes were intended to be in operation, such as, Monitoring Children in Crèche and Primary I and II using the DDST, Reviewing the School Health Programme, Introducing the Hearing Screening Test, Assessing the Baby Friendly Hospital Initiative, establishing private-public partnership for sponsorship of children needing special aids. Their inclusion in a two-year action cycle would strain implementation, monitoring and reporting actions. It is not surprising that only two outcomes have been mostly achieved the maternal and child health reviews and the Hearing Screening Test – the latter being part of the strengthening of child health outcome. A similar analysis can be carried out for the Education Sector. The conclusion is that in future planning processes, careful selection of programmes or projects must be undertaken and decision made about what is achievable in the recommended timeframe.

Child Development Outcome

It can be noted that the impact on the targeted group ECCE children, in the plan cannot be assessed. Although the Health Sector intended to have “a comprehensive profile for every child” to ensure that shared information for all stakeholders is available, data on child development outcome are not available in a system for monitoring and analysis (SABER-ECD, 2013). The collection, compiling and assessment of the child development outcome may need to be considered in future planning.

Recommendations

- a) A common agreed framework should be used in the development of future plans. The result-based planning model promoted by UNDP may be useful. It is stated that “... in planning it is essential to bear in mind not only the intended results, but also how results, will be monitored and evaluated.
- b) Limit the number of programmes or projects implemented by sectors to three for the larger sectors and 2 for the smaller sectors.
- c) Develop a cross-sector project to gather and compile information on child development outcome to establish baseline.

Finance

The NAP has been mostly financed through the budget of individual ECCE sectors. The planned budget for the NAP was as follows:

Table 19: Planned budget for the NAP by Sector

	Community Development and Sports	Education	Health	Social Services
Planned Budget	1,673,000	3,080,500	790,000	4,163,000

It can be seen that the planned budget demands were rather large especially for the Education Sector. Moreover, funds were also obtained from international organization such as WHO for the Health Sector and UNDP for the Social Affairs Sector and from local sponsors such as National Sports Council (NSC). However, those were not factored in the plan. Unfortunately, data on the implemented budget was unavailable so the exact spending cannot be calculated. Through the evaluation we have also noted that the budgeting system is a major problem for Technical Chair Persons. There are fruitful developments to finance ECCE. Not only should public-private partnership be pursued but also there may be a need to review the ECCE Trust Fund method of allocation which should accommodate both national and individual projects in ECCE. *It is*

recommended that the information gathered from this evaluation should be used to develop a more realizable budget for future planning and that the expertise of an ECCE Technical Team from the Ministry of Finance should be appointed to facilitate the process and to monitor and support ECCE sectors.

Conclusion

In this evaluation the relevance of the NAP with the Seychelles ECCE Framework and policy documents on ECCE has been confirmed. The opinion of Technical Team Members and documentary evidence have been used to assess the achievements of expected outcomes, the effectiveness of the administrative and management structure of the NAP and the impact of the NAP.

There was general agreement and confirmatory evidence that considerable progress has been made. Through the implementation of the NAP sectoral projects and programmes had been designed and followed through. One of the high spots of the NAP was the collaborative partnership which has developed. It was also clear that the NAP has brought personal, sectoral, inter-sectoral and national benefits. There is substantial evidence to show that the objectives of the NAP are important for the development of ECCE provision in Seychelles.

It is hoped that this evaluation would be valuable in planning for ECCE. The approach taken has been meant to provide guidance about what actions need to be pursued for the projects and programmes, how the management of the plan can be facilitated, what specific aspects need to be considered in order to focus on the achievement of expected outcome and whether there is a need to review human and financial resources for improving planned implementation of strategic actions.

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