SITE VISIT: Early Childhood Development in Mauritius— The Formulation of National Policy


Introduction

The Country

The Republic of Mauritius consists of the islands of Mauritius, Rodrigues, St. Brandon, Agalega, and a number of outlying islands. The two principle islands are Mauritius and Rodrigues. Mauritius is located 800 km east of Madagascar, and has a land area of 1,865 square kilometers; the Island of Rodrigues is located 560 km east of Mauritius, and has a land area of 110 square kilometers. The total population of both islands is estimated at 1.1 million (1,071,351 in Mauritius and 34,536 in Rodrigues). In 1990, 40.5% of the population could be found in urban areas.

The islands are volcanic, and they have no known natural resources; 49% of Mauritius is under cultivation. For many years the primary crop was sugar cane; today vegetables, tea, tobacco and flowers are also grown commercially. About 14% of the land is occupied by buildings—housing and industry. The remaining land is occupied by grasslands, forest and scrub lands.

While considered an African country, its history and heritage link Mauritius to Europe, India and China as well as Africa. In the early 16th century the Portuguese landed on the islands, but they did not establish settlements. In the 17th century the Dutch attempted to colonize the island with slave labor from Africa. In 1638 the Dutch East India Company sent settlers, who later moved on to Cape Town. The French arrived in 1721 and established the French East India Company. They developed the sugar cane industry, with labor from Africa. One hundred years later the English took over, imported labor from India, and developed the sugar cane industry further. While Mauritius achieved its independence from Britain in 1968, it became a Republic only in 1992. Today the country is a member of the Commonwealth, the UN and the OAU.

The country presents a rich panoply of cultures. While English is the official language, French is dominant, and the majority of the population speak Creole. There are also a variety of Indian

1 UNICEF, Situation Analysis of Women and Children in Mauritius, 1994, pg. 7
languages spoken, with Bhojpuri being the most common, and Chinese is among the mother-tongue languages found in the country.

Up until the late 1960's the growth and production of sugar cane provided the basis of the economy. Sugar cane was grown on 90% of the cultivable land, accounting for 70% of the contribution of the agricultural sector to the GDP, and earning about 90% of foreign exchange. Out of a need to increase employment opportunities and decrease the country's dependence on sugar, Mauritius created an Export Processing Zone (EPZ), which attracted manufacturers to the country. The EPZ grew substantially during the 1980s, drawing large numbers of women into paid employment. This has had consequences in terms of women's roles as parents, as will be discussed below.

During the 1970s and 1980s the country experienced a number of economic crises and subsequent reforms, leading to a higher quality of life. An examination of household budgets indicates there has been an increase in real incomes and that the average family in Mauritius has benefited from current economic success. In 1994, the GNP was estimated at over US $2,500. The government is committed to maintaining low inflation. Primary and secondary education are free; tertiary education is almost free. All health care is free.

While the general standard of living has improved as a result of economic reforms, there have been negative consequences as well. As noted in the National Programme of Action for the Survival Development and Protection of Children, "Progress and transformation have begun to shape a new agenda for social policies." (MWFWCD 1994, 5) One item on the agenda is child development.

The Situation of Young Children

The situation for young children is partially defined by the situation of the family. As noted in the National Programme of Action, the situation of the family is as follows:

Virtually full employment, effective birth control devices, labor saving devices at home, the increasing number of jobs requiring less hard labor, the greater availability of manufactured clothing and food, and the provision of social security and services have all resulted in a considerably higher standard of living. Some of these factors, however, have brought new challenges and stresses to the family unit, especially to women. (MWFWCD 1994, 4-5)

Within Mauritius there is increasing concern about the fact that traditional patterns of child rearing and child caring are changing; women are entering the labor force in increasing numbers.

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2 De Chazal Du Mee, 1996. An Analysis of Early Childhood Development Day Care and Home Care Programmes, Volume I, pg. 5

The result is that fewer and fewer children are being cared for by their mothers during the early years. In addition, traditional supports in the form of extended family members are not available to help care for young children. The National Programme of Action goes on to note:

"Many of these problems and challenges have profound implications for child development, with manifold consequences for policy in such areas as maternal health, day care facilities, education and eradicating poverty." (MWFWCD 1994, 5)

It is increasingly recognized that quality child care for the youngest children (3 months to 3 years of age) needs to be provided for women in the labor force. Female participation rates in 1993 were 40.5% as compared to 82.5% for males. (De Chazal Du Mee 1996, Vol. I, 13) At the present time adequate and appropriate care for young children is not available. Thus, within this document, the focus is on the development of a social policy that addresses the needs of women and the youngest children.

**The young child population.** Children under the age of 15 represent approximately a third of the total population (27.3% in Mauritius and 35.2% in Rodrigues). Table 1 provides specific numbers in various age groups, for both Mauritius and Rodrigues, and the percentage of the total population that is represented by that age group.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Mauritius</th>
<th>Rodrigues</th>
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<tbody>
<tr>
<td></td>
<td>Number</td>
<td>%</td>
</tr>
<tr>
<td>Under 1 year</td>
<td>20,465</td>
<td>1.9</td>
</tr>
<tr>
<td>1-4 years</td>
<td>84,897</td>
<td>7.8</td>
</tr>
<tr>
<td>5-9 years</td>
<td>93,944</td>
<td>8.6</td>
</tr>
<tr>
<td>10-14 years</td>
<td>98,310</td>
<td>9.0</td>
</tr>
<tr>
<td>15-17 years</td>
<td>67,696</td>
<td>6.2</td>
</tr>
<tr>
<td>Under 18</td>
<td>365,312</td>
<td>33.6</td>
</tr>
<tr>
<td>18 &amp; Over</td>
<td>722,031</td>
<td>66.4</td>
</tr>
<tr>
<td>All Ages</td>
<td>1,087,343</td>
<td>100.0</td>
</tr>
</tbody>
</table>


The under-five child population represents 9.7% of the total population on the island of Mauritius; this is slightly higher on Rodrigues, where the under-fives represent 10.1% of the
population. Approximately 20,000 children are born each year in Mauritius, while in Rodrigues the number of births is about 700 per year. The great majority of children survive. The Infant Mortality rate is 18.6, the primary cause of death being low birth-weight babies (29.7%). (De Chazal Du Mee 1996, V ol. I, 21). The goal is to reach 12 per 1000 live births in Mauritius, and 17 in Rodrigues by the year 2000. Nearly all children are immunized (94%).

The increasing survival of vulnerable children, changing family structures and childrearing practices, and the growing participation by women in the paid labor force, are increasing the need and demand for more and better and different ways to care for and ensure the well-being of young children.

Within the Convention on the Rights of the Child (ratified by Mauritius in 1990), the rights of all children to supports which promote healthy growth and development are guaranteed. Thus in its policy in relation to young children and their families, the Government of Mauritius is seeking to provide equity in terms of access to quality services in order for children to become responsible, contributing members of the society. This can be provided through the implementation of an appropriate early childhood development policy.

Early Childhood Development (ECD)

A Definition

There are two parts to the phrase early childhood development. These are early childhood and development. Early childhood is defined as the period of a child’s life from conception to age eight. The reason for including the prenatal period is that development begins at conception; learning begins at birth. In the early years, children learn fundamental skills and develop in ways that are crucial to the success of their future education and indeed the rest of their life. They learn to walk and coordinate their movements. They learn to talk, acquiring relatively sophisticated language skills. They learn some basic thinking skills, as well as the ability to connect thought to language to action. They develop a sense of self-control and self-confidence (or a sense of failure). They learn how to relate to others and how to behave in culturally acceptable ways. They develop (or suppress) their sense of curiosity.

Children under the age of eight learn best when they have objects they can manipulate; when they have chances to explore the world around them; and when they can experiment and learn from trial-and-error within a safe and stimulating environment. At about the age of nine they begin to view the world differently. They can manipulate ideas and learn concepts mentally and are less dependent on objects than younger children. Thus in terms of learning theory, the birth through age eight time period represents a phase within a developmental continuum.

There is a second reason for including children through age eight in a definition of ECD. This is because of the importance of the transition for children either from home or from a pre-primary programme into the primary school. If early childhood programmes are to be effective, there needs to be an interface between what happens in these settings and junior primary school. This does not mean that early childhood programmes should become formal experiences for young
children. Rather, there is a need for those teaching in the early primary grades to become more aware of the experiences, skills and knowledge that children bring with them into the primary school, and to adopt more child-centered methodologies.

The second part of ECD, development, is defined as the process of change in which the child comes to master more and more complex levels of moving, thinking, feeling and interacting with people and objects in the environment. Development involves both a gradual unfolding of biologically determined characteristics and learning. Learning is the process of acquiring knowledge, skills, habits and values through experience and experimentation, observation, reflection, and/or study and instruction. The child's physical growth (both the child's health and nutrition history and current health and nutritional status) is crucial in the child's overall development. The child's current developmental status either facilitates or inhibits future learning.

In sum, Early Childhood Development refers to the overall, holistic development of children from conception through the Junior Primary years. Overall holistic development refers to the fact that in order to promote healthy growth and development, in order to develop a child's full potential, attention must be given to the child's physical (including health and nutrition), social (including spiritual and cultural), emotional (including feelings and a sense of self) and cognitive (including problem-solving and thinking) development. These dimensions are interactive: attention to one necessarily has an impact on the other dimensions; likewise, neglect of one has a negative impact on all the others. Therefore, in providing appropriate supports for young children, all dimensions must be taken into consideration. Furthermore, these aspects of a child's growth and development need to be provided for within the political, economic and social context of the nation.

The Value of Investment in Early Childhood Programmes

The early childhood years provide the foundation for all later learning and the development of life skills. Interventions in the early years of childhood offer an extraordinary opportunity to avoid or moderate learning problems, and to bring lasting benefits to individuals and society. Scientific findings have demonstrated that support of early development yields rich benefits not only in immediate ways for the child and its parents, but also over time in terms of the child's ability to contribute to the community.

For the individual, evidence from the fields of physiology, nutrition, psychology, education and related disciplines continues to accumulate which indicates that the early years are critical to all of later life. To cite a few of the findings:

1. **Brain development.** During the first two years critical brain structures develop that affect children's ability to learn. Research shows that stimulation of a child's senses affects the structure and organization of neural pathways in the brain during the formative period. By age 6, most of these connections are made (or not, as the case may be). Programmes that provide proper nutrition and support stimulation of a child's senses enhance the structure and organization of the brain. Providing opportunities for
appropriately complex perceptual and motor experiences at an early age favorably affects various learning abilities in later life and can even compensate, at least partly, for deficits associated with early malnutrition and trauma.

2. **Nutrition, health, and the ability to learn.** Children with consistent, caring attention are better nourished, less apt to be sick, and learn better than children who don't receive such care. Neglected children are more prone to sickness and malnutrition and are less equipped and motivated to learn. Programmes that support families and teach them how to provide consistent, healthy care are helping children develop the readiness to participate in school and the community.

For the family and community. Parents provide the child's first and most important learning environment. ECD programmes that provide support to parents and rely on resources within the community for their implementation and sustainability ultimately benefit parents, families and the community at large. These community and family benefits are evidenced by parents' improved self-confidence, the emergence of leaders, and by increased organization and social action in communities.

For society the benefits of early childhood interventions include:

1. **Increased economic productivity.** Interventions that support young children's physical and mental capacities lead to increased enrollment and improved progress and performance in school. School performance, in turn, is linked to children's increased economic productivity when they become adults. Early childhood programmes also free parents and older siblings to earn and learn, thus increasing their productivity.

2. **Cost savings.** Early childhood investments can reduce costs and improve the efficiency of primary schooling. Children who are better prepared physically, mentally and socially for school have an easier transition from home to school. Therefore, drop-out and repetition rates are lower and the need for remedial programmes is reduced, cutting costs. Effective early childhood programmes can also bring cost savings in areas other than education: health care costs can be cut through preventive measures in programmes which help reduce disease and accidents; the social costs of delinquency and related problems are cut as children stay in school longer; and absenteeism in the work force is reduced when parents, assured of proper care for their children, can devote their time to the job.

3. **Reductions in social and economic inequalities.** Poverty and/or discrimination can inhibit development in the early years. By failing to intervene to support positive growth and development, governments tacitly endorse inequalities. This is certainly true if early childhood programmes are available only to those who can afford to pay for them. Investments in early childhood development have been shown to modify inequalities rooted in poverty and social discrimination by giving children from disadvantaged backgrounds a fair start in school and in life. Studies suggest that these children benefit more from early intervention programmes than their more-privileged peers.
4. **Reductions in gender inequalities.** All children have a right to develop to their full potential. Attention to young girls often lags behind attention to boys, beginning and reinforcing a long cycle of discrimination. Gender-linked disparities in attitudes and expectations, and in patterns and practices of early care and development, need to be examined. There is evidence that early attention to gender can produce changes in the development of the girl child and in the way families perceive the abilities and future of that child. Furthermore, early childhood programmes can also benefit women and older siblings by freeing them from constant child care responsibility so they can learn and seek better employment and earnings.

5. **Strengthened values.** In societies where there is a concern that crucial values are being eroded, a strong incentive exists to find ways in which those values can be strengthened. Transmission of the social and moral values that guide children in the future begins in the earliest months of life. To preserve moral and social values—or to change them for the better—one must begin with young children. Values can be promoted through early childhood programmes that provide environments within which children can play and give attention to culturally desirable beliefs. Values such as living together harmoniously begin to take hold in the pre-school years. Early childhood programmes can also assist by strengthening parenting skills.

6. **Programme efficacy.** The success of other programmes can be improved by incorporating an element of early childhood care and development. Programmes that emphasize health and nutrition can benefit from the addition of attention to cognitive and social development because sound psycho-social development increases the chances of survival. Primary education programmes become more efficient when children have had developmentally appropriate pre-primary experiences; repetition and drop-out rates are lowered. Women’s programmes benefit when child care is provided, freeing women to focus on their productive role.

**Early Childhood Programmes in Mauritius**

**Children from Birth to Three Years of Age**

Within Mauritius there is recognition of the importance of the first three years in terms of lifelong outcomes. At the present time there are approximately 65,000 children under the age of three. Of concern in relation to the creation of a child development policy is that it is estimated that 30,000 of these children are cared for by people other than their parents.4

To help meet the needs for child care a variety of programmes for children 3 months to 3 years of age have been created by non-governmental organizations (NGOs). In a study conducted by De Chazal Du Mee, on the care situation for children under the age of three, they identified two

4UNICEF, Situation Analysis of Women and Children in Mauritius, 1994, pg. vii
basic forms of care for this age group: formal and informal. The Formal sector consists of organized creches/day care centers that operate in purpose-built or converted premises. According to the MWFWCD, there were 102 such creches in 1995, but not all of these were operational at the time of the study.5

Most creches/day care centers are commercial enterprises, while a few are run by NGOs or local authorities. There are examples of partnerships that have been created between local government and an NGO to operate a day care center. For example, the Municipality of Port Louis has contracted out the management of one of its day care centers to Creche Bethleem. (De Chazal Du Mee, 1996, Vol. II, 26) Further, partnerships have been created between NGOs and business. The Export Processing Zone Labor Welfare Fund provides funding for six creches, three of which are run by the Mauritius Family Planning Association, two by MAPBIN/CHAN and the sixth is situated in Floreal. (De Chazal Du Mee 1996, Vol. III, 10)

In the Informal sector there are Home Based Care Givers (where someone comes to the home of the young child, or where the mother takes the child to the home of another woman). Some Home Care Givers are remunerated (commercial); others are not remunerated (non-commercial) since they are generally members of the extended family. The percentage of children served in different settings is presented in Table 2.

<table>
<thead>
<tr>
<th>Type</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Mother</td>
<td>40</td>
</tr>
<tr>
<td>Formal Sector</td>
<td>18</td>
</tr>
<tr>
<td>Home Care Givers</td>
<td>42</td>
</tr>
<tr>
<td>Commercial- own home</td>
<td>6</td>
</tr>
<tr>
<td>Commercial-child's home</td>
<td>6</td>
</tr>
<tr>
<td>Non-commercial-own home</td>
<td>7</td>
</tr>
<tr>
<td>Non-commercial-child's home</td>
<td>23</td>
</tr>
</tbody>
</table>

Source: De Chazal Du Mee 1996, Vol. III, 6

At the present time, few of the centers are registered, and there is virtually no information on Commercial Home Care Givers— who they are, how they operate, and the quality of what they provide. Those programmes that are known vary in quality since there are no mechanisms for

5 De Chazal Du Mee, 1996. An Analysis of Early Childhood Development Day Care and Home Care Programmes, Vol. III, pg. 9
ensuring that children receive good care; standards have not been established; and appropriate training has not been provided for Home Care Givers, nor for most of those providing care in child care centers. Furthermore there are no mechanisms in place for monitoring these programmes.

Children Three and Four Years of Age

For the children in the 3 and 4-year-old age group, the situation is different. The great majority of them are in pre-primary programmes. The needs of many children in this age group have been addressed through pre-primary programmes begun in the 1970s. The extent of services has increased so that in Mauritius in 1990, 90.2% of the 4-year-olds; 64.2% of the three years; and 12.0% of the 2-year-olds were able to find places in pre-primary programmes.6

There are estimated to be 1400 pre-primary 'units', serving approximately 35,000 children. (De Chazal Du Mee, Vol I, 32). While the NGO and private sector play a major role in the provision of these services, the Government of Mauritius has taken the decision that pre-primary services should be provided for all children age 4, ‘free of charge’7. This has been done to ensure that all children have equal access to pre-primary education prior to entry into the formal system at age 5. While government subsidizes the programme, the services are being provided by the NGO community. The subsidizing of the pre-primary for four years olds was introduced in January 1997.

It is important to note that before the government subsidized the provision for 4-year-olds, the pre-primary sector received .5% of the education budget. With the subsidizing in place, pre-primary programmes now consume 5% of the education budget. (This amounts to nearly 3.8 million Rps/month, from which 18,961 students are benefiting.) Thus this is an extremely costly programme; the government cannot afford to extend this subsidy to three-year-olds, yet that is going to be demanded by the public.

Some pre-primary programmes are offered in primary schools. There are a total of 261 primary schools; 140 of these currently have pre-primary classes. Three primary schools have pre-primary classes in Rodrigues. An additional 43 classes are going to be constructed with support from World Bank. These schools are to be built in areas where children are at greatest risk in terms of developmental delays and lack adequate support.

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6Ministry of Women Rights, Family Welfare and Child Development (MWFWCD) National Programme of Action for the Survival, Development and Protection of Children, 1994, pg.27. It is not clear from the Table if these statistics are only for the island of Mauritius or if they also include Rodrigues. No separate table was provided for Rodrigues.

7Free of charge is not really accurate. The Government provides Rp 200/month/child which helps to subsidize the cost of the ECD programme. However, this amount of money would not produce a good programme, so parents pay a fee that tops-up the amount provided by Government. This fee varies, depending on the type of programme being offered.
In schools where there are 4 or more Sections in Standard I, the pre-primary school is set up to include only 2 Sections. That way there is still room for the private providers to operate. That is, the government never intends to have all pre-primary provision attached to primary schools. In fact, currently about 35% of those attending pre-primary schools are in pre-primary classrooms attached to primary schools. No projections have been made in terms of the percentage of the pre-primary population that should be covered by pre-primary schools attached to primary schools.

The Ministry of Education itself does not implement any pre-primary programmes. While the pre-primary schools are located physically in the primary school, they do not fall under the administration of the Primary School. Further, attendance at a pre-primary school attached to a primary school does not ensure entrance into the primary school.

Pre-primary schools are managed by Parent Teacher Associations. These Associations are legal registered entities. (There are clear procedures and laws that govern the operation of Associations; these are followed in the creation of PTAs to manage pre-primary schools.) While the Head Teacher in the Primary school acts as an Advisor to the PTA, he/she has no authority over the pre-primary programme, nor do they desire to have control of these schools; the advisory job is a gratis role.

Currently some pre-primary programmes are being funded through local government. At this point local government is not in a position to offer training and support to ECD programmes, but three Municipalities have shown interest in receiving training so that they can play a more active role in ECD programmes. Local government should take on increased responsibility in relation to ECD.

There is recognition of the fact that more than 3% of the child population has special needs which require specialized training, both in terms of working with the child one-on-one and in terms of integrating them into established institutions. At the present time the services available for these children have been developed by NGOs, and the children have not been integrated into on-going government provision.

**Steps toward the development of policy**

In December 1996 Mauritius hosted a regional workshop—ECD: Setting the Pace for Lifelong Learning: Priorities and Strategies for Africa. The workshop brought together 55 participants from 19 countries to share their experiences in the implementation of programmes for the young child. Within Mauritius' Plan of Action that was developed during the workshop, it was determined that an ECD Task Force would be created to work toward a government policy which explicitly addressed the needs of young children and their families. The Task Force

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8 This same model of a mix of private and public provision exists at the secondary level; 25% of secondary schools are private. At the primary level there are only 7 private schools. Thus the government provides the majority of primary schooling.
includes membership from all government ministries with responsibility for young children: the Ministry of Health, the Ministry of Women, Family Welfare and Child Development, the Ministry of Social Security, the Ministry of Education, Science and Technology, the Ministry of Rodrigues, and the Ministry of Local Government. The Task Force also includes people from the NGO sector.

During April 1997 there were a series of ECD Task Force meetings where the specifics in terms of an ECD Policy were elaborated. The policy framework being offered in this document is a result of those meetings.

The proposed policy is designed to ensure that ALL children’s needs are met, based on the Convention of the Rights of the Child. The policy specifies the role of government (central and local/municipal), non-governmental organizations (NGOs), the private sector, parents and the donor community in the provision of appropriate services. It also addresses specifically the nature of the learning environment, access, the training of teachers and support personnel, and the curriculum, all issues noted to be of concern in the Draft Policy on Education Reforms.

The National Early Childhood Development Policy Framework

The benefits of investing in early childhood care and development can be extraordinarily high. The early childhood years provide the basis for learning life-long skills and attitudes. Activities and programmes planned for parents and young children should emphasize the development of the child's intellect, the child's physical and emotional well-being, motor skills, autonomy, initiative, emotional development, social skills and self esteem. Further, support for young children does not merely refer to establishing preschools or kindergartens. It refers to all the activities and interventions which address the needs of young children and help to strengthen the contexts in which they are embedded: the family, the community, and the physical, social, and economic environment. Both knowledge of the child development process and examples of concrete programme experience are available to be drawn upon to create and operate such programmes. What remains is for enlightened leaders to make the commitments that are needed for action.

Objectives

The national early childhood development policy is an indication of the Government of Mauritius' commitment to the welfare of children and the future they represent. Specifically it:

- speaks directly to the issue of young child development and the importance of ECD provision;
- clarifies the roles, responsibilities and relationships between government, non-governmental agencies, the private sector, communities and families for the betterment of children’s lives;
- brings together the sectors involved in early childhood programming, providing them with a framework within which to take action, and allowing for the coordination of efforts;
- consolidates and systematizes existing laws, programmes and activities related to ECD for the maximum benefit of all children;
- mobilizes and allocates resources for ECD programmes, within the government and from others;
- provides guidelines and standards for those wishing to develop quality ECD programmes.

The Approach

Through a National Early Childhood Development Task Force early childhood programming shall be developed and coordinated as government, NGOs and the private sector work in partnership to create services that meet the needs of young children and their families. The end goal is sustainable early childhood programmes, accessible to all young children and their families, with particular emphasis being given to supporting the development of ECD programmes in rural areas and for children living in difficult circumstances.

The Task Force will consist of representation from Government, NGOs and the private Sector. The Task Force would be chaired by the Permanent Secretary from the Ministry of Women, Family Welfare and Child Development. An ECD Coordinator shall be appointed from within the Ministry of Education, Science and Technology, the Ministry of Health, the Ministry of Social Security, the Ministry of Local Government, and the Ministry of Rodrigues, and from the NGO sector to coordinate the implementation of ECD programmes within their sectors.

An Early Childhood Trust Fund shall be established to provide funding for ECD programmes. There is strong government support for the development and implementation of ECD programmes. However, philosophically and practically the full responsibility for funding these programmes should not fall on the Government. To encourage multi-sector involvement in ECD an Early Childhood Trust Fund shall be created for the purposes of supporting ECD activities. The Trust Fund will be established in such a way that contributions to the Trust Fund can be made by Government, national foundations/businesses, international donors and individuals.

Principles Underlying This Approach

Assumptions about the role of the family and state:

9 An alternative to creating a separate fund is to reactivate and regularize the Pre-primary Trust Fund, expanding its scope.
1. **The primary responsibility for the support of a child's healthy growth and development lies with the family.** The family is the child's first and primary learning environment. The family provides children with critical early experiences that are the base for later learning and life. Parents are motivated to provide the best experiences possible for their children, and have knowledge, skills and experiences that need to be built upon when creating an early childhood programme.

2. **The state shall ensure to the maximum extent possible the survival and development of the child.** To do this the State shall provide families with the support they need so that they can carry out their responsibilities during the child's earliest years. This can be accomplished through a variety of ECD approaches, including the education of parents and/or caregivers and/or direct care and education of the child in formal and non-formal centers, in the neighborhood and in the home. It can also include the development and support of 'enabling' programmes such as maternity and paternity leave.

Assumptions about the role of government, non-governmental agencies, the private sector and communities.

3. **ECD provision shall be expanded through the creation of partnerships.** The principle of developing partnerships between government, non-governmental agencies, and the private sector arises from social as well as financial needs. The development, management and funding of early childhood provision is the joint responsibility of central and local governments, the private sector, and parents. Collaboration is consistent with a holistic view of the child and it will: decrease duplication of services in some areas when other areas receive no services; assure more equitable access to ECD programmes; and maximize the use of human and fiscal resources.

4. **Non-governmental organizations (NGOs) and the private sector have made significant contributions to ECD programmes.** Their experiences, skills and knowledge shall be maintained and built upon. The NGO community and the private sector have developed both appropriate delivery systems and training. Capitalizing on the experience of these agencies will enhance the provision of ECD programmes throughout the country.

**Strategies**

Some of the following strategies relate directly to the principles of development and learning set out previously. Others are general programming strategies that apply to ECD programmes as well as to other efforts. At the core of the strategies is the desire to create and implement effective and sustainable programmes.

1. **Programmes shall be integrated in conceptualization, planning, service delivery, evaluation and promotion.**

   This strategy derives in part from the holistic nature of child development in which physical, mental, social, emotional and spiritual dimensions of development interact with and affect each other. Hence, effectiveness requires integrated attention to children. In
addition, there is a maximization of resources when programmes are multi-dimensional, combining health, nutrition, education and social actions.

2. **ECD programme models shall be built on the strengths of communities.** These strengths include: traditional family and social structures that can be mobilized; rich traditional practices that are supportive of children's growth and development; parents' strong desire to provide the best for their children; people's desire for education and knowledge; and the networks that have been created as a result of the fact that many people belong to social and religious organizations.

3. **ECD programmes shall be developed to provide equity in access.** While the aim is to provide universal attention to young children, there is special recognition of children living in conditions that put them at increased risk of delayed or debilitated development, and the situation of children with special needs. This strategy recognizes the need for all children to be supported as they grow and develop, while stressing the urgency of attending to children living in poverty.

4. **Coverage shall be achieved by combining a variety of approaches rather than developing a single national model meant to apply to all.** Attention to all the children shall be sought through a series of different programmes responding to distinct needs. There will not be one national programme that is extended to all children, parents or communities.

5. **Complementary strategies shall be developed and implemented to meet ECD goals.** ECD programmes cannot be implemented in isolation. They shall be part of a broader conceptual effort that addresses the needs of children from birth through the early primary years. Since the child's development is affected by the environment (the home, the community, social institutions, legal frameworks, and a cultural ethos), a comprehensive programme to improve child development shall function simultaneously at different levels, focusing respectively on the child, caregivers and national institutions and policies. Programme approaches include work with caregivers (parents, members of the extended family), direct services to children in centers, programmes for groups of children in homes, changes in laws and regulations, and advocacy. (Table 3 presents a summary of eight complementary strategies that can be implemented to achieve ECD goals.)

6. **ECD programmes shall reflect diversity.** It is not necessary for all children to receive the same kind of early childhood services. The actual form the programme takes will vary depending on local needs. This strategy derives in part from the social and individual variation in children's needs. It is also derived from a recognition of the cultural diversity which exists within Mauritius. Programmes which respect this diversity will necessarily differ.

7. **An inter-generational view shall be taken, and ways shall be sought to involve children, youth and adults in ECD programmes.** Programmes of early childhood development can and should benefit parents, other caregivers and community members as
well as children. Child care, for instance, is generally the responsibility of various family members (older siblings and extended family members in addition to fathers and mothers). Thus ECD programmes can focus on supporting these individuals in their caregiving task. Further, programmes shall take into account the needs of families as well as the needs of children.

**8. Systems shall be put into place to ensure quality.** It is essential that quality be ensured while increasing coverage. Increasing supply before endeavoring to improve quality misses the essential point that without quality, costs will be incurred later on, in schooling and by society. Low quality programmes are ineffective, deprive children of benefits, and represent a waste of resources. A quality programme is appropriate to the child's stage of development and addresses the needs of the child, while respecting individual differences. In seeking quality, it shall be recognized that quality is affected by the motivation and training of programme personnel, the physical environment, the materials used, the curriculum, and the supports available to providers.

Quality cannot be legislated. Setting norms and standards does not guarantee quality. Neither is quality defined by expenditure level. Nonetheless a process for establishing standards (in relation to facilities, staffing, curriculum and programme quality) and for effective monitoring shall be established. This shall include a clear definition of responsibility for standards at the central and local levels. Standards shall be complementary and consistent across the health, social welfare and education sectors. What is important is that quality be defined within the Mauritian context, and that it not be identified only with high-cost pre-primary models.

**9. Cost-effective ECD programmes shall be promoted.** Increasing access is an overriding issue for ECD. Thus there shall be an emphasis on affordable models. The sustainability of programmes, and in particular those in remote and isolated areas, shall be a critical factor in determining a strategy that will increase access. It is imperative to promote adoption of low cost programmes to ensure maximum coverage, but not at the cost of quality. This strategy recognizes the importance of using scarce resources efficiently and effectively. In general, strategies that stress prevention are more cost-effective than compensatory strategies.

**10. Monitoring, assessment and evaluation shall be incorporated into programmes from the outset.** This strategy recognizes that programmes are only effective and sustainable when they include the capacity to analyze strengths and weaknesses and to adjust programmes accordingly. Assessment/evaluation processes need to be an integral part of all programmes. This shall occur at several levels. There shall be an assessment of the child's developmental progress. There shall be an evaluation of the impact of the provision on the child's progress through school and in relation to life-long learning. As well as focusing on the child, there shall be an evaluation of the ECD programme being provided and the primary system the child is entering. An assessment of the teacher training and support process is critical. And there shall be an assessment of the
effectiveness of linking parents, the community, NGOs and government for the purposes of supporting children's development.

### TABLE 3
**EARLY CHILDHOOD CARE AND DEVELOPMENT: COMPLEMENTARY PROGRAMME STRATEGIES**

<table>
<thead>
<tr>
<th>Programme Approach</th>
<th>Participants/Beneficiaries</th>
<th>Objectives</th>
<th>Models</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Educate Caregivers</td>
<td>- Parents, family - Siblings</td>
<td>- Create awareness - Change attitudes - Improve/change practices</td>
<td>- Home visiting - Parental education - Child-to-Child programmes</td>
</tr>
<tr>
<td>2. Deliver a Service</td>
<td>- The child (0-8)</td>
<td>- Survival - H: Holistic Development - Socialization - Rehabilitation</td>
<td>- Home day care - Integrated child development centers - 'add-on' centers</td>
</tr>
<tr>
<td>3. Promote Community Development</td>
<td>- Community - Leaders - Activators/Promoters</td>
<td>- Create A wareness - M obilize for A ction - Change conditions</td>
<td>- Technical mobilization - Social Mobilization</td>
</tr>
<tr>
<td>4. Strengthen national resources and capabilities</td>
<td>- Programme Personnel professionals paraprofessionals</td>
<td>- Create A wareness - Improve skills - Increase materials available</td>
<td>- Training - Experimental demonstration projects - Strengthen infrastructure</td>
</tr>
<tr>
<td>5. Advocate to increase demand</td>
<td>- Policy-makers - Public - Professionals</td>
<td>- Create A wareness - Build political Will - Increase resources - Change A ttitudes</td>
<td>- Social M arketing - Ethos creation - Knowledge dissemination - Employer-supported child care</td>
</tr>
</tbody>
</table>
Roles and Responsibilities

The Role of Government

The Government of Mauritius has determined that it will take significant responsibility in relation to ensuring access to quality services for children from conception throughout the early childhood period, which is inclusive of junior primary. The government has taken responsibility for primary education, and it is progressively providing more and more support to pre-primary provision. Within this policy framework the provision for children 0-3 is also being addressed.

Recommendations. It is being recommended that government ensure that the needs of young children and their families are met— from conception to age 8. To fulfill this responsibility, government will work in partnership with NGOs and the private sector to ensure coverage and quality provision. The specific role of government should be to:

- Set general ECD goals and objectives;
- Ensure coordination of ECD programmes and interventions at all levels;
- Ensure quality through:
  - Setting standards and establishing regulations based on best practice.\(^\text{10}\) The standards should define the requirements; organizations will be registered and allowed to operate when they meet these requirements;
  - The development of a teacher/caregiver certification process that builds on both experience and academic training and provides a 'step' system that allows people to progress in accordance with their potential;
  - Monitoring and evaluation of ECD programmes;

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10 Standards should address such issues as: teacher/pupil ratio; staff qualifications (aptitude, basic education, training, creativity, experience); safety, health and hygiene; nutrition; scheme of service; legal responsibilities; access to water and toilet facilities; administration and management of programme; code of conduct; equipment and materials; access to health services.
Ensure access for all:

While government will not provide direct services for all children in the 0-5 age range, the government will ensure the provision of appropriate ECD programmes in areas not served by NGOs or the private sector;

Finance specified ECD components:

- Government will provide the training for trainers, and cover the costs of maintaining a core group of trainers who can then work to train trainers within NGOs;
- Government will help subsidize the provision of care as it currently is for 4 year olds in pre-primary. Subsidies will also be provided for children with special needs;

Define the role of each relevant ministry in terms of its commitment to young children and their families;

Develop a mechanism to ensure continuity of ECD policy and provision regardless of changes in government.

Roles of Specific Ministries:

Role of Ministry of Women, Family Welfare and Child Development

- Establish standards for programmes serving children 0-3;
- Develop procedure manual— how to set up and manage a programme for children 0-3\(^{11}\);
- Provide monitoring and support to programmes;
- Develop curriculum guidelines for 0-3 provision, in collaboration with NGOs;
- Determine qualifications for caregivers, taking into account formal training and experience;
- Develop training guidelines for Home Based Care Givers and Creche providers, in collaboration with NGOs currently offering training;
- Develop linkages in terms of the curriculum and training between pre-primary and primary school;
- Use current Resources Centers as a hub of activities for ECD training/support;

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\(^{11}\)The Procedure Manual/Handbook can assist people in establishing an ECD programme. The Manual should include topics such as: determining goals and a target population; getting started - finding space (accessible, safe, with water, electricity, toilets); becoming a legal entity; determining the curriculum; establishing a Code of Practice; staffing (determining staffing qualifications, advertising, interviewing and hiring staff); developing management and administrative procedures; creating a budget; financing the programme. A parallel manual needs to be developed for those working with children 3-5 years of age.
Train ECD Trainers for center and home based programmes serving children 0-3;
Establish a legal framework for the mandatory registration of day care/creches and home based care;
Redefine the role of the National Children’s Council in terms of its mission and power in relation to ECD.

Role of the Ministry of Education

Establish standards for programmes serving children 3-5;
Implement legislation requiring the registration of pre-primary programmes;¹²
Develop procedure manual—how to set up and manage a programme for children 3-5;
Provide monitoring and support to pre-primary programmes;
Develop curriculum guidelines for 3-5 provision, in collaboration with NGOs and experienced providers;
Determine qualifications for pre-primary teachers and assistants, taking into account formal training and experience;
Develop training guidelines for pre-primary teachers and assistants, in collaboration with Mauritius Institute of Education (MIE) and NGOs currently offering training;
Develop linkages in terms of training, curriculum and pedagogy between pre-primary and junior primary to ensure a smooth transition for children;
Review the pedagogy in pre-primary and primary to ensure it is in accordance with ECD principles and children’s rights;
Use current Resource Centers (9) as a hub of activities for ECD training/support;
Ensure inclusion of children with special needs in pre-primary programmes;
Upgrade the status of pre-primary teachers.

Ministry of Social Security

Ensure that children with special needs are included in ECD provision;
Provide support systems for parents with special needs children;
Provide resource persons to train personnel working with special needs children;
Provide resource persons for training in detection and referral;
Develop guidelines for the inclusion of children with special needs in ECD programmes.

¹²Under the Education Act, Government Notice 106 of 1987, all preschools are required to register with the Ministry of Education Science and Technology. Schools are also supposed to register admissions and maintain a Health Card for pupils.
Ministry of Health

- Include more basic child development information within current training programmes for Community Health Workers and nursing personnel;
- Expand the current Health Card to include developmental indicators;
- Coordinate training programmes with MWFWCD and MOE to introduce appropriate health messages in curriculum and the training of personnel;
- Provide regular and direct access to health services for children through periodic screening in ECD programmes;
- Monitor the sanitation, physical facilities, and food handling practices in ECD programmes;
- Review and assess the impact of current health services on women with young children.

Ministry of Local Government

- Take increasing responsibility for working with communities to both define community needs and to ensure the development of appropriate ECD services;
- Develop a community ‘map’ of ECD services to identify those who are currently receiving services and those children who are in need of services. The map should be updated periodically;
- Provide an individual to be trained as an ECD trainer who can work at the District/Municipal level to provide appropriate training and support to ECD providers;
- Take on responsibility for raising awareness of ECD issues;
- Be responsible for the registration and monitoring of local ECD programmes;
- Provide funds to subsidize ECD programmes—through their own funds and through government grants;
- Provide play facilities for young children.

Ministry of Rodrigues and Outer Islands

- Ensure the provision of quality ECD services to children and families in Rodrigues;
- Adapt national curriculum guidelines as appropriate for the context;
- Develop a collaborative network of providers in Rodrigues to ensure ECD coverage;
- Provide appropriate training for caregivers, community health workers and pre-primary teachers.

Ministry of Finance

- Allocate funds to ECD programmes;
- Provide guidance in the creation of alternative funding strategies.
Ministry of Planning and Development
- Include ECD within the Priority List to encourage people to enter the profession.

Ministry of Sports and Leisure
- Develop programmes appropriate for the young child population.

Ministry of Arts and Culture
- Insure that the arts and culture are incorporated into ECD curriculum—at all levels.

The Role of Non-Governmental Organizations
Historically NGOs have played a significant role in the development of ECD programmes. They established the first pre-primary schools in the 1970s and remain a significant provider of ECD services. Through NGOs, alternative models of care have been created to meet the needs of children most in need of early childhood provision.

In addition to having created a variety of ECD models, the NGOs have developed training systems. Initially these were created to meet their needs to staff their own programmes. However, the NGOs with more experience provide training outside their own programme framework. Thus they have a significant role to play in terms of programming and training.

Recommendations. It is recommended that NGOs:
- Work with government to actually implement ECD programmes;
- Provide appropriate training for caregivers, teachers and assistant teachers;
- Work together with government to develop appropriate training and credentialling systems that are applicable across all providers of ECD services;
- Participate in the National ECD Task Force, working with governmental agencies to create and oversee the implementation of the ECD Policy;
- Draw on the Mauritius Council of Social Service (MACOSS) regarding children's issues.

The Role of the Private Sector
The private sector includes two groups of people: there are those who operate ECD programmes as a private business; and there are those involved in employing women. Each of these groups has a contribution to make.

Private providers of ECD services
The great majority of pre-primary programmes are provided by people who establish an ECD programme and operate it on their own. While they have developed a service that they think is appropriate, they are also in the business of making money.
**Recommendations.** It is being recommended that those providing ECD services on a private basis:

- Be encouraged to continue to operate quality programmes;
- Register their programmes with the proper authorities to ensure basic standards of care;
- Have a representative on the National ECD Task Force.

**Business and philanthropy**

Within Mauritius there is a history of large businesses providing support to ECD programmes for their employees through their Welfare Funds (e.g., Sugar Industry Labor Welfare Fund and the EPZ Welfare fund.)

**Recommendations.** It is recommended that private businesses contribute to ECD programmes through:

- Creating ECD programmes for the children of their employees. These can either be
  - on-site, depending on where the business is located and the feasibility of allocating appropriate space to the ECD programme, or
  - through vouchers to employees who can then 'purchase' appropriate child care at a facility of their choice;
- Subsidizing existing ECD services;
- 'Adopting' a community and providing finances to sustain their ECD programme(s);
- Donating equipment to ECD programmes, or provide food and/or materials;
- Becoming involved in a personal capacity by sitting on the Boards of NGOs offering ECD programmes. This will bring management expertise to the enterprise and it helps raise the awareness of the public to ECD issues.
- Contributing to the Early Childhood Trust Fund

**Creation of a National Coordinating Body**

Given the inter-sectoral nature of early childhood development, it requires the support of a variety of ministries. In addition, historically a wide range of NGOs have developed services for young children, and private entrepreneurs have created services. In order to ensure quality provision, and to decrease the possibility of duplication, coordination of all these efforts is required.
Recommendations. It is being recommended that a National Early Childhood Development Task Force be created for the primary purpose of overseeing the development and implementation of the National Early Childhood Development Policy, and the coordination of ECD services. The Task Force will consist of competent and specialist membership from:

- Ministry of Women, Family Welfare, Child Development
- Ministry of Education, Science and Technology
- Ministry of Rodrigues and Outer Islands
- Ministry of Health
- Ministry of Social Security
- Ministry of Planning and Development
- Ministry of Finance
- Ministry of Local Government
- State Law Office
- NGOs
- Private Providers
- Early Childhood Development Trust Fund

The specific functions of the Task Force will be to:

- Bring together Government, local authorities, NGOs and the private sector for the purposes of
  - sharing information and experiences
  - coordinating ECD services within a given municipality or district;
- Promote the development and expansion of ECD services;
- Advise the government on all aspects of ECD;
- Co-ordinate with international agencies engaged in early childhood programming, providing a brokerage function;
- Promote awareness of the needs of young children;
- Promote the importance of parenting, parent education and support;
- Engage in advocacy to promote the interests of young children;
- Suggest policy in relation to ECD provision;
- Monitor implementation of the National ECD Policy;
- Evaluate effectiveness and relevance of the ECD Policy;
- Propose amendments to/changes in the ECD Policy;
- Establish responsibility of each Ministry in policy implementation;
- Examine current Labor laws and legal structures in relation to support for ECD and make recommendations for changes where necessary.

The National ECD Task Force shall meet quarterly. Sub-committees shall be formed as required (e.g., on curriculum, and on training). Resource persons (consisting of practitioners, as well as
academics) will be co-opted to work with these sub-committees. The committees will meet on an as-needed basis. Over time, as the ECD policy becomes well established, it is anticipated that there will be less demand on the time and energy of Task Force members.

**Actions to be Taken**

At the present time there are inadequate data to guide policy implementation. As noted in the National Programme of Action, "As no systematic data exists on the number of families living below the poverty line, it is difficult to provide evidence on the position of children living in economically vulnerable families." (National Programme of Action 1994, 3) Therefore as the ECD Policy is implemented, baseline data shall be collected so that there is a referent for an assessment of access and quality. Before actions can be taken in regards to provision, the following kinds of data should be collected:

1. Surveys should be conducted to collect adequate information on:
   - the number of children served, by age group
   - the number of children with special needs, by age group and type of need
   - the kinds of services being delivered, by age group
   - who is delivering the services
   - the geographic distribution of services
   - distribution of services by socio-economic group
   - data on the costs and financing of the various services\(^\text{13}\);

2. Survey of all personnel involved in the delivery of ECD services, by ministry—(e.g., Ministry of Health Community Health Workers and Nursing personnel);

3. Survey of all the materials that are available for parents, and how parents can access them; determine appropriate mechanisms for reaching parents (e.g., through women's groups, women's centers, community centers, media, etc.)

4. Qualitative assessment of programme models— their goals and objectives and the quality of service provided;

5. Qualitative assessment of current training programmes— their goals and objectives, their course content, structure and effectiveness;

6. Assessment of those providing training— their qualifications, experience;

\(^\text{13}\)The majority of these data were collected in the De Chazal Du Mee (1997) study of child care for the 0-3 year olds; comparable data are not available on children 3-5 years of age.
7. Assessment of individuals currently providing services in 0-3 and pre-primary programmes.

Additional actions that are required to aid ECD Policy implementation include:

1. Development and pilot testing of standards for home based care, day care and creche programmes, and pre-primary programmes;

2. Exploration of alternative ways of organizing home based care (e.g., attaching them to day care centers, attaching them to MWFWCD Resource Centers).

Specific Recommendation in Relation to ECD Components

At a series of national workshops on ECD Policy, members of the ECD Task Force developed specific recommendations that would help take ECD forward in relation to two critical components: curriculum and training.

Curriculum

At the core of the ECD programme is the curriculum to be used with the beneficiaries of the programme—whether that be parents or children or the public at large. Curriculum refers to the experiences that comprise an ECD programme. A complete curriculum provides the theoretical framework for the activities to be undertaken. It describes the role of the teacher/caregiver in relation to children's learning. In addition a curriculum suggests the kinds of activities to be undertaken. It also provides a means of assessing children's progress in relation to the curriculum. A teacher's manual can be developed in addition to the curriculum, that suggests specific activities that can be undertaken.

The curriculum content for children should include a focus on children's health, nutrition, education, and psycho-social development, and prepare children both for school and lifelong learning. To meet the specific needs of young children, curriculum guidelines should be appropriate to the developmental and learning needs of children in the various age groups being served. Further, the curriculum should be culturally sensitive, and prepare children for their participation in society.

Recommendations. It is recommended that curriculum guidelines be provided for all those working with young children and their families. In terms of services to be developed for children, there should be curriculum guidelines for those working with children from 3 months to three years, guidelines for those working with the 3-5 population; and curriculum for those working with the 5-8 population. These should be developed concurrently to ensure continuity in terms of a developmental continuum across the age groups, and with a consciousness of the importance of linking children's experiences across the different settings.

For children from 3 months to 5 years of age, national curriculum guidelines will be developed. For children in the 5-8 year age range, a more formal curriculum has been developed. The
guidelines to be established for the young age group allow providers flexibility in terms of activities and their appropriateness in terms of cultural context. What follows are some specific recommendations in relation to the curriculum for the youngest children.

Children 3 months to 3 years of age—being cared for outside the home

For this age group a handbook will be created which provides caregivers information on:

- Developmental stages from birth through age five;\(^{14}\);
- Suggested activities in relation to each of those stages;
- How to set up and organize a child care facility—at a home or in a center;
- How to work with parents to get them involved in parenting to the extent possible;
- Appropriate equipment, toys and materials for use with this age group;
- Health and nutrition information.

The handbook for those caring for children 0-3 will be developed by a sub-committee of the ECD Task Force and will be produced by the Ministry of Women, Family Welfare and Child Development.

Children 3-5 years of age

A handbook will be created for those operating programmes for children 3-5 years of age. It will include:

- Information on developmental stages from birth through age eight;\(^ {15}\);
- How to set up and organize a pre-primary programme;
- Appropriate equipment, toys and materials for use with this age group;
- Health and nutrition information;
- How to work with parents to sensitize them to the importance of play and child-centered learning methodologies to promote children's optimal development, and to create an awareness that education is more than CPE exam results;
- Curriculum Guidelines.

\(^{14}\) The information on developmental stages will go beyond age three since some children in home based or day care settings will be more advanced developmentally, and caregivers need to be aware of what to expect from and the kinds of activities that will support the development of these children.

\(^{15}\) It is important for teachers to have an understanding of the continuum of development. Thus they will be given information on the developmental stages that are normally found before and after the ages of the children they are serving.
Rather than developing a full curriculum for those working with children 3-5 years of age, national government will provide a statement of appropriate goals and objectives for children in this age group. In terms of pedagogy, the guidelines will emphasize the importance of guided play, in a non-formal environment. In terms of content, the emphasis will be on the development of child-centered activities that promote children's physical, social, cognitive and emotional development, and the need to provide children with opportunities to explore things on their own, engage in problem-solving, be creative, build on and extend their language skills, be creative, develop a positive sense of self, learn to work with and respect others, and participate in pre-reading and pre-writing tasks.

It should be noted that there is already a Task Force for Curriculum Development and Training, based in MIE, although it has broad membership and is inclusive of NGO's and the private sector programmes as well as Ministry of Education personnel. The focus of the Task Force is on the pre-primary age group. The MIE Task Force has already produced a Pre-Primary curriculum, and they are planning to produce a teacher's manual to accompany the curriculum. While these materials would be made available to those implementing pre-primary programmes, they would not be obligated to use them.

Within the Ministry of Education there is a National Curriculum Research Unit that has been involved in the development of a Standard I curriculum to provide linkages between the pre-primary and primary school experiences. This curriculum will be piloted tested in 1997.

It is imperative that there be coordination among the various bodies producing curricula for this age group, to eliminate duplication of effort, and to create a coherent approach to ECD.

There is a need for Curriculum Guidelines for Trainers that describe the subject areas to be included in the training of teachers, and the specification of training techniques to facilitate the training process.

Training

Training takes place at many levels. There is the training of the individual who actually works with children and/or parents. At the next level, there is a need to train trainers within the various organizations that are providing training, and there is a need to ensure that those who train the trainers (e.g., MIE and university faculty) have the appropriate training. In addition, it is necessary to provide training/orientation to all those who provide support to ECD programmes—e.g., people at the District and Municipal Council level who are responsible for monitoring local programmes, Pre-primary school Inspectors responsible for quality control; and Heads of primary schools and junior primary teachers in order to ensure a smooth transition for children from one system to another.

Recommendations. It is recommended that a National Coordinating Panel for ECD Training be created. It would be the responsibility of this Panel to develop three linked but separate training systems: one for those working with children 0-3; one for those working with children 3-5; and
one for those working with children 5-8. The more the training of the latter two groups can overlap, the better.

It is important to note that there are currently people working with 0-3 year olds and some working with the 3-5 age group who have received little or no formal training. In the development of training and certification systems it is critical that the experience of those currently providing service be recognized, and that a range of alternative certificates be developed.

For children 0-3, it is recommended that The Ministry of Women, Family Welfare and Child Development, working with experienced NGOs:

- Define clearly the knowledge, skills and competencies required for working with this age group;
- Develop criteria for the selection of caregiver trainees to include dimensions such as aptitude, creativity, energy, flexibility, communication skills, experience with the age-group, as well as academic qualifications; (Prior to entry into a training programme the individual should participate in the setting where they wish to work upon completing training, to know if the work is of interest to them.)
- Develop a training system for those working with young children, based on what is required for working with these children;
- Develop alternative training models (pre-and in-service and distance), leading to certification for Home Based Care Givers and Day Care workers;
- Determine a certification system that provides two to three steps—from the most basic qualifications to 'expert' status;
- Identify people within the Ministry who should receive advanced training to provide appropriate training and technical support within the Ministry.

For children 3-5, it is recommended that The Ministry of Education, working with the Mauritius Institute of Education and experienced NGOs:

- Develop a training system for those working with children 3-5, taking into account:
  - the basic qualifications that people are likely to bring to the task
  - the knowledge, skills and competencies required for working with this age group
  - the experience that current workers bring to the task;
- Determine a certification system that provides two to three steps—from the most basic qualifications to 'expert' status;
- Identify people within the Ministry who should receive advanced training to provide appropriate support within the Ministry.

Another major contributor to the Pre-primary system is the Mauritius Institute of Education. Specifically, it is recommended that MIE:
- Develop curriculum guidelines;
  - Individual programmes would have the possibility of adapting these to local conditions and/or adding additional components to the basic framework.
- Participate in an assessment of all training systems currently in place, identifying their strengths and weaknesses;
- Develop alternative training models (pre-and in-service and distance) leading to certification for pre-primary teachers and assistants;
- Take responsibility for the development of the basic training system;
- Offer the Pre-Primary Certificate.

A **Child Study Center** should be created at MIE. There are a number of research projects that should be undertaken to better understand various components of the ECD programme. These include:

- An evaluation of the Basic Pre-Primary training course offered by MIE;
- Collect baseline data in terms of children's development;
- A baseline study needs to be done, by age groups, to determine the pattern of children's development. This can be used for comparison purposes for children in different ECD settings.
- Child Assessment Tools need to be developed to assess children's progress;
- The teaching and learning of non-maternal languages in a multi-lingual society needs to be explored.

Note: Many of these tasks may already fall within the mandate of the Task Force on Curriculum Development and Training. Before developing new mechanisms, the role and functions of that Task Force should be reviewed.

Overall, in terms of training some of the following should be considered.

**RESOURCE CENTERS**

There is a need for ECD resource centers where:

- Refresher courses can be provided;
- Caregivers and teachers have access to materials and equipment—perhaps on a rotating basis in the form of a lending library;
- Model/demonstration child care programmes can be developed;
- Parent education programmes can be offered;
- A child care clearing house for ECD services in the community can be established listing those who are qualified/recognized to offer services;
- Referrals can be made for children with special needs (if there are services);
- Support groups could be established, at a minimum.
Throughout Mauritius there are a variety of centers: Women’s Centers, Community Centers, Social Welfare Resource Centers (4), Ministry of Education Resource Centers (9). What needs to be explored is how these can be used to support ECD efforts. It would be preferable if there could be resource centers to provide support to those working with children 0-8, rather than having services divided according to the 0-3, 3-5 and 5-8 age groups.

**IDENTIFICATION OF A TRAINER POOL**

Throughout Mauritius and Rodrigues there are people who are serving as trainers for various ECD programmes. Their skills and knowledge needs to be assessed and then they need to be recognized as legitimate trainers, and placed in training positions—within government, within NGOs and within the private sector. At this point people who have been trained as trainers are working in other than training roles and their skills and abilities are not being utilized. People are unaware of who could help them train staff.

**THE NEED FOR ADDITIONAL TRAINING FOR TRAINERS**

Within Mauritius there are limited opportunities to gain the kinds of skills and knowledge that trainers require. Thus mechanisms should be put in place for the advanced training of trainers to take place in other countries, with support from bilateral, UN agencies and other foundations and international organizations.

**Other Issues for Discussion/Consideration**

There are a variety of issues that need to be discussed within the National ECD Task Force. Since they were mentioned in the April 1997 workshops, they are being recorded here for future consideration.

**FINANCING OF ECD PROGRAMMES**

At the present time Government is subsidizing the participation of four-year-olds in pre-primary programmes. The government cannot afford to do this for the children aged three. The feasibility of creating other funding mechanisms needs to be explored. Examples include:

- Tax exemption for employers who provide childcare;
- Tax on workers in large business that goes into a special Trust Fund for children's programmes.

**PUBLIC AWARENESS OF ECD ISSUES**

There is a lack of awareness of the importance and value of good parenting. The public at large needs to be sensitized to early childhood concerns. In addition, parents need to be given specific information about child development. They also need support as they develop ways of interacting with the child that support the child's development. There need to be ways to help reinforce the parent's involvement with the child. There is also a need to assess the effectiveness of a variety of strategies in raising public awareness: TV, long and short spots; radio; video; newspapers; posters; campaigns.
REMUNERATION FOR EARLY CHILDHOOD PROVIDERS

There is recognition of the fact that in order to draw more people into the ECD sector, it is necessary to raise the status of those working in ECD programmes. One of the ways of doing this is through a salary scale. What needs to be developed is a Scheme of Work for people at different levels of service, and then to submit these to the NRB for salary equivalencies. It is being recommended that assistant teachers be given a salary of Rps. 2,500/month. For teachers, the recommended starting salary is Rps. 4,000/month.

MANAGEMENT AND CAPACITY BUILDING

At the present time the Ministry for Women, Family Welfare and Child Development has responsibility for services for 0-3’s, and they have also taken on the responsibility for overseeing the entire ECD Policy initiative. The responsibility for ECD will lie with the Child Development Unit. However, at the present time they do not have the administrative and/or technical capacity to provide leadership and backstopping in ECD. If the National ECD Policy is going to be implemented, then there is a need to allocate adequate fiscal and human resources to the task, and to make ECD a priority within the Ministry. There is also a need to upgrade the capacity of the Ministry of Education in the development and implementation of services for children 3-5.

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