



An assessment of the situation of the  
Early Childhood Development Centre Sector in  
Sint Maarten after Hurricane Irma.

2020 UNICEF Netherlands

## ABBREVIATIONS

<b>CARICOM</b>	Caribbean Community and Common Market
<b>CCDC</b>	Caribbean Child Development Centre
<b>CDB</b>	Caribbean Development Bank
<b>EA</b>	Educational Assistant
<b>ECCE</b>	Early Childhood Care and Education
<b>ECD</b>	Early Childhood Development
<b>ECD Centres</b>	Day care centres and early stimulation classes in schools
<b>ECE</b>	Early Childhood Education
<b>EI</b>	Early Intervention
<b>GOSM</b>	Government of Sint Maarten
<b>ISCED</b>	International Standard Classification of Education
<b>IYPF</b>	Integrated Youth Policy Framework
<b>M &amp; E</b>	Monitoring and Evaluation
<b>MECYS</b>	Ministry of Education, Culture, Youth and Sport
<b>NGO</b>	Non-Governmental Organization
<b>NIPA</b>	National Institute for Professional Advancement
<b>NRRP</b>	NRRP: National Recovery and Resilience Plan
<b>PSS</b>	Psychosocial Support
<b>SDG</b>	Sustainable Development Goal
<b>SECDA</b>	SXM Early Childhood Development Association
<b>SIFMA</b>	Sentro di Informashon i na Formashon Bienestar di Mucha
<b>SitAn</b>	Sint Maarten Situation Analysis
<b>SKOS</b>	Foundation Catholic Education Sint Maarten
<b>SPW</b>	Social Pedagogic Worker
<b>UNESCO</b>	United Nations Educational, Scientific and Cultural Organization
<b>UIS</b>	UNESCO Institute for Statistics
<b>UNICEF</b>	United Nations Children's Fund
<b>UWI</b>	The University of the West Indies
<b>VSA</b>	Ministry of Public Health, Social Development and Labour



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## INTRODUCTION

This assessment of the situation of the Early Childhood Development (ECD) Centre Sector on Sint Maarten after Hurricane Irma was commissioned by UNICEF Netherlands (UNICEF NL).

It was carried out by independent consultant Ms. Sian Williams in October and November 2018, after which this report was written in November 2018 and published in 2020. The assessment is intended to facilitate policy makers in Sint Maarten to focus on critical areas that will be the basis for recommendations “to strengthen the capacity of the ECD Centre sector to support vulnerable children in need in order to mitigate the adverse effects the aftermath of hurricane Irma might have on this generation”.

The assessment was prepared using a combination of document reviews, stakeholder interviews and observations in ECD Centres. The document reviews provided information and analysis on the situation of young children in Sint Maarten, including the Government’s draft policy documentation prepared prior to Hurricane Irma, post-disaster assessments by agencies and the Government’s resilience plans prepared subsequent to Hurricane Irma. The document review is attached as Annex A. Stakeholder interviews and meetings were conducted with the operators of ECD Centres and staff in early stimulation classes in schools, and with government and non-government officers with responsibilities for oversight or development of the services for vulnerable children; these provided up-to-date information on the needs and gaps to inform further programming. The list of stakeholder interviews and meetings listed is available upon request and the interview questions are in Annex B attached.

Consideration of a selection of strategies for strengthening the ECD Centres arising from discussions in Sint Maarten with stakeholders and parents follows the findings and informs the subsequent identification of ten key recommendations for action in the third chapter.





## SUMMARY OF FINDINGS

It is remarkable that the early childhood services are to a large extent up and running, proliferating, and trying to provide a quality service at a price that is affordable for families trying to get back to work. The main findings of the assessment are as follows:

- 1. Insufficient regulation of the whole sector servicing children in early childhood services, in particular of the learning programme.** The day care ordinance does not set out curriculum and programme standards. The services in schools and day care centres are not provided with guidance on how to support learning and child development for children 4 weeks to 4 years. Irma has exposed the gaps in this regard. In addition, there is no regulation for the home based infant and toddler services where less than five children are looked after by one carer; the number of these services is unknown, and the ratio of 1:4 is too high for a single carer outside of an institutional setting where there are no other persons to call on in emergency.
- 2. Shortfalls in coordination and collaboration between early childhood services and between the Government and the early childhood services, particularly in a period of proliferation of services since Irma.** There isn't a structure for oversight of the early childhood care and education as a coherent sector, including oversight of the geographic distribution of services, data on participation and demand, planning for transition to school, guidance on governance and management, and supported access to professional development and staff certification.
- 3. Lack of access of vulnerable children to available places in those services of sufficient quality to make a difference to their development.** The services require investment to improve quality, and reduce cost of access to vulnerable children. Vulnerability linked to unemployment and multiple family stresses since Irma is persisting. Investment is needed to provide assistance for 3 year-olds by improving the staff-child ratios thus strengthening the capacity to attend to the needs of the vulnerable in the group; and for the younger children investment is needed to reduce the cost of places to a target group of vulnerable children at risk of poor development.

With respect to the Government's response, and particularly of the Ministry of Education, Culture, Youth and Sport and partner Ministries with a remit for the care and education of children in early childhood, the findings and suggested strategies are:

- 1. Regulation is under review with a particular focus on activating provision within the existing Ordinance for a Quality Commission.** Suggested strategies to improve quality of services include the provision of guidance to the early childhood services on learning standards and good practice in supporting children's learning and in engaging parents; the deployment of two learning support teachers to visit and guide programming in early childhood services focusing on the under 3's in day care and the 3 year-olds in pre-kindergarten classes; and the identification of the good practice existing in the services to stimulate exchange visits, mentoring arrangements, and other informal exchanges.
- 2. Coordination of support to the early childhood sector is planned in the national policy on early childhood development.** It is suggested that the formation of a unit be prioritized to support programme development and delivery in the services, coordinate sector wide initiatives and organise a professional development programme. The unit will liaise with existing depart-

ments within the Ministry, partner ministries and government agencies to ensure coordination of inspection and registration of services, planning, data collection and analysis, support to special needs, school governance and certification of staff.

**3. Investment in the early childhood services to access vulnerable children to quality services has been included as an intention in policy documentation.** A suggested strategy is to create a Public Private Partnership, MECYS with the private sector, to provide matching funds for the cost of an additional assistant teacher in each early childhood service, to access vulnerable children to a quality service. The investment yields both programme quality improvement and fee reductions to a targeted group. As Government support is essential to leverage private sector contributions, MECYS could explore a joint venture with the Chamber of Commerce to promote the importance of supporting early childhood development and for expanding participation in services by those who need them most.



## 1. FINDINGS OF THE ASSESSMENT

### 1.1. Access of vulnerable children to good quality early childhood experiences

In short, there is a lack of access of vulnerable children to available places in those services of sufficient quality to make a difference to their development. The services require investment to improve quality, and reduce cost of access to vulnerable children. Vulnerability linked to unemployment and multiple family stresses since Irma is persisting. Investment is needed to provide assistance for 3 year olds by improving the staff child ratios thus strengthening the capacity to attend to the needs of the vulnerable in the group; and for the younger children investment is needed to reduce the cost of places to a target group of vulnerable children at risk of poor development.

Poverty inhibiting access for an estimated fifth of the population to ECD Centres: The situational analysis informing the National Policy for ECD, Third Draft, March 2017 provides estimates of the numbers of very young children living in severe poverty and vulnerability in either registered or un-registered immigrant families (p.9). "Approximately 20.5% of young children may be living in households with some level of poverty, and of them, probably about 14% live in moderate to severe poverty. From this statistic, it is possible to estimate that as many as 14% of young children are at high risk of becoming developmentally delayed." These children were thought not to be accessing day care centres due to cost. Day care centres are recognized in the policy as a 'public good' with the potential to provide important support for children's development and resilience to the impacts of poverty and vulnerability. Access by these children to early stimulation classes operated by the school boards was not known. Both types of ECD Centre are self-financing without public sector grant aid. Both require parents to pay fees.

The data on children living in severe poverty and vulnerability will need to be adjusted for the

post-Irma situation and are not currently available. It is unlikely that those vulnerable children who did not have access to ECD Centres before Hurricane Irma would have access currently for the following reasons:

- Interviews with individual operators of ten day care centres indicated that on average, across the day care centres, enrolment is down by one third. Two main reasons were cited. First, children who had been evacuated had not returned. Secondly, parents who had previously been employed could not find work after Irma and therefore could not afford for their children to continue at the day care centres. Operators spoke of strategies they had used to maintain continuity for the children, including offering part time places or reduced fees for those parents facing hardship. At the time of the assessment, there was only a trickle of enrolment increase and that was in those day care centres serving government employees or businesses recovering in the tourism sector.
- In a meeting with operators of seventeen day care centres, operators indicated that although some day care centres were thriving, a situation that was attributed to providing a service for those working parents who could afford fees and "being in the right place", some day care centres could not make ends meet as they were not in areas that were convenient for working parents. In other words, where there was work there was take up of day care places; in depressed areas, the day care centres were struggling to remain in business.
- Interviews with operators in two of the early stimulation classes for 3 year olds provided under the auspices of school boards indicated a similar picture to that in day care centres with respect to reduced access by children affected by severe poverty and vulnerability, and similar strategies to help struggling fami-

lies had been put in place. Places are offered at a fee and not all classes are operating at full capacity. One reason for this is thought to be the specific location of some of the classes in relation to the recovery of the economy in the communities surrounding where the classes are located.

*Other forms of vulnerability presenting challenges for access:* There is no structured approach to accessing children challenged by other forms of vulnerability to ECD Centres. The Draft ECD Policy (2017) identifies that services to identify, screen and diagnose developmental delay and provide early intervention and community based family support services are not accessible to those children who are in need and are without resources (p.13). The Sint Maarten Situation Analysis (2013) (SitAn) outlines the role of ECD Centres in preventing child abuse, detecting abuse and providing safeguards for children, functions that cannot be exploited sufficiently if the Centres cannot admit children vulnerable to abuse because of the barrier of high fees (p.55). The SitAn further recommends the inclusion of children with disabilities in the ECD Centres (p.72) and the inclusion of nutrition programmes (p.77). The Assessment of the Mental Health and Psychosocial support (MHPSS) needs of people affected by Hurricane Irma (2018) raised the central question of the need to provide universal access to non-specialized MHPSS activities to reduce emotional vulnerability (p.13) and to incorporate this access into disaster risk management protocols. It would appear that ECD Centres did not benefit after Irma from support arrangements for MHPSS programmes, and that there was no programme that targeted the needs of children from birth to three years old and their carers.

*Potential for ECD Centres to provide access to vulnerable children:* The current picture is one in which there is capacity across the ECD Centre sector as a whole which could be taken up by children in need of services should the issue of cost be resolved. The day care centres enroll children from as young as a month old, and provide a comprehensive care service on a full

day basis all year round. Thus they can provide a critical support for stimulating a child and for releasing a parent who has or needs to find full-time employment. Early stimulation classes enroll children at the start of the school term in which a child becomes 3 years old, and provide both a full morning service and the option of an extended day service during school terms. Fees on average for all ECD Centres are USD250 per month, and can be much higher for example in day care centres attracting high and middle income families. In interviews with ECD Centre operators there were many accounts of arrangements made for payment of reduced fees where parents faced hardship and continuing unemployment. Those arrangements that had been put in place immediately after Hurricane Irma were now placing a considerable strain on the financial viability of the ECD Centres; day care operators in particular spoke about having to discontinue places for children who were not paying. The overall effect of reduced access to the ECD Centre sector is one of an expanded group of vulnerable children beyond the reach of Centre care and stimulation opportunities: those in low income families who prior to Hurricane Irma had access to an ECD Centre who are now without income and without access, vulnerable to the multiple effects of family stress; and, those who prior to Hurricane Irma had not had access to an ECD Centre and who were still in that situation now, potentially of increased vulnerability. In a meeting of parents in the Dutch Quarter, 'double whammy' effects of loss of employment following Irma and the exhaustion of savings now had resulted in the withdrawal of children from ECD Centres and no immediate prospects of financial recovery or access to care and learning opportunities for their young children.

*Potential of ECD Centres to provide sufficient quality to make a difference to the development of vulnerable children:* The 'public good' that the ECD Centre sector offers in opportunities for social and emotional development with other children in structured activities, cognitive stimulation, and protection and relief from stresses experienced by families in poverty is currently beyond the reach of vulnerable children. Yet it is vulnerable children

who have been shown to benefit the most from good quality ECD Centres, and to "succeed against the odds" if exposed to nurturing environments with a high degree of cognitive development and emotional care<sup>1</sup>. Eight ECD Centres were visited during the course of the assessment, of which 6 were day care centres and 2 were early stimulation classes. An observation common to half of the ECD Centres, including day care and early stimulation classes, is that the staff child ratios particularly for children who were 3 years old were insufficient to provide a quality programme as measured by the staff child ratios. In some the ratios were being stretched to the limit permitted under the Day Care Ordinance and at points in the day such as changeover and meal breaks they exceeded the limit. Examples of 'stretching' included observation of 1 adult to 18 three year olds in one room with 'calling-out' access to an assistant shared with another room and 1 adult to 16 children in one room with the operator of the Centre not far away but working with another group of children. The focus of the adults in these examples is of necessity on maintaining safety and order, which they were doing, and they were observed to have very limited opportunity to provide the attention needed for supporting the learning and development of individual or small groups of children. This is not an auspicious situation for extending access to vulnerable children or for including children with special educational needs and disabilities. There is potential in the ECD Centres for providing the nurturing environments with a high degree of cognitive development and emotional care needed for vulnerable children, but not without attention being given to reliable staff child ratios.

*Profile of parents and access to financial assistance for childcare:* The profile of parents using ECD Centre services is typically very young, with needs for both education and support in their parenting role, in care practices and understanding of child development (Draft ECD Policy, 2017, p.10). This profile needs to be deepened in light of the experience of Irma in order to better understand the effects of the gaps in the basic 'safety net' supports

for parents to protect against increasing levels of fragility and vulnerability to shocks. The SitAn (2013) undertaken four years before the passage of Irma, identified the urgent need to open more ECD Centres "to increase the supply of high quality, subsidized childcare centres to relieve the burden on working parents, especially mothers." (p.9). At that time, women were identified as earning less than men, on average 43% of what men earn (p.32). Their situation economically is exacerbated by the high cost of living, combined with the responsibility generally held by women for the economic well-being of the children. Women in Sint Maarten typically work more than one job, and many work unsocial and changing shift patterns in the tourism sector (p.58), with inadequate childcare support at home and insufficient resources to pay for the care provided in ECD Centres. Whilst the data are not included in the SitAn, the general picture would suggest that subsidies provided to Centres to make them accessible and affordable to low income working women would be a considerable contribution to protecting children and sustaining women's roles in the economy. Discussions were held with the Social Welfare Department of the Ministry of Public Health, Social Development and Labour (VSA) to explore the potential of social protection mechanisms for support of vulnerable parents of young children such as conditional and unconditional cash transfer schemes in use in other countries in the region. Currently the system for financial assistance for vulnerable persons such as a single parent with young child enables a grant for a one-off payment of USD100, once a year. A letter of guarantee is given to the successful applicant who can use this as contribution towards the cost of a place at an ECD Centre. A parent in what was described as a "meagre" position can also apply for welfare and be assessed for receipt of up to USD400 a month, less any income the parent might make from odd jobs. Neither amount would be sufficient for meeting the challenge of payment for a place at an ECD Centre: the former is a contribution amounting to less than half of one month's fees, and the latter would leave the parent with insufficient funds to live on once fees were paid for the month. Also the latter acts

<sup>1</sup> See: UNESCO. 2014. Early Childhood Care and Education: Addressing quality in formal pre-primary learning environments. New York, NY: UNESCO; Siraj I and Mayo A. 2014. Social Class and Educational Inequality. The Impact of Parents and Schools. United Kingdom, Cambridge University Press.

as a disincentive to find work in the case of a single parent and child requiring a place in an ECD Centre.

## 1.2. Quality of Early Childhood Development (ECD) Centres

Overall, the assessment found insufficient regulation of the whole sector servicing children in ECD Centres, in particular of the learning programme. The day care ordinance does not set out curriculum and programme standards. The ECD Centres in schools and day care centres are not provided with guidance on how to support learning and child development for children 4 weeks to 4 years. Irma has exposed the gaps in this regard. In addition, there is no regulation for the home based infant and toddler services where less than five children are looked after by one carer; the number of these services is unknown, and the ratio of 1:4 is too high for a single carer outside of an institutional setting in which other persons may not be available on site to call on in emergency.

*Curriculum and programme delivery standards are not included in the regulatory framework for ECD Centres:* The National Ordinance<sup>2</sup> for the establishment of minimum standards for childcare, last amended in 2015, makes provisions for care services for five or more children 4 months old and upwards to their 4th birthday (Article 1). Services provided for four children or less in the same age group fall outside the provisions of the Ordinance. Article 3 provides for a quality child care commission consisting of up to five members to be established. Article 10 provides authority for the Minister to refuse an application for a permit under the Ordinance if the programme offers insufficient guarantees for the development of children; criteria are not set out for how insufficiency is to be determined. Article 14 provides that childcare shall be carried out on the basis of a pedagogical programme of activities which stimulates the development of the children in all areas and Article 15 provides that parents to be informed about the programme in writing. In discussion with stakeholders in the Ministry of Education, Culture, Youth

and Sport (MECYS) and VSA, it was understood that the establishment of the quality commission is being actively pursued, and that the Ordinance is under review in a collaborative inter-ministerial process. The question of transfer of the responsibilities for regulation of ECD Centres to MECYS or the continuance of the current Inspectorate arrangements in conjunction with inter-ministerial collaboration was raised in discussion with VSA; in either scenario, it was recognized that there needed to be much closer working and collaboration with respect to regulation of ECD Centres wherever they are located on school premises or in private premises. In discussion with MECYS, it was recognized that the drafting of programme standards including those for enhancing the learning and development of children is an urgent task, one that is to be informed by evidence of the effectiveness of quality programmes for good outcomes for children. Research suggests that the quality of the structure, organisation and processes found in programmes is important and has an effect on outcomes. In addition, there is evidence that negative effects can occur if quality is low.

*Lack of programme guidance on how to support learning and child development for children 4 weeks to 4 years:* The lack of formal guidance in the form of an early childhood curriculum and guidelines for programme delivery is recognized by MECYS as a gap which will be addressed. Within the ECD Centres, there is a variety of approaches being used in programme delivery depending on the training and qualifications of staff. In observation visits and interviews with staff, it was noted that some had received pedagogical assistance from training and years of practice in the Netherlands, and that this was evident in their structured approach to supporting children's learning and understanding of child development. Other approaches observed were guided by training received in Sint Maarten, either under the previous auspices of SIFMA, the Training and Resource Center for Early Childhood Care and Education, now closed, or under the current auspices of NIPA, the national agency for professional

training. It was noted from NIPA's literature for prospective students that the Level 2 and 3 Social Pedagogic Worker (SPW) is a very "broad" qualification to work with "children, adults, the elderly, and people with disabilities, providing support in different areas of their lives" and that the Level 4 Educational Assistant (EA) assists "teachers and helps children with their educational and social development, both in and out of the classroom." Review of the training syllabuses was not undertaken; however from the literature available it seems that Level 2 and 3 SPW do not focus sufficiently on the skills required to support the learning and development of children from 0-4 years and that Level 4 EA is not focused on early childhood at all. Therefore there is a gap between the professional training offered for staff and programme delivery requirements for support of children's learning and development.

*Gaps exposed in quality following Hurricane Irma:* The major gap evident to operators of day care centres following Hurricane Irma was their lack of knowledge and skills in providing psychosocial support to children to reduce emotional vulnerability. There was no intervention during the recovery period that addressed specifically the needs of children from a few months old to 4 years, and their primary caregivers, parents and staff. Subsequent training in disaster preparedness and the development of relevant protocols has not addressed this area either. The day care centre operators were candid about the unknown consequences for the psycho-social health of the children in their care, particularly in the longer term. They were also concerned for their staff. In the period immediately following the passage of Irma, day care centres were closed on average for one month, and when staff and children returned operators noted the impact on the children of disrupted routines, family stresses, missing familiar faces, new insecurities and reactions to loud noises as "monsters". As time went by, the children appeared to settle and they were given time to express themselves as much as possible. However, day care centre operators noted that trauma could be

a 'time-bomb' and that they needed to know how to deal with impacts that children cannot handle. They said that anytime it rains children needed comforting. Research has shown that toddlers and preschool-age children can experience post-traumatic stress disorder (PTSD) symptoms but they often cannot verbally communicate their distress. Instead, they frequently look withdrawn, silent, indifferent, quiet, or fearful, and can demonstrate regressive behaviours and fears especially increased separation anxiety. They may re-enact intrusive memories through repetitive play of the trauma<sup>3</sup>. Day care staff are aware that it has been very important for the children to "get back to normal" in the familiar rhythms of the day care centres, and in that regard, it has been especially difficult if families have not been able to maintain their children's places at the day care centres, or have had to withdraw them subsequently as savings diminished. Day care centre operators not only voiced concern that they should acquire the understanding and skills to deal with psychosocial impacts on very young children, but also that they should be able to work with parents to limit the damage of possible longer term effects. Other gaps in the preparation for and mitigation of the effects of disasters that were exposed by Irma included the lack of readiness of all the ECD Centres with respect to the protection of infrastructure and learning resources, insurance provisions and communication protocols. These aspects are generally covered in the new Safety and Response Guidelines produced by MECYS in May 2018, and supported by an orientation workshop led by UNICEF which included ECD Centres for one day. Follow up on implementation in day care centres is being coordinated by the SXM ECD Association (SECDA) to ensure that each Centre has a disaster preparedness plan in place; it is not clear what the follow up is with early stimulation classes in schools.

*Barriers to quality in ECD Centres:* The SitAn (2013) identified quality issues in the day care centres emerging from an evaluation by the Day Care Quality Committee in 2002, which found that

<sup>2</sup> LANDSVERORDENING, houdende de vaststelling van minimumeisen gesteld aan kinderopvang AB 2013 GT no76 accessed on 27th October 2019 at: <https://decentrale.regelgeving.overheid.nl/cvdr/xhtmloutput/historie/Sint%20Maarten/>

<sup>3</sup> For general guidance, see the American Academy of Pediatrics, [www.aap.org](http://www.aap.org). and notably, The Emotional Impact of Disaster on Children and Families [https://www.aap.org/en-us/Documents/disasters\\_dpac\\_PEDsModule9.pdf](https://www.aap.org/en-us/Documents/disasters_dpac_PEDsModule9.pdf)



only 9 day care centres met all 11 criteria used to assess quality in 39 centres at the time. There are no data on quality in early stimulation classes in schools. Following Irma, all ECD Centres that have managed to survive have had to address quality issues to a greater or lesser extent, from full scale rebuilding and refurbishment to replacement of learning resources and equipment. A barrier faced by day care centres was as they are not designated essential education services they did not qualify for priority restoration of water and light, or immediate inclusion in the technical assistance offered for restoration of service. Assistance for supplies on the basis that the day care centres had children in need was late in coming. In conversation with stakeholders at MECYS it was acknowledged that the initial response following Irma was in part because the day care centres are not educational premises and that they are private businesses. Assistance to after school services however was provided early on the basis that these services were provided on school premises and were critical in being able to enable parents to work a full day. However it was recognized that day care centres needed assistance, and MECYS officers were in the forefront of acknowledging them as critical support services. In a meeting of 17 day care operators this issue was raised by the operators and the following points were made:

- All ECD Centres, including day care centres, should “come under Education”, and be recognized as educational services<sup>4</sup>. (See Annex D)
- As educational institutions, day care centres will also have a different status during disasters, as education establishments are seen to be in the frontline of continuing services to children. For example, it will enable day care centres to be included in closure notices, be a critical partner in relief arrangements through the provision of care services for children, obtain early restoration of utilities; receive supplies for maintaining services to families in

need; and to participate in the MECYS Safety and Emergency Management Committee.

- If day care centres are designated educational institutions it will be easier for them to develop partnerships not only with MECYS but with donors, foundations and service clubs such as Rotary, although they currently can do so as private businesses.

The experience of Irma had exposed the nature of the critical service all ECD Centres provided for children’s care and development inextricably linked to their parents need to work, and the need for the Centres to receive support as educational institutions not only in a time of crisis but also in more stable times when quality programmes can be built. Whilst the ECD Centres have met the cost of getting services back on their feet, the quality issues will need to be addressed through the development of a curriculum and programme delivery framework in which expectations for improving quality are made demonstrably clear, and guidance is provided underpinned by programme standards and regulation.

*Lack of regulation for home based infant and toddler services:* Where less than five children are looked after by one caregiver in a private home, there is no regulatory framework protecting the safety, security and quality of the service provided. This is a critical concern to address for three reasons:

1. Given the spare capacity currently in ECD Centres, together with the factor of cost contributing to children being kept away, it is likely that parents in low income employment and unsocial hours of work who need to leave their children in the care of others are selecting the less expensive option of leaving their children with a neighbour or other home-based infant and toddler care arrangement. Thus, it is more likely that this is the default choice for poorer and more vulnerable children in the first three years of life.

2. The service being provided in home-based infant and toddler services is permitted on a ratio of one adult to four children. This is too high for a single caregiver outside of an institutional setting in which other persons may not be available on site to call on in an emergency.
3. The home-based infant and toddler services are beyond the reach of the day care ordinance, so there is no provision for monitoring the extent and quality of the services, or for ensuring that persons providing the service are fit to do so.

The lack of provision for regulating home-based services for infants and toddlers is out of step with international norms for childminding services for children under primary school age<sup>5</sup>. These norms include legal requirements for registration of the persons wishing to provide childminding services, including assessment of their character, lack of criminal record and lack of association with known offenders; inspection of the homes to be used for the service; pre-training of the childminder and routine training on a regular follow-up basis; and on-site monitoring.

### **1.3. Governance, Partnerships and Funding**

There is a shortfall in coordination and collaboration between ECD Centres and between the Government and the ECD Centres, particularly in a period of proliferation of services since Irma. There isn’t a structure for oversight of the early childhood care and education as a coherent sector, including oversight of the geographic distribution of services, data on participation and demand, planning for transition to school, guidance on governance and management, and supported access to professional development and staff certification.

*Lack of coordination between ECD Centres:*

<sup>4</sup> See for example the registration and regulatory requirements in the United Kingdom at <https://www.gov.uk/guidance/childminders-and-childcare-providers-register-with-ofsted/registration-requirements>  
Under the Early Years Foundation Stage (EYFS) Statutory Framework, a childminder caring for infant and toddlers may look after a maximum of three children, of which there should be no more than one child under the age of one. [https://www.foundationyears.org.uk/files/2015/03/Childminder\\_Ratios\\_FAQ.pdf](https://www.foundationyears.org.uk/files/2015/03/Childminder_Ratios_FAQ.pdf)

ECD Centres in day care and in early stimulation classes under the auspices of school boards or other entities are not informally or formally coordinated under any umbrella organization that connects them all. The Centres do not meet as members of a sector. Coordination of early stimulation classes under the auspices of school boards are undertaken by the arrangements put in place by the school boards. With respect to the Board of the Catholic Church for example, coordination between six early stimulation classes is undertaken by a coordinator. This role has been transformed since Hurricane Irma by the need for the Coordinator to concurrently supervise three of the classes on one site with a total of 53 children, a situation that is a consequence of the Board having to adjust the use of its facilities as a whole following the near destruction of one of the schools. The majority of day care centres (at least 18 of the 26 day care centres in the island) are members of SECDA, a member organization with elected President and Board, and staffed by an Office Manager with financial support from MECYS. The Integrated Youth Policy Framework 2017-2027 notes that the assistance provided to SECDA is to organise training and to collaborate in the development of policy and awareness (p.31). SECDA is reported as being consulted in the process of drafting of the Policy Framework (p30-31) and as having proposed an expanded role for the Association in support of the sector to include not only organization of training and awareness raising but also enhancement of quality and accessibility in the ECD Centres. No further details are provided as to how these roles might be operationalized but they are identified as critical needs within the situational analysis preceding the policy goals (notably that not all centres work with evidence-based curricula and that the increasing demand for affordable day care from both dual and single parent families who work is not being addressed) and in relevant policy goals e.g., the need to expand options for early childhood care

and education in particular for children with disabilities (a strong mandate for which was expressed by key stakeholders and advocates on disability issues)(p.46) and for non-registered children in the country (4.3) and to provide safe play areas (4.12). In discussions with the SECDA Board, these expanded roles were not touched on. Board members were concerned to focus discussions on the the pressing issues that were highlighted by the experience of Hurricane Irma, namely the need for MECYS “to take control” and bring day care centres into the Education Services “at least like after school care services”; to support the development of quality in all ECD Centres including day care centres; to coordinate the ECD Centre sector; and to support access by the vulnerable children who could not otherwise afford to attend. At a moment in time when all ECD Centres have pressing priorities in common in meeting needs of children and rebuilding programmes, they are not in dialogue with one another to share experiences and to address common issues. A major common issue that is not being addressed is that of supply and demand. As ECD Centres

‘spring up’ or expand in response to perceived opportunities for reaching new markets, existing Centres experience a loss of numbers. This was a common perception voiced by day care centres ‘losing’ their three year olds to early stimulation classes in schools and early stimulation classes in schools having to reduce service in areas where demand had shifted to day care services.

*Lack of coordination for support functions for the early childhood cohort:* Unlike the responsibilities exercised in MECYS for oversight of demand, supply and quality in secondary and primary education, there isn’t a similar level of provision for these functions for the early childhood cohort of children and the services provided for them before the age of compulsory schooling at four years of age. The Department of Youth within MECYS is responsible for providing coordination for the Ministry’s interests in the early childhood cohort.

*Funding constraints impeding progress on all fronts:* There is no funding designated for governance of the ECD sector separate from other

Ministry functions from within the MECYS budget. There is no MECYS grant aid assistance for governance of ECD Centres in day care or in early stimulation classes in schools. There is grant aid to SECDA which enables the Association to employ an Office Manager who provides administrative support to the Association’s functions. Proposed provisions within the draft ECD Policy (2017) to establish an ECD Unit identify a number of capacity strengthening functions, many of which could be provided by new staff, or by including these functions within the existing remit of departments of the Ministry. These options were discussed in MECYS in light of the funding constraints faced by the Ministry and the country as a whole. An option to explore is to identify an ECD Coordinator whose role is to work with the MECYS Departments to include effective support to the ECD Sector from all the relevant functions of the Ministry (for example planning, statistics, governance and management, professional development etc) and to ensure efficient inter-ministerial arrangements for support of the sector (for example in child protection procedures). Key strategies identified for the ECD Coordinator in the draft ECD Policy (2017) are to assist the ECD Centres to become a cohesive sector, and to develop a feasible implementation plan that phases in stated policy intentions. Some of the policy goals are ‘one-off’ such as for example the establishment of programme standards or the development of a national salary scale linked to that of primary teachers (p.55); these goals are tasks that can be tackled in order of priority. Some of the policy goals are continuous in nature for example the design and development of a programme of professional development based on actual needs in the sector or the identification of external partnerships for collaboration in developing access to and quality of ECD Centres; these will be part of the Coordinator’s role on a long term basis.

Strategies for consideration for addressing these needs and gaps identified in the assessment are outlined in the following sections.



## 2. STRENGTHENING THE CAPACITY OF THE ECD CENTRE SECTOR TO SUPPORT VULNERABLE CHILDREN: STRATEGIES FOR CONSIDERATION

### 2.1. Access of vulnerable children to good quality early childhood experiences

**Summary:** Access to places in ECD Centres post-Irma, particularly for vulnerable children, needs to be understood in light of the location of Centres that survived and the demand at those locations, the numbers of children requiring care, the staff child ratios required and the financial constraints faced by parents who cannot afford the fees. The 2013 picture of demand and supply has been affected by Irma, and needs to be updated in a mapping process to include those areas where the impacts on the population have been greatest and the potential of new service deliverers (such as the Government primary schools) to provide ECD Centres. The need to access parents to support programmes in parenting and financial assistance for childcare has been expressed in the draft policy documents; the mode for implementing programmes to hard pressed parents working at between one and three jobs to make ends meet has yet to be identified. The parent engagement approach in which ECD Centre staff guide parents with ideas and suggestions for supporting children's learning and development, may provide a useful avenue for exploration.

#### Strategies for consideration:

**Collect data on need for and demand for services, develop an access plan:** It would be useful to have a structured approach to data collection to build pictures of needs in areas and amongst different population groups, and the access to ECD Centres in day care and early stimulation classes. There is anecdotal evidence cited in interviews with day care centre directors of the seemingly random expansion of new ECD Centres and contraction

of others in response to opportunities and needs emerging since Irma. The push pull factors have not been identified. It would be useful to employ the following approaches:

1. Survey demand in conjunction with the school boards and SECDA. A short questionnaire could be developed to identify demand from communities for day care and stimulation services from August/September 2019, full day or part day, in what preferred location(s), for what age child, and for meeting any particular special educational need. It could be administered online through survey monkey, through whatsapp and face to face through the communities known to the school boards and SECDA, and through the public primary schools and health clinics.
2. Ensure cooperation of ECD Centres in supplying data on current participation rates, capacity of centres (physical capacity and staffing capacity) and staff qualifications and training.
3. Estimate demand from the community for assistance in meeting needs of vulnerable children. Undertake rapid assessment of needs for childcare support in communities most affected by impacts of Irma and persisting poverty. Include agencies working in support of the communities such as health and social welfare.
4. Draw up an access plan that identifies where places in ECD Centres are needed, where service providers can meet the needs identified, and the estimated number of places required.
5. Explore potential for public primary schools to (a) provide early stimulation classes for children aged 3 and/or (b) partner with day care centre operators to provide early stimulation classes on or off site
  - Estimated cost of a qualified teacher: 1,700 per month 20,400 per year
  - Less reduced fees per child 125 pm =1500pa
6. Explore potential for providers to make places available for vulnerable children with additional financial support to enable children to participate
  - Amount of subvention required 8,400 per year
  - 50% Government contribution/private sector contribution 4,700 py each

**Make places in ECD Centres affordable to vulnerable children:** The draft ECD Policy (2017) cited a number of potential viable strategies to address the absence of mechanisms for assisting low income families to access ECD Centre services. A childcare voucher scheme (p.10) is proposed to facilitate parental choice; however this might result in overcrowding in 'popular' Centres and under-utilization of others. The financing of the ECD Centre sector is proposed to be informed by a costing study (p.37-8) identifying the 'cost of quality' and the potential mechanisms such as sliding scales for fees from different income groups and a system of government vouchers (p.42) could be considered for financing the costs identified. It is calculated that a combination of strategies such as a 2%-3% levy on companies, fundraising directly in the tourism sector and local and international sponsorship for 'adopting' a centre could generate resources for a national fund to resource development of quality in the sector (p.63). These suggested strategies build on the idea put forward in the SitAn (2013) for a pilot project for 20 children in 9 Centres to receive state subsidies to support access (p.48); it is unclear if this pilot went ahead. In discussions with the SECDA Board, a simple model for making places affordable to vulnerable children was explored. Centres willing to take the children could be provided with a subvention to contribute to the cost of a qualified teacher, a subvention that was substantial enough for the Centres to be able to reduce fees to children identified as vulnerable. A possible model is as follows:

In this possible model, a subvention that covered the costs of a teacher would enable a Centre to provide places for 8 children at half the usual fee. If Government contributed half the subvention, the other half could be raised through matching funds from a private sector source in a public private partnership. In addition to providing access to vulnerable children, this model also provides capacity strengthening to a Centre through the addition of a qualified member of staff. Criteria for grant of subvention could include: Centre capacity to be 30-50 children; the teacher to be qualified; the programme to be approved by MECYS. These criteria would provide the foundation for a quality learning experience which is key to producing beneficial developmental outcomes for vulnerable children. The Private Sector contribution could be leveraged in a direct approach by MECYS through the Chamber of Commerce to put in place a Public Private Partnership in the interests of both human and social development, with a view to strengthening both economic opportunity and stability. Private Sector engagement is excellent public relations, and a partnership such as this provides a structured means for Government to meet needs of the youngest members of its vulnerable population and their parents need to work. The added value for the 'public good' that ECD Centres offer is a greater social and economic mix of children from more diverse circumstances. Further consideration could be given to 'kick-starting' this model of subvention to ECD Centres for accessing vulnerable children through funds designated within the National Recovery and Resilience Plan (NRRP) 2018. On p.44 of the NRRP, there is a suggestion that pilot day care programmes be developed, implemented and assessed to assist working/job seeking/training parents. It is puzzling why the recommendation is for only a "pilot" and why existing centres could not be included. With the proposed model for subvention a possible strategy is to identify 10-15 ECD Centres immediately for supporting access of vulnerable children, and

to invite Private Sector interests to match support in another 10-15.

*Engage parents in the learning and development of their children:* Parent engagement describes provision of practical and emotional support by parents to children's learning, in school and at home. Effective parent engagement is extremely important for vulnerable children; it can 'level the playing field' for children from disadvantaged circumstances and communicate aspirations and beliefs in the value of education to parents who may be struggling in their roles. Parent engagement is a critical mechanism for encouraging parents through the sharing of information and practical strategies to support their children's learning - organizationally, emotionally, and on a sustained basis - throughout childhood. One of the elements of quality in ECD Centre programmes that has been consistently identified is the relationships that ECD Centres make with families<sup>6</sup>. ECD Centres are instrumental in supporting and assisting such engagement through the sharing of straightforward and simple strategies for supporting children's learning and development, explaining what is being done in the Centres and encouraging what can be done - even with limited time - at home. This approach differs from some conceptions of 'parent participation' and 'parent involvement' in that there is not an implied obligation for parents to contribute to the Centre; rather, the approach is for the Centre to take the initiative to support the parent's role in the mutual interest of supporting the child's development. There are a number of strategies that can support parent engagement such as:

- Strengthening the home learning environment for young children through home-visiting to exchange information on what children are doing at home and in the ECD Centre, and to encourage use of practical ideas for supporting learning, including interaction with the child's activities, and nurturing children socially and emotionally.

- Joint agreements between teacher and parent on areas of learning to be supported and monitored together at home and in the learning setting over a defined period.
- Information sharing sessions at centres between parents and staff (in individual or group sessions) on learning strategies and how to put them into effect at home and at the setting.
- Dissemination of information for parents in digital formats, on the radio, and in first languages (notably Spanish and French/Creole), to enable easy access to information in their own time.

## 2.2. Quality of ECD Centres

*Summary:* Regulation is under review with a particular focus on activating provision within the existing Ordinance for a Quality Commission. Suggested strategies to improve quality of services include the provision of guidance to the early childhood services on learning standards and good practice in supporting children's learning and in engaging parents; the deployment of two learning support teachers to visit and guide programming in early childhood services focusing on the under 3's in day care and the 3 year olds in day care and pre-kindergarten classes; and the identification of the good practice existing in the services to stimulate exchange visits, mentoring arrangements, and other informal exchanges.

### Strategies for consideration:

*Designate all ECD Centres as educational institutions, include ECD Centres in all NRRP priority areas:* The experience of Irma has exposed the nature of the critical service all ECD Centres provided for children's care and development inextricably linked to their parents need to work. However, all ECD Centres need to be designated as educational institutions in order to receive recognition

and support not only in a time of crisis but also in more stable times when quality programmes can be built. The ECD Centres need to be active participants in the mechanisms within the NRRP for capacity building for improved disaster preparedness. Access to disaster risk management training and support is mentioned in the NRRP (p.51) although ECD Centres are not mentioned specifically in this regard. In fact, ECD Centres are 'invisible' in the strategies outlined for each of the six priority areas identified under the NRRP. Suggested strategies for inclusion of the ECD Centres in each of the six priority areas are as follows:

1. *Psycho Social Support (PSS) for all.* Understanding and dealing with the nature of the trauma for those in the frontline in the short, medium and long term, needs to be the focus of training for the ECD Centres to include the needs of children from birth to four years of age, parents, staff, operators/directors/owners of services.
2. *Teacher training in disaster management and emergency responses, and school safety.* With respect to the staff of the ECD Centres, it would be useful to approach this as a 3 pronged strategy. First, there needs to be an in-service professional development programme for existing staff; secondly, NIPA needs to be engaged to include modules on disaster preparedness within the Levels 2 and 3 SPW training and Level 4 EA training; and thirdly, the University should be engaged to include disaster preparedness within the undergraduate programme in education, including a focus on the very young child.
3. *Curriculum assessment and afterschool programmes.* This should continue to read "and ECD Centres in day care centres and early stimulation classes at primary schools", to ensure that they have structured programmes that prepare children to cope with disasters as an integral part of their learning.

4. *Improvement of safety and preparedness plans.* Guidance needs to be continuous for the ECD Centres as they improve their safety and preparedness plans. An essential element of the plans needs to be the inclusion of safeguards for the protection of very young children and for supporting children with special educational needs and disabilities; these safeguards and supports need to be embedded in plans to the same extent as for primary schools.
5. *Repair or reconstruction of physical infrastructure to improved building standards.* Small loans facilities should be extended to all ECD Centres, including assistance with rapid appraisal of need for repair and refurbishment and assistance with technical specifications required for materials and works.
6. *Improved policies and legislation to ensure long-term resilience.* Each of the 10 key strategies of the draft ECD policy (2017) needs to include the key steps for building long-term resilience.

*Guide ECD Centres to improve quality of programmes:* Elements of quality that have been consistently identified and seem to make a difference for outcomes include: the education and training of the staff; available learning materials; the learning process; the organisational arrangements; the relationships with families; and health, hygiene and safety<sup>7</sup>. It was noted that MECYS had already accessed the Caribbean Community (CARICOM) Minimum Standard for ECD Services, annexed to the Regional Guidelines for Developing Policy, Regulation and Standards in Early Childhood Development Services (2008)<sup>8</sup>, and also the Caribbean ECD Good Practice Guide, published by the Caribbean Development Bank in 2018<sup>9</sup>, all useful resources for designing standards and for drafting guidance for the implementation of programmes. Well-educated, well-trained teachers and practiti-

<sup>6</sup> Denboba A, Sayre R, Wodon Q, Elder L, Rawlings L, Lombardi J. 2014. Stepping up Early Childhood Development: Investing in Young Children for High Returns. Washington, DC: World Bank; and also the resources available at the Harvard Family Research Project accessed at <http://www.hfrp.org/early-childhood-education>

<sup>7</sup> Denboba A, Sayre R, Wodon Q, Elder L, Rawlings L, Lombardi J. 2014. Stepping up Early Childhood Development: Investing in Young Children for High Returns. Washington, DC: World Bank

<sup>8</sup> <https://caricom.org/store/regional-guidelines-for-developing-policy-regulation-and-standards-in-early>

<sup>9</sup> <http://www.caribank.org/publications/featured-publications/caribbean-early-childhood-development-good-practice-guide>

oners are the key factors in providing high-quality early childhood education and care with the most favourable cognitive and social outcomes for children. While it is not necessary that all staff have high general levels of education, the presence of some highly qualified staff can have a positive influence on those who work with them and who do not have the same high qualifications. The Education for All Global Monitoring Report 2007 identified the quality of interaction between teacher/practitioner and child as the single most important determinant of programme success in early childhood<sup>10</sup>. As the programme standards are developed, and an early childhood curriculum approach crafted for Sint Maarten, there will need to be a concurrent approach to align professional training and qualifications of staff. Suggested strategies include:

- NIPA to develop skills in supporting the learning and development of children from 0 to 4 years of age as additional modules in SPW levels 2 and 3, and EA level 4.
- Design ECD standards for care and education services in both home-based and centre-based programmes, differentiating for the variety of settings and for the different developmental stages – infant, toddler and preschooler.
- Develop an ECD curriculum framework with guidance for programme delivery with differentiated strategies for children from a few months old to primary school entry age, and for engagement of parents.
- Align expectations for ECD programme delivery with ECD standards and training and qualifications for ECD staff.
- Attract project funding for a 3 to 5 year term to deploy two learning support teachers to visit and guide programme delivery in ECD Centres on a routine basis, focusing on the under 3's in day care and the 3 year olds in day care centres and early stimulation classes in school, paying particular attention to the

implementation of inclusion strategies for vulnerable children and children with special educational needs and disabilities.

- Promote the development of good practice by encouraging exchange visits between ECD Centres, mentoring arrangements, and other informal exchanges.

### 2.3. Governance, Partnerships and Funding

Summary: Coordination of support to the early childhood sector is planned in the draft national ECD policy. It is suggested that the formation of a unit be prioritized to support programme development and delivery in the services, coordinate sector wide initiatives and organise a professional development programme. The unit will liaise with existing departments within the Ministry, partner ministries and government agencies to ensure coordination of inspection and registration of services, planning, data collection and analysis, support to special educational needs and disabilities, school governance and certification of staff.

#### Strategies for consideration:

*Within MECYS, coordinate the development of support to early childhood development:* The best case scenario for developing capacity in governance in MECYS for support to the early childhood cohort in the medium to long term is to implement the coordinating unit proposed in the draft ECD Policy. However, it is possible to achieve considerable coherence in the support to the development of the early childhood cohort in the short term by providing coordination for the main functional responsibilities that support the interests of the early childhood cohort as follows:

1. *Planning functions with respect to demand and supply of ECD Centre places:* Oversight of the geographic distribution of children in the early childhood cohort and the places required in ECD Centres to meet the needs of the children for stimulation.

2. *Planning functions with respect to supporting preparation for and transition to primary school:* Collaborative arrangements with ECD Centres to support the preparation and 'readiness' of children for an orderly transition to primary school, to include collaboration with the health services to screen, refer and treat children with developmental disability.
3. *Statistical functions with respect to data on participation rates and child development:* Guidance and support for the ECD Centres to ensure that they cooperate in providing the data required for annual reporting for ISCED 0 (UNESCO) and for attainment of indicator 4.2.2 of target 4.2 of the SDGs, and to put in place mechanisms to report on child development outcomes for Indicator 4.2.1<sup>11</sup>. (See Annex D)
4. *Guidance on governance and management functions for ECD Centres:* Coordination of expectations for transparent and efficient management of ECD Centres and support for enhancing the abilities of members of ECD Centre committees and board members to manage the services (including financial management, recruitment of appropriate staff, reporting on staff qualifications) are important areas for MECYS direction and monitoring.
5. *Professional development for operators, teachers and practitioners:* In-service professional development at all levels of ECD Centre services to include all personnel involved in the key areas of management, parent engagement and programme delivery.
6. *Protection and security of the early childhood cohort:* Inter-ministerial collaboration with VSA and the Court of Guardianship to extend protocols for reporting suspected child abuse to all ECD Centres, to include training and awareness.

#### Develop public awareness of the importance of ECD, partnerships in support of ECD Centres:

A suggested approach for developing public awareness and partnerships in support of ECD Centres is to invite key prospective partners in the public domain to dialogue with the Ministry and ECD Centre operators on ways in which the development of all young children can be strengthened. Strategies could include:

1. Topics of interest to the public can be introduced on radio talk shows, and debated with panelists and callers. Topics such as: What to expect as your child develops; how to guide your child's behaviour; do boys and girls need different approaches from parents; what are the key things you can do each day that will make a difference for your child's development (even if you only have 15 minutes); how do you know that a ECD Centre is 'good'; what are the usual ages and stages that your child will go through and what should you do if your child seems slow to develop; why is play so important for children's development; etc.
2. Meet with the members of the Chamber of Commerce, philanthropic organisations and service clubs such as Rotary to introduce the ECD Centres and their work and to invite members to consider forming a Private Public Partnership (PPP) with MECYS to support access to the ECD Centres by children who cannot afford the whole fee. Propose a conference for a day or two in which experts in the economic and developmental evidence for effective ECD interventions make the case for investing in quality ECD Centres and benefiting human and social development through accessing children who would not otherwise be able to afford to attend. Scenarios in which different options for providing support can be explored, including for providing matching funds for government subventions for supporting an additional teacher in those ECD Centres meeting criteria for support.

<sup>10</sup> See: Sammons P. 2010 "The EPPE Research Design: an educational effectiveness focus" in: Sylva et al. (eds.), Early Childhood Matters: Evidence from the Effective Pre-school and Primary Education project, Routledge, London/New York; and, UNESCO (2007) Education for All Global Monitoring Report

<sup>11</sup> Target 4.2, Indicator 4.2.1: Percentage of children under 5 years of age who are developmentally on track in health, learning and psychosocial well-being. Disaggregations: sex, location, wealth (and others where data are available)

3. Explore with SECDAs an expanded role for the Association, potentially as an NGO, that represents the interests of its members (patterning on other professional associations which act in their members' interests). Strategies could include representation to insurance companies to have group insurance plans, pension schemes and health insurance; representation to banks to provide small loans facilities for members to develop and equip their Centres especially in times of dire need; taking out group memberships and subscriptions to organisations providing learning resources and bulk purchasing agreements; supporting member exchanges for professional development; selecting a 'champion' to assist in advocacy efforts and public education; designing and implementing efficient data systems for maintaining records and generating accurate reports; upgrading staff; improving 'customer service'; promoting teacher/Centre of the month; and exchanging and developing parent engagement ideas and strategies.



## 3. KEY RECOMMENDATIONS FOR ACTION

### 3.1. Participation and Equity

A plan needs to be developed by MECYS with key stakeholders to support the development of children from 0 to 2 years and from 3 years to primary school entry at 4 years, especially those who are vulnerable. This plan should focus on the following actions:

1. Identify those children whose development is at risk from poor stimulation, ill health, abuse and neglect, and those who have special educational needs and disabilities.
2. Subvent the allocation of places to vulnerable children in early childhood care and education services in ECD Centres, including access of their families to parent engagement programmes and support with special educational needs, developmental delay and disabilities.
3. Provide incentives to ECD Centre operators to admit and provide programmes for children in need of development support including appropriate professional development of staff; national recognition of good quality provision; low-interest loans to improve infrastructure, equipment and resources; and subvention for employing a qualified teacher on condition that quality criteria are met.

### 3.2. Quality in ECD Centres

Key recommendations for action to improve the quality of the services include:

4. Register and regulate ECD Centres as educational institutions in accordance with quality assurance criteria for the development and learning of children from a few months old to primary school entry, differentiated to apply sector-wide to both home-based and centre-based settings.

5. Design and project to provide a learning support peripatetic service for ECD Centres focused on child development under 3 years and for 3 years to primary school entry, together with a professional development programme for staff in summer/evening institutes, professional development days and on line courses.
6. Disseminate pedagogical guidance on how to support child development and learning, including social and emotional learning and psychosocial support, attuned to the realities in ECD Centres, and accessible to the media in creative public education formats.
7. Coordinate with tertiary institutions to ensure access to professional qualifications that equip workers with the knowledge and skills necessary for supporting the development and learning of children from 0 to primary school entry

### 3.3. Governance, Partnerships, Policy and Funding

Key recommendations for action to improve governance, partnerships, policy and funding in the ECD Sector:

8. Ensure that the draft ECD policy is finalized with the inclusion of disaster risk management and psychosocial support strategies, adopted formally and implemented according to a phased action plan.
9. Appoint an ECD Coordinator in MECYS to support the inclusion of the early childhood sector in mechanisms and processes for planning, statistics, governance, professional development, disaster management in the Ministry, and to coordinate with other Ministries to include early childhood sector in protection, security, and social assistance mechanisms.

10. Secure public private partnership (PPP) agreements with philanthropic organisations and private sector interests to create innovative financing mechanisms to support participation in registered early childhood care and education services in ECD Centres of good quality for vulnerable children identified as in need of support.



## ANNEX A. REVIEW OF DOCUMENTS

Review of Documents undertaken as part of the assessment of the situation of the Early Childhood Development Centre Sector on Sint Maarten after Hurricane Irma.

October 2018 and updated in February 2020

### 1. Purpose of the document review

- a. The purpose of the review of documents was to provide context and information for the assessment of the situation of the ECD centre sector prior to visiting the island to conduct observations and interviews. The review is written in the format of (a) outlining the information provided, (b) analyzing the information with respect to understanding the context affecting the operation of the ECD Centres and (c) identifying those questions arising for further exploration with UNICEF, Government and non-government officers, and operators of ECD services.

### 2. Documents reviewed:

2.1 Ten documents were forwarded for review by UNICEF NL. These were as follows:

1. Integrated Youth Policy Framework, 2017-2027 (pre-Irma)
2. National Policy for ECD, Third Draft, March 2017 (pre-Irma)
3. Draft ECD action plan (pre-Irma)
4. Sint Maarten SitAn: Situation Analysis 2013 (pre-Irma)
5. Sint Maarten SitAn executive summary 2013 (pre-Irma)
6. UNICEF Education assessment report Irma: post disaster assessment of the education situation, carried out by La-Toya Charles and an education in emergencies expert
7. UNICEF Child Protection assessment report Irma: same but for child protection
8. PSS assessment: Mental Health and Psychosocial Support assessment in Sint Maarten by the Red Cross
9. MECYS resilience plan (post-Irma)
10. NRRP: National Recovery and Resilience Plan: the Government of Sint Maarten's leading document for post-Irma recovery and reconstruction

#### The Integrated Youth Policy Framework 2017-2027 (Document 1)

2.2 The Integrated Youth Policy Framework 2017-2027 (Document 1) was drafted pre Hurricane Irma. It provides an overarching strategic approach to the support and development of the nation's young people from birth to 24 years. It is an umbrella framework which identifies the key stakeholders and the common policy goals enhancing development. Broad strategic actions are set out in support of development including the roles of stakeholders in coordinating inputs.

2.3 The Policy Framework identifies support to children in early childhood as one of the fundamental activities in the youth care system citing early stimulation and care by private day care owners and early stimulation and education provided by school boards (p.20). The objectives in support of the development of very young children in early childhood development centres (ECD centres) are outlined in the Framework. They are not developed in full as the framework references the concurrent development of

an early childhood development policy to be finalized separately (Policy Goal 4.1). However, it outlines strategic actions to grant government subsidies to ECD centres (known locally as day care centres) also in the short term and the implementation of the ECD policy on a phased basis over the medium term. The integration of the ECD Centres within the framework points to the intention of the Government at the time of drafting, (2017), to strengthen investment in and support to the sector. In this intention, the Government was building on two areas of support that were already in place and referenced in the Policy Framework: the implementation of the National Ordinance for Day Care and the National Decree containing Minimum Standards for Day Care (Section 5.3.1) requiring programme quality inspection visits to ECD Centres by inspectors within the Ministry of Education, Children, Youth and Sports (MECYS) and the Ministry of Public Housing, Spatial Planning, Environment and Infrastructure with respect to inspection of physical safety and building conditions (p.15); and, the assistance provided to the Sint Maarten ECD Association (SECDA) to organise training and to collaborate in the development of policy and awareness (p.31).

2.4 SECDA is reported as being consulted in the process of drafting of the Policy Framework (p30-31) and proposed an expanded role for the Association in support of the sector to include not only organization of training and awareness raising but also enhancement of quality and accessibility in the ECD Centres. No further details are provided as to how these roles might be operationalized but they are identified as critical needs within the situational analysis preceding the policy goals (notably that not all centres work with evidence-based curricula and that the increasing demand for affordable day care from both dual and single parent families who work is not being addressed) and in relevant policy goals e.g., the need to expand options for early childhood care and education in particular for children with disabilities (a strong mandate for which was expressed by key stakeholders and advocates on disability issues) (p.46) and for non-registered children in the country (4.3) and to provide safe play areas (4.12).

2.5 Notwithstanding that the Policy Framework was developed before the passage of Hurricane Irma, it does not address the needs of the ECD Centre sector in disaster risk management. The questions raised for further exploration for the purposes of this assessment include:

**With the Department of Youth/MECYS:**

1. What is the status of the Integrated Youth Policy Framework now in 2018? The Policy Plan will be adjusted according to the Positive Youth Development Model
2. Will it be/has it been adjusted to include disaster risk management? Disaster Risk Management has not been included in the IYP.
3. Is the policy goal to grant subsidies to the ECD centre sector (4.1) still included? Feasibility of granting subsidies needs to be researched and discussed at inter-ministerial level.
4. What is the current thinking on how this might be operationalised? By executing a SWOT and strategic planning with SECDA, it will assist the department in planning capacity building, whereby one main topic regarding requesting funding from different funding agencies not only government entities.
5. Capacity building What needs/gaps will/can the subsidies address in the centres? How can subsidies assist to make ECD Centres affordable for low income parents?

**With the Department of Youth/SECDA:**

6. What is the current thinking as regards the expanded role for SECDA in the enhancement of quality in ECD Centres? What form is this taking/can this take? What needs/gaps is this addressing - for example, in the utilization of evidence-based curricula? Depending on SWOT analysis.
7. What is the current thinking as regards the expanded role for SECDA in the enhancement of acces-

sibility in/to ECD Centres? What form is this taking/can this take? What needs/gaps is this addressing - for example, in accessing children with disabilities; in reaching non-registered children. Depending on SWOT analysis.

8. What are the training priorities that SECDA has identified for 2018 and beyond? Is disaster risk management included – for example, what needs/gaps have been identified/addressed so far? Depending on SWOT analysis.
9. What are the awareness raising priorities that SECDA has identified for 2018 and beyond? Is disaster risk management included – for example, what needs/gaps have been identified/addressed so far?

**The National Policy for ECD, Third Draft, March 2017 (Document 2)**

2.6 The National Policy for ECD, Third Draft, March 2017 (Document 2) is a comprehensive document detailing the rationale and evidence for ten strategic priorities for support for very young children:

1. Preconception, prenatal, neonatal education and care
2. Parent empowerment, education and support
3. Universal developmental screening and services for children with special needs
4. Home-based infant and toddler care and development
5. Inclusive preschool education
6. Child protection, social inclusion and family support
7. Pre- and in-service training and support of professionals and paraprofessionals
8. Supervision, assessments, monitoring and evaluation
9. ECD advocacy and communications
10. Organization of ECD service coordination

2.7 The draft National ECD Policy has been the subject of stakeholder review (p.5) but there is no reference made to public or national consultation. A notable omission (with the benefit of hindsight) are the strategic actions required for disaster risk management which should be integrated efficiently into each of the ten strategic priorities.

2.8 The situational analysis for the policy addresses critical needs within the population and gaps in services in the ECD centre sector. These needs are outlined below and the disaster risk management implications considered:

- Poverty: Numbers of children in early childhood are living in severe poverty and vulnerability in either registered or un-registered immigrant families (p.9). The data need to be adjusted for the post-Irma situation. These children are thought not to have access to ECD centres in day care (recognized as a 'public good' despite the fact that they are businesses in the private sector), but may be able to access early stimulation classes in school settings from the age of three years.
- Accessibility: the absence of data on need for and demand for services is a gap in the analysis. For example, there is anecdotal evidence cited in interviews with day care centre directors of the random expansion of new ECD centres and contraction of others in response to opportunities and needs emerging since Irma. It would be useful to have a structured approach to data collection not only in ECD centres but in early stimulation classes to build pictures of needs in areas and amongst different population groups.



- Parenting: The profile of parents using ECD centre services is typically very young, with needs for both education and support in their parenting role, in care practices and understanding of child development. (p.10). This profile needs to be deepened in light of the experience of Irma to understand the gaps in the basic 'safety net' supports for parents to protect against increasing levels of fragility and vulnerability to shocks. It may be useful to reference cash transfer schemes as part of safety net responses.
- Affordability: Absence of mechanisms for assisting low income families to access ECD centre services. Ideas suggested such as a childcare voucher scheme (p.10) might facilitate parental choice, but might result in overcrowding in 'popular' centres and under-utilization of others.
- Quality: Minimum standards are described as out of date (p.11) and inspection services insufficient without "supervision" and follow up of recommendations. Standards need to be reviewed in light of the requirements for disaster risk management, and support services that help centres to identify areas that need to be addressed and to make changes may be more effective than traditional inspections.
- Regulation: the home-based services that are largely for infants and toddlers are currently unregulated, and need to be brought into an expanded regulatory framework for ECD services in centres and homes. The estimate of numbers of children attending these services needs to be revised in light of the impact of Irma on ECD centre numbers.
- Early intervention: Services to identify, screen and diagnose developmental delay as well as community based family support services are not accessible to those in need and are without resources (p.13).

2.9 Key actions proposed under the policy that will strengthen the ECD centre sector by addressing needs/gaps and that will need to include disaster risk management strategies are as follows:

- Poverty: An expansion plan is proposed; a survey will map which districts are most in need of services for low income families (p.40). It will also provide data on need for mother tongue education and support for children with disabilities.
- Accessibility: Introduction of mechanisms to support inclusive education for children from 1 month to 48 months old. Training in inclusive education techniques is to be financed directly by the voucher system (p.42); a professional degree (SBOlevel3) is proposed to be certified by the National Institute for Professional Advancement (NIPA); and a diploma is to be introduced for caregivers and teachers' aides (p.52)
- Parenting: A pre-school advocacy plan (p.39) is proposed to provide parents with information on high quality provision and criteria for selecting a 'good' centre
- Affordability: Financing of the ECD centre sector to be informed by a cost study (p.37-8). Strategies to be considered include sliding scales for fees and financing through a system of government vouchers (p.42).
- Quality: a costing study is proposed to identify the data required for planning financing of access and quality. It is calculated that a combination of strategies such as a 2%-3% levy on companies,

fundraising directly in the tourism sector and local and international sponsorship for 'adopting' a centre could generate resources for a national fund to resource development of quality in the sector (p.63).

- Regulation: Registration, inspection, supervision and training for home-based carers working with infants and toddlers (p.37)
- Early Intervention: A specialist team is proposed to work with families on assessment and the provision of support services.

2.10 A number of proposals are made for the establishment of an organizational base and support team for monitoring and evaluation the ECD services in centres and home-based facilities, and coordination with health services. Sector-wide proposals to strengthen capacity include the development of a national salary scale linked to that of primary school teachers (p.55) and requirements for pre-training and professional development for the workforce. All of the proposed actions will need to be adjusted to integrate effective disaster risk management approaches that are tailored for the ECD Centres.

### **The Draft ECD Action Plan 2017-2021 (Document 3)**

2.11 The Draft ECD Action Plan 2017-2021 (Document 3) sets out each of the ten strategic priorities and outlines a sequence of steps to be undertaken to phase in implementation. The steps are not contextualized in the national plans for the Ministries, Sector agencies and other organisations who are identified as having responsibility for aspects of implementation. It is not clear how the steps will be coordinated between the ten strategic areas and the implementation agencies within them. There could be some useful streamlining of steps that are common between areas such as setting up regulatory mechanisms for ECD centres and for home-based infant and toddler services. The plan will need to be reviewed in light of the need to integrate strategies for disaster risk management and this will enable the key stakeholders to re-prioritize steps in light of current realities, opportunities and constraints.

The questions raised for further exploration for the purposes of this assessment build on the questions to be asked about the Integrated Youth Policy Framework, namely:

### **With the Department of Youth, MECYS, and Ministry of Finance potentially:**

1. What is the status of the draft National ECD Policy now in 2020? Not finalized
2. Will it be/has it been adjusted to include disaster risk management? Yes, it has been included.
3. Is the policy goal to grant subsidies to the ECD centre sector (4.1) still included? What is the current thinking on how subsidies can be utilized to strengthen resilience of the ECD centres to shocks? What needs/gaps will/can the subsidies address in the centres? How can subsidies assist to make ECD centres affordable for low income parents? Research and inter-ministerial discussion still needs to take place and research needs to be done in this area.
4. How can the ECD centres be brought more closely into the education system with regard to intra-sectoral coordination on areas of common interest in disaster risk management such as the education management and information to build pictures of needs in areas and amongst different population groups; professional development of teachers; and, care of children in the short and medium terms? This is currently already happening with disaster management. They are receiving assistance with developing of safety plans by the Safety and Emergency Management Committee of MECYS.
5. How can ECD centres be supported to engage parents in building resilience and strengthening

parenting skills and supporting child development? Is there a 'safety net' that can prevent a family falling into risk as a result of shocks? Can staff in early stimulation classes and day care staff be supported in the development of strategies to reach and engage parents through social media and mechanisms at the centre e.g. newsletters, parent notice boards, notes home, 'home-work', etc. Activities have been planned to support parents in strengthening skills.

### **The Sint Maarten SitAn: Situation Analysis 2013 (Document 4) and executive summary 2013 (Document 5)**

2.12 The Sint Maarten SitAn: Situation Analysis 2013 (Document 4) (together with the Sint Maarten SitAn executive summary 2013 (Document 5)), undertaken four years before the passage of Irma, identifies the urgent need to open more ECD centres "to increase the supply of high quality, subsidized childcare centres to relieve the burden on working parents, especially mothers." P.9 (my emphasis). Women are identified as earning less than men, on average 43% of what men earn (p.32). Their situation economically is exacerbated by the high cost of living, combined with the responsibility generally held by women for the economic well-being of the children. Women in Sint Maarten typically work more than one job, and many work unsocial and changing shift patterns in the tourism sector (p.58), with inadequate childcare support at home and insufficient resources to pay for the care provided in ECD centres. Whilst the data are not included in the SitAn, the general picture would suggest that subsidies provided to centres to make them accessible and affordable to low income working women would be a considerable contribution to protecting children and sustaining women's roles in the economy. The SitAn also identifies quality issues in the daycare centres emerging from an evaluation by the Day Care Quality Committee which found that only 9 centres met all 11 criteria used to assess quality in 39 centres at the time; additional resources by way of subsidies could be tied to quality improvements. A pilot project to implement state subsidies is described but it is unclear if it continued.

2.13 A childcare social policy was proposed to encourage the development of parenting skills and responsibilities and encourage links between schools and families (p.57). This is an interesting approach that combines parental engagement and child development recognizing the parent's need to work and the school's vital role in providing support that parents can actually make use of at home. Whilst the SitAn does not make reference to research in this area, a parent engagement approach (rather than a parent education approach that requires parents attend meetings or workshops) has been shown to be effective for child development and family strengthening and cohesion<sup>12</sup>. The encouragement of Ministries to put the policy into effect included the involvement of private sector and civil society organisations into the system. The SitAn also notes the introduction of the Positive Parenting Programme by the Court of Guardianship, another innovation that made use of an evidence-based approach. The parent engagement approach and the Triple P programme both lend themselves to the inclusion of disaster risk management strategies to assist parents to apply practical strategies in emergency situations.

2.14 The role of ECD centres in preventing child abuse, detecting abuse and providing safeguards for children cannot be exploited sufficiently if the centres cannot admit children vulnerable to abuse because of the barrier of high fees. (p.55). The SitAn further recommends the inclusion of children with disabilities in the ECD centres (p.72) and the inclusion of nutrition programmes (P.77)

<sup>12</sup> Parent engagement is a critical mechanism for encouraging parents through the sharing of information and practical strategies to support their children's learning - organizationally, emotionally, and on a sustained basis - throughout childhood. One of the elements of quality in programmes that has been consistently identified is the relationships that early childhood centres make with families. See Harvard Family Research Project accessed at <http://www.hfrp.org/early-childhood-education>

2.15 The need for places in ECD centres post-Irma needs to be understood in light of the location of centres that survived and the demand at those locations, the numbers of children requiring care, and the financial constraints faced by parents who cannot afford the fees. The 2013 picture of demand and supply has been affected by Irma overall, but the demand/supply issues in areas of dense population need to be understood through a mapping process. Anecdotal evidence from 10 interviews with day care directors in October 2018 suggest that whilst some centres are doing well in absorbing increased demand, others are barely making ends meet, which would suggest not only uneven distribution of children but other factors affecting demand and supply such as affordability, accessibility and parental life choices during times of hardship. The identification of the need for parenting programmes has been expressed in the draft policy documents; the mode for implementing programmes to hard pressed parents working at between one and three jobs to make ends meet has yet to be identified. The parent engagement approach may provide a useful avenue for exploration.

The questions raised for further exploration for the purposes of this assessment expand the questions to be asked about the Integrated Youth Policy Framework and the draft National ECD Policy, namely:

#### **For the Department of Youth, MECYS, SECDA:**

1. How can we accurately determine supply and demand in places in ECD centres in light of (a) the current distribution of ECD centres (b) parental preferences (c) affordability and (d) need to plan for sustained access to places for vulnerable children? Needs research.
2. What policy approaches would Government consider piloting to increase stable and consistent access to ECD centre places for children in need of care and support to learning whilst parents work/seek work? Must be researched.
3. Would Government support an approach to parental engagement to explore its effectiveness in strengthening child development, enhancing parenting skills and assisting the growth of family resilience? Yes, it is being looked into with other stakeholders, research of best practices and the formulation of a pedagogical vision.

#### **UNICEF Sint Maarten Post Hurricane Irma Education Sector Assessment Report, November 2017 (Document 6) and UNICEF Sint Maarten Post Hurricane Irma Child Protection Assessment Report, November 2017 (Document 7).**

2.16 The Education Sector assessment identified the urgent need to open more ECD centres and to implement parenting programmes (p.8). Although the urgency is a consequence of the hurricane, the strategies reflect the earlier SitAn recommendations. ECD centres are identified as benefitting from psychosocial support activities, although it is not clear whether these were continuing after the immediate response phase had ended (p.9). A long term psychosocial support (PSS) programme was recommended, together with support to teachers (including available safe housing), support to programmes within both ECD centres and Early Stimulation programmes and inclusion of children of migrants and children with disabilities (p.10).

2.17 The reports suggest several useful strategies to assist recovery in education and child protection services. They recommended the inclusion of ECD centres in the implementation. Questions that the assessment reports raise are as follows:

#### **For Department of Youth, UNICEF, MECYS, SECDA:**

1. Were the recommendations of the education assessment report implemented in ECD centres? If partially, where were they implemented and can the long term PSS programmes be observed

in action now? The “return to happiness” program was adjusted by SSSD to suit 0-4 and trainings were provided for care givers.

2. Did support for school safety plans include the ECD centres? Yes.
3. Was there an initiative to include disaster risk reduction in the curriculum for children in ECD centres? Will be included in any new developments in this area.
4. Were any bodies/agencies involved in supporting recovery efforts in ECD centres other than SECDA? UNICEF Netherlands.
5. Were media programmes as suggested devised for the early childhood age group? No.
6. Was this early childhood age cohort included in an Education Management Information System? No.
7. Did the strong coordination identified between MECYS and CPS include the children in the ECD centres? Baby clinic that serves 0-4 falls under CPS.
8. Did undocumented children in the ECD age cohort obtain access to services? In ECD centres? In child protection? There is no overview of this.
9. What did the rapid assessment of ECD Centres by the MECYS inspectors cover (p.17), and was there follow up at some point later? VSA, MECYS and VROMI inspectors ensured that centres were safe before allowing them to re-open. Regular inspections continued after that.

#### **A rapid assessment of the Mental Health and Psychosocial support (MHPSS) needs of people affected by Hurricane Irma, St Maarten 2018 (Document 8)**

2.18 The MHPSS assessment report echoed the impact of Irma on single mothers whose jobs had been lost; their search for alternatives forced them to face the limitations of their skills and aptitudes that were more suited for service roles in the tourism economy, whereas men were able more readily to adapt and undertake construction roles. The assessment also identified the differential impacts on those who were undocumented migrants in Sint Maarten and who could not access PSS services, which although limited, could be obtained by those with health insurance (p.10). The assessment raises the central question of the need to provide universal access to non-specialized MHPSS activities to reduce emotional vulnerability (p.13) and to incorporate this access into disaster risk management protocols.

#### **For SECDA and MECYS:**

1. How can ECD centres be integrated into future support arrangements from MHPSS programmes that are prioritised in the recovery phases after disaster, in this case by the Red Cross. It would appear that ECD Centres did not benefit after Irma. They are integrated in the recovery phase.

#### **The MECYS Resilience Plan, November 2017 (Document 9)**

2.19 Although described as a “public good” in the draft national ECD policy, ECD centres are not included in the initial description of the Education Sector at the commencement of the MECYS resilience Plan. Following a “broad-based inter-sector consultation” in October 2017, the plan identified capacity building, psychological support and continuous evaluation of the recovery process. The outcomes for the plan were identified through to 2019.

2.20 The damage to the ECD centres is identified in slide 10 as follows: 46% of the centres had little or no damage; 37% required repairs before they became operational; and 5 centres were completely destroyed. By October 2017, 21 of the 30 centres were operational, and all three subsidized after school programmes were operational. The centres are not mentioned in the early recovery phase (3 months) on slide 18. However the implementation of the national ECD policy and the Integrated Youth Policy are mentioned as “taken up in this budget post” on slide 24. Amongst the desired outcomes for policy and

legislation in slide 14 is “ECD and integrated youth policy adjusted where needed to disaster experience and needs and implemented according to adjusted policies”.

2.21 The question arises as to whether there has been follow through on the policy and legislation desired outcomes. Furthermore, whether ECD centres are receiving any focused attention from the MECYS Resilience Plan. It is noted that the after school services are receiving attention in several areas of the plan, but these benefit slightly older children in primary school.

#### **For the MECYS:**

1. What is the thinking on the inclusion of ECD centres in the Ministry’s resilience plan? They are included.
2. What support mechanisms are in place/can be put in place to support ECD centres participating in resilience programming? SEMC includes ECD sector in trainings provided to education sector.
3. Are there examples of private public partnerships in Sint Maarten or elsewhere that could serve to inform the structure and potential for such a partnership between the Government and ECD Centres (and SECDA)? Not researched enough.

#### **The National Recovery and Resilience Plan (NRRP) (Document 10)**

2.22 The absence of data, and specifically data that could be used as the basis for action, is identified as a deficit in the recovery efforts together with the capacity to immediately address the deficit. ECD centres are not stated as included in any of the six priority areas in the MECYS Recovery Strategy, although the first priority is “Psycho social support for all” (my emphasis). Each of the priority areas could include focused attention on the children, staff and parents of the ECD Centres:

- (a) psychosocial support for all;
- (b) teacher training in disaster management and emergency responses, and school safety;
- (c) curriculum assessment and afterschool programs;
- (d) improvement of safety and preparedness plans;
- (e) repair or reconstruction of physical infrastructure to improved building standards; and
- (f) improved policies and legislation to ensure long-term resilience.

2.23 Additional priorities include establishing school feeding programs for vulnerable children, enhancing child protection services and strengthening tertiary and vocational educational options in Sint Maarten (p.22). It is not clear whether these strategies may include the ECD centres, including the training of staff.

2.24 The Implementation Framework (p.35) provides for a structured approach to establishing (a) institutional arrangements (b) policy development (c) prioritisation and sequencing approach (d) financing strategy and (e) coordination, M&E and communications mechanisms. The sectors are to be targeted and incentivized during (c) above in a process that would be ideal for inclusion of the ECD centres. On p.44, there is a suggestion that pilot day care programmes be developed, implemented and assessed to assist working/job seeking/training parents; it is puzzling why the recommendation is for only a “pilot” and why existing centres could not be included. Access to disaster risk management training and support is mentioned (p.51) although ECD Centres are not mentioned specifically in this regard.

#### **For MECYS, SECDA:**

1. Are the ECD centres in receipt of support under the NRRP? If so, what kind of support? No

# ANNEX B. INTERVIEW QUESTIONS

## 1. QUESTIONNAIRE FOR OPERATORS OF THE ECD CENTRES ON SINT MAARTEN, OCTOBER 2018

Thank you very much for agreeing to participate in collecting information for this questionnaire. The purpose of the questionnaire is to provide information for the assessment of the situation of the ECD centres since the passing of hurricane Irma in order to identify needs and gaps to inform further programming. Your responses will assist in providing the initial information needed for the assessment.

Name of Centre: .....

Name of person responding: .....

Position at the Centre: .....

Date: .....

### QUESTIONS:

1. Please could you describe the three main impacts of the Hurricane on the operation of your centre?
2. In what ways has the Centre been able to respond to the main impacts you have identified?
3. What are the three main ways in which you will be able to respond in the event of future disasters?
4. What are the main sources of community support for the Centre?
5. What are the main needs of parents of children attending the centre in emergency response?
6. What are the main needs of staff at centre in emergency response?

Thank you.

Sian Williams, ECD Consultant

## 2. INTERVIEW GUIDE FOR ADMINISTERING THE QUESTIONNAIRE FOR OPERATORS OF THE ECD CENTRES ON SINT MAARTEN

The purpose of the questionnaire is to provide information for the assessment of the situation of the ECD centre sector since the passing of hurricane Irma in order to identify needs and gaps to inform further programming.

### Questions:

1. Please could you describe the three main impacts of the Hurricane on the operation of your centre? [responses sought: impacts on children; operational impacts on centre; physical impacts on centre; other impacts]
2. In what ways has the Centre been able to respond to the main impacts you have identified? [responses sought: responses in the programme with the children to assist their adjustment; operational responses including engagement of staff and parents; physical responses]
3. What are the three main ways in which you will be able to respond in the event of future disasters? [responses sought: inclusion in centre routines and the children's programme of strategies; communication and procedural mechanisms in the operation of the centre; physical adjustments in the centre]
4. What are the main sources of community support for the Centre? [responses sought: engagement of public authorities in emergency and disaster response including first responders, orientation to the centre and drills; community sources including places of safety and practical assistance; funding sources including fees and donations;]
5. What are the main needs of parents of children attending the centre in emergency response? [responses sought: communication planning; response procedures; meeting trauma needs of children and themselves;]
6. What are the main needs of staff at centre in emergency response? [responses sought: communication planning; response procedures; meeting trauma needs of children and themselves;]

### 3. QUESTION GUIDE FOR MEETING OF MEMBERS OF SECDA Monday 29th October, 10-12 am, SECDA Offices

Thank you for coming this morning to assist with this task. I am assisting MECYS, with support from UNICEF, to assess the situation of the ECD centre sector since the passing of hurricane Irma in order to identify needs and gaps to inform further programming. Many of you I have had a preliminary talk with by whatsapp and this has helped to identify a number of concerns and also opportunities. We have an hour or longer if you have time and I have three questions to start the conversation:

- 1. Building back to capacity: Many centres reported reduced income and have not been able to build back numbers. A major reason reported is that parents cannot afford to bring their children – yet. The numbers across the 10 centres I talked to, if taken together, show that you are a third down in capacity. This is likely to persist and is affecting both low income and increasingly middle income families. Can we explore ways in which you can build back to capacity again?** [Probe: SECDA to have an exploratory meeting with Chamber of Commerce, aim for an awareness day on early childhood development that explores what is important in support to the developing child, how this can be provided in day care centres, basic costs that day care centres have to meet, constraints experienced in the economy affecting the ability of parents to pay, opportunity for public private partnership to expand access to children experiencing hardship – subvention – criteria]
- 2. Coping with disasters: If a disaster were to happen today, centres have reported that in some ways they are in a better position to cope than in September 2017. What are the ways in which you have improved your ability to cope and what are the gaps you see in disaster risk preparation and management?** [Probe: what are the challenges in offering 'good' programmes that help children recover and become resilient to shocks?]
- 3. Strengthening collaboration: Since the experience of Irma, are there other collaborative activities you could do together under the 'umbrella' of SECDA to strengthen day care centres?** [Probe: (a) more mobilizing in support of its members (b) engage Chamber of Commerce, Rotary etc? (c) undertake common services e.g., group insurance; pension schemes; bulk purchase; small loans facility with a lending institution (d) creating (associate) membership to others e.g., home based I&T services, and to Early Stim teachers (e) sharing/ awareness days e.g., exchanges on programme experiences, what worked, what didn't; (f) public awareness selecting a champion to assist; (g) being more business aware e.g., data systems /Gov partnership (h) upgrading staff/customer service; (i) day care teacher/centre of the month; (j) parent engagement ideas and strategies]

## ANNEX C. DEFINITIONS AND DATA

Definitions and data on participation of children in ECD Centres in Sint Maarten

This note refers to the definitions used and the data collected on participation of children in early childhood services. Data are collected annually for reporting purposes for ISCED Level 0 for the UNESCO Institute for Statistics (UIS). These data can also be used for reporting progress on Indicator 4.2.2 of Target 4.2 of Goal 4 of the Sustainable Development Goals (SDG4): Quality Education.

The programmes provided in early stimulation services in centres described as day care centres, play-schools, preschools, ECD centres or early stimulation classes are all included in the definition of early childhood care and education programmes for ISCED 0 and for target 4.2 of SDG 4 as all these services provide organized programmes for supporting children's learning and development.

Reference is made to Education Indicators, Technical guidelines, UNESCO Institute for Statistics (UIS), November 2009, pp 45-6 and Target 4.2.2 of Sustainable Development Goal 4.

### Sustainable Development Goals, Goal 4 (SDG4): Quality Education



#### TARGET 4.2 for SDG4: Ensure all girls and boys have access to quality early childhood development, care and pre-primary education:

The rationale for this target in the Education Goal is based on the understanding from research that inadequate teaching and care in early childhood centres result in inefficient investments in schools and remedial programmes later in life. Quality education predicts lifetime achievement, but can only be effective when children enter school ready to learn and schools are ready to support their learning. Support to vulnerable children in good quality early

childhood programmes delivered by well trained teachers and practitioners provides children with opportunities to 'level the playing field' and to engage their parents in the process of long term involvement in their children's education. There is one indicator under this target for participation in ECCE programmes:

- *Indicator 4.2.2 for Target 4.2: Participation rate in organized learning (one year before the official primary entry age), by sex*

### UNESCO Institute for Statistics (UIS), and the International Standard Classification of Education (ISCED) Level 0

Enrolment data are collected through the annual UIS Survey of Formal Education. Data are reported by governments according to the levels of education defined in The International Standard Classification of Education (ISCED), a statistical framework for organizing information on education maintained by UNESCO.

ISCED Level 0 is the level of statistical information in ISCED that describes the participation of children in early childhood programmes during the years prior to entry to primary education. ISCED 0 level is subdivided into two, representing services for children below 3 (01) and for those from 3 to the start of primary education (02).

Early childhood Education (01 Early childhood educational development)	Education designed to support early development in preparation for participation in school and society. Programmes designed for children below the age of 3.
Early childhood Education (02 Pre-primary education)	Education designed to support early development in preparation for participation in school and society. Programmes designed for children from age 3 to the start of primary education.

In the description of the early childhood services within which data are to be collected on participation of children, the expanded term Early Childhood Care and Education (ECCE) is used rather than Early Childhood Education (ECE). The use of the term ECCE serves to emphasise the inclusion of care programmes on the basis that these support children's learning within the broad definition of education.

There are two indicators for participation of the early childhood cohort in education and care (ECCE) programmes:

1. *Gross enrolment ratio in early childhood care and education (GER/ECCE)*
2. *Percentage of new entrants to primary education with ECCE experience*

### 1. GROSS ENROLMENT RATIO IN EARLY CHILDHOOD CARE AND EDUCATION (GER/ECCE)

**Definition:** Total number of children enrolled in early childhood care and education programmes, regardless of age, expressed as a percentage of the population in the relevant official age group.

**Purpose:** To measure the general level of participation of young children in ECCE programmes. It also indicates a country's capacity to prepare young children for primary education.

**Calculation method:** Divide the total number of children enrolled in ECCE programmes, regardless of age, by the population in the relevant official age group in a given school year, and multiply by 100.

**Formula:** (see technical guidelines)

**Data required:** Total enrolment in ECCE programmes; population in the relevant official age group.

**Data source:** School register, school survey or census for data on enrolment; population censuses or estimates for school-age population normally obtained from the central statistical office.

**Types of disaggregation:** By gender and geographical location (region, urban/rural).

**Interpretation:** A ratio indicates adequate capacity for this type of programme within the country. A ratio approaching or surpassing 100% indicates that the country is, in principle, able to accommodate all children in the ECCE age group.

**Quality Standards:** The data on enrolment should cover both public and private institutions and programmes. Since gross enrolment does not take the age factor into account, children below 3 years and above 5 years (or whatever the official age group may be) will also be included. Therefore, gross enrolment can exceed 100 percent. Only countries that require official registration of any ECCE provision are likely to have official data for this indicator. Countries that have data only for public or state-supervised pre-school educational programmes will need to supplement these data with information on enrolment in other types of ECCE programmes, possibly through case studies and/or sample surveys.

**Limitations:** Enrolment data for ECCE programmes can be affected by differences in reporting practices, namely by the extent to which childcare programmes with little or no pedagogical component are inclu-

ded in the statistics. The distinction between ECCE programmes and organized, custodial childcare can be difficult to define in an internationally consistent way, especially with regard to very young children, for whom the natural pace of development limits the pedagogical possibilities. Countries may also differ widely in their approaches to ECCE, with some focusing on experiential education while others stress skill development, academic development, the visual arts, etc.

### 2. PERCENTAGE OF NEW ENTRANTS TO PRIMARY EDUCATION WITH ECCE EXPERIENCE.

**Definition:** Number of new entrants to primary grade 1 who have attended some form of organized early childhood care and education (ECCE) programme for the equivalent of at least 200 hours, expressed as a percentage of total number of new entrants to primary grade 1.

**Purpose:** To assess the proportion of new entrants to grade 1 who presumably have received some preparation for primary schooling through ECCE programmes.

**Calculation Method:** Divide the number of new entrants to grade 1 of primary education who have attended some form of organized ECCE programme by the total number of new entrants to primary grade 1 in a given school year, and multiply by 100.

**Formula:** (see technical guidelines)

**Data Required:** New entrants to grade 1 of primary education who have attended some form of organized ECCE programme, and total number of new entrants to primary grade 1.

**Data source:** School register, school survey or census for data on enrolment.

**Types of disaggregation:** By gender and geographical location (region, urban/rural).

**Interpretation:** A high percentage of new entrants to grade 1 of primary education who have attended some form of organized ECCE programme indicates that a large proportion of these children have participated in organized learning activities prior to entering primary school. Progress in schooling is often associated with cognitive abilities acquired at young ages. It is commonly recognized that prior participation in ECCE programmes can play an important role in a child's future education, because they shape attitudes toward learning and develop basic social skills, but the effect of ECCE activities on children's cognitive development may vary according to the programme attended.

**Quality Standards:** The percentage of new entrants to primary grade 1 who have attended some form of organized ECCE programme cannot exceed 100%. Obtaining data for this indicator will be a problem in many countries. Useful data may exist in school registration records, and school census instruments may also be geared to collecting this information. Otherwise, the data could be gathered through a sample survey of schools or through household surveys.

**Limitations:** This indicator may give an exaggerated picture of access to ECCE, since those children who have access to these programmes are also more likely to have access to primary schools.

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