



**Kingdom of Cambodia**

**Nation – Religion – King**

**ROYAL GOVERNMENT OF CAMBODIA**

# **NATIONAL POLICY**

**ON**

**EARLY CHILDHOOD CARE AND DEVELOPMENT**

**Endorsed by Council of Ministers  
During a Plenary Session on 19 February 2010**

## **Introduction**

During early childhood (from the conception to age 6), children experience physical and emotional development, which is their fundamental need. This development always takes place in a simultaneous and inter-connected fashion.

Rapid brain development occurs during the early years of life. The experience showed that in the early years, young children require care, support from their families and society so that they can have access to various services such as nutrition, health care, learning opportunities, protection from risks etc. Such work can be successfully undertaken when children and their families are supported by a policy and sufficient investment.

The Royal Government of Cambodia recognizes the importance of early childhood care and development (ECCD), the value for the future of the children who will be pillars of the country. Early childhood care and development is a priority and indispensable element of Education for All (EFA) and Poverty Alleviation Strategy of the Royal Government of Cambodia.

According to the population census conducted in 2008, the total population of Cambodia was 13.4 million, 51.36% of them were women. About 19.5% of the population live in the urban areas and the remaining 80.5% live in the rural areas. The poverty rate was reduced from 47% in 1993 to 34.7% in 2004. Although a primary estimated poverty rate would further decrease to 30.1% in 2007, the poverty in rural areas remain high. The Royal Government of Cambodia has tried to improve the welfare of the people, in particular the poor, women and children. As a result, infant mortality rate declined from 95 to only 66 per 1,000 live births in 2005, while mortality rate among children under 5 decreased to 83 per 1,000 live births in 2005. But, the maternal mortality rate is still high at 472 per 100,000 live births. In 2005, more than 69% of pregnant women were provided with health care by health practitioners at least once before birth delivery.

There is growing evidence that children who experience malnutrition, underweight and unhealthiness are less likely to perform well at schooling. Early childhood enrolment rate increased from 10.8% in 2005 to 15.6% in 2008. Based on a number of surveys, children who experience preschools

usually start their primary education at the age of 6 and the majority of them manage to complete their primary levels without repetition and school dropout.

The constitution, laws and policies of the Royal Government of Cambodia highlights the attention on children care and education of children. Article 48 of the constitution, for instance, states “The State shall protect the rights of the children as stipulated in the Convention on Children, in particular, the rights to life, education, protection during wartime, and from economic or sexual exploitation. The State shall protect children from acts that are injurious to their educational opportunities, health or welfare.”

In order to reach the goal and strategies of the early childhood care and development, monitoring system for progressive evaluation of policy implementation is needed.

## **Chapter 1**

### **VISION**

#### **I. Vision**

All Cambodian children, from conception to aged under six, especially disadvantaged, vulnerable and poor children, shall be provided with care and development services, in line with the Constitution of the Kingdom of Cambodia.

#### **II. Goal and Objectives**

1. To ensure that all women are provided with care, health education services and nutrition during pregnancy;
2. To ensure that all children have their births registered, are provided with regular care and health checkup, have access to adequate immunization and nutrition and early learning;
3. To ensure school readiness of all Cambodian children to start grade 1 at age six;
4. To ensure that there will be technical staff, care givers, parents and guardians with appropriate knowledge on early childhood care and development;
5. To ensure that all relevant ministries/institutions work together closely to address the issues concerning early childhood care and development; and
6. To ensure that children from birth to schooling age shall enjoy physical, cognitive, mental and emotional development at both home and centers, providing quality and sustainable health services, nutrition and education.

## **Chapter 2**

### **STRATEGIES**

Major strategies to realize above goal and objectives are as followings:

1. Prepare legal framework, standards and mechanisms to effectively support and implement the policy, by identifying cooperation and duties of main stakeholders;

2. Improve existing or newly-established monitoring and evaluation system with participation from ministries/institutions, communities and development partners, and improve national and sub-national technical coordination committee with clear divisions of roles and responsibilities;
3. Build capacity (pre-service and in-service training) for program practitioners, parents, guardians and child care supervisors on the contents and how to take care of children in line with curriculum and decentralization and deconcentration policy;
4. Develop national and sub-national mechanisms in provision of certificate or recognition certificate to program practitioners based on actual care service;
5. Expand services and education on health care and nutrition to all pregnant women;
6. Expand health care services for all infants from 0-3 years with regular health checkup, provision of timely and adequate immunization and monitoring on nutrition provision services for children with malnutrition, chronic illnesses, delayed development and disabilities.
7. Expand early childhood care and development services, including state, community, private and home based services, especially early learning, for young children.
8. Ensure that all households have access to such information and services as safe water and sanitation, health, nutrition, breastfeeding, food supplementation, immunization, vitamin A, iron and iodized salt, early learning, birth registry, prevention of all types of diseases such as HIV/AIDS, malaria, protection children from violence and other forms of vulnerabilities; and
9. Develop communication mechanism on early childhood care and development to attract support for these services.

### **Chapter 3**

## **POLICY AND IMPLEMENTATION**

### **I. Policy**

The main contents of early childhood care and development Policy are as followings:

1. Ensure the provision of early childhood care and development services from conception to aged under six;
2. Ensure that children have access to holistic early childhood care and development services;
3. Ensure that all concerned ministries, public institutions and civil societies work together for early childhood care and development;

## **II. Implementation**

Ministry of Education, Youth and Sport plays a crucial role in leading and coordinating with relevant ministries/institutions, development partners and civil society to cooperatively carry out roles and responsibilities for effective support on early childhood care and development.

### **1. Ministry of Education, Youth, and Sport**

- 1.1 Develop documents and game materials for early childhood care and development;
- 1.2 Provide preschool techniques and other early childhood development programmes to be used as a model for implementation;
- 1.3 Develop various standards for ECCD (game materials, children park/playground);
- 1.4 Ensure quality of ECCD through the provision of quality training to preschool teachers, facilitators and other relevant workers;
- 1.5 Communicate on how to use game materials to ensure safety for young children; and
- 1.6 Coordinate the implementation of ECCD among involved ministries/institutions.

### **2. Ministry of Health**

- 2.1 Ensure technical coordination with Ministry of Education, Youth and Sport to develop resource materials on health and nutrition and train facilitators including preschool teachers;
- 2.2 Educate parents on care for the health of mothers and infants, including importance of breastfeeding and adequate intake of iodine, iron and folic acid, vitamin A and other micronutrients;
- 2.3 Incorporate ECCD component in the training of nurses and other health workers;

- 2.4 Ensure vaccination/immunization and other survival and growth rights of all children;
- 2.5 Ensure health and physical development of children through basic health provision; and
- 2.6 Provide technical resources and involve in community health education.

**3. Ministry of Interior**

- 3.1 Encourage, monitor and support commune/sangkat councils (commune committee for women and children) to implement guideline of the ministry;
- 3.2. Cooperate with ministries, institutions, and development partners to update the guideline for commune/sangkat councils to implement ECCD policy;
- 3.3. Get involved in evaluation of ECCD services; and
- 3.4. Encourage commune/sangkat councils to pay attention on ECCD-related priority needs and include them into commune/sangkat development plan and commune/sangkat investment program.

**4. Ministry of Women's Affairs**

- 4.1 Encourage, support, enhance and establish quality ECCD services for general households in need of these services, especially working mothers who need people to take care of their children through networking with various royal government institutions and development partners;
- 4.2 Communicate the importance of education of women and girls to ensure gender equality and equity at all levels and raise awareness on women's right and child's rights by using all means; and
- 4.3 Improve capacity of officials at all levels, commune/sangkat committee for women and children, facilitators, caregivers, volunteers and parents in the communities on primary health care services, life skills and gender mainstreaming.

**5. Ministry of Information**

- 5.1 Develop mass media campaigns for dissemination of ECCD-related information.
- 5.2 Expand and strengthen the mass media, which plays an important role to raise awareness on child's rights, including ECCD issues, to disseminate information on parent education



- 5.3 Develop quality programs for education and entertainment of children.

**6. Ministry of Social Affairs, Veterans and Youth Rehabilitation**

- 6.1. Support the implementation of alternative care policy and other standards on alternative care for children in the centers and in communities;
- 6.2. Ensure that orphans, parentless children, disable children, and children with no relatives are provided with continual parenting services in the state orphanages or NGO-supported centers where accommodation, health care, vocational training and integration are provided;
- 6.3. Ensure that child caretakers received training services on psychology and skill on child care;
- 6.4. Ensure that all preschool age children living in state orphanages and NGO-supported orphanages or communities are going to preschool to prepare for primary school;
- 6.5. Integrate ECCD into community-based rehabilitation programs/community-based child protection network and other ministry programs;
- 6.6. Encourage advocacy on inclusion of children needs into national development plan at all levels.
- 6.7. Continue strengthen activities of the Cambodian National Council for Children (CNCC) which is a coordination mechanism among relevant institutions on child protection.

**7. Ministry of Rural Development**

- 7.1 Encourage provincial/municipal Rural Development Departments to coordinate, monitor and support relevant commune/sangkat councils and commune committee for women and children;
- 7.2 Collaborate with relevant institutions to strengthen Village Development Committees to enable them to identify means to address challenges in their communities through access to safe water, hygiene, food security, nutrition, sanitation, and rural credit.
- 7.3 Promote the construction of rural infrastructure through road construction, access to water supply, latrines and sanitation and hygiene for well-beings of women and children.

**8. The Ministry of Economy and Finance**



The Ministry of Economy and Finance is responsible for ECCD by ensuring timely funding for ECCD activities.

**9. The Ministry of Planning**

- 9.1 Facilitate and compile national indicators for setting ECCD targets;
- 9.2 Facilitate and approve principles and methodologies for data collection for monitoring and evaluating the implementation of plans and programs which have been identified;
- 9.3 Facilitate and develop ECCD plan to a national plan; and
- 9.4 Disseminate national figures and indicators derived from plan implementation and goals for wider and effective ECCD.

**10. Ministry of Agriculture, Forestry, and Fisheries**

- 10.1 Encourage and improve agricultural productivity and diversification for parents, guardians, supervisors through agricultural extension workers at all levels;
- 10.2 Enhance and strengthen capacity of village agricultural extension workers or health workers and community to help parents, guardians, and supervisors to have basis for optimizing their agricultural productivity based on their available resources such as developing vegetable garden, livestock production and growing varieties of crops in their yard;
- 10.3 Build capacity of parents of how to maintain and use supplementary elements to increase production of food based on appropriate technology to ensure food security for both users and consumers, especially children; and
- 10.4 Place attention on using all means to disseminate agricultural information for the sake of women and children such as promoting awareness on bird flu, safe uses of agricultural chemicals, agricultural fertilizers etc.

**11. Ministry of Environment**

- 11.1 Parents or guardians shall be the role models in environmental protection so that young children are able to see and understand the importance of the environment;
- 11.2 Communicate to communities, parents and guardians on the importance of health impacts and how to properly keep poisonous substances used for vegetation to ensure safety for users and environment, especially young children;

- 11.3 Promote health environment for the sake of citizens', especially women's and children's welfare;
- 11.4 Prevent all types of environmental pollution, which adversely impact early childhood care and development;
- 11.5 Communicate and raise awareness among parents, guardians and teachers so that they can educate young children to engage in cleaning environment at home, at school and at public places and on impact on welfare and hazards.

## **12. Parents and families**

- 12.1 Seek necessary knowledge and skills in parenting their children;
- 12.2 Send children to ECCD programs where available;
- 12.3 Make known their needs and contribute to the establishment of ECCD programs in their village and share their experience to other households;
- 12.4 Monitor and evaluate physical and intellectual development;
- 12.5 Refrain from committing domestic violence, especially on young children.

## **13. Development partners and civil society**

- 13.1 Support formal and non-formal and community-based ECCD services;
- 13.2 Support new models of ECCD programs by closely cooperating with the Royal Government;
- 13.3 Support training courses for preschool teachers, ECCD facilitators and parents;
- 13.4 Build network with other ECCD organizations to share information and experience; and
- 13.5 Support and provide assistance to ECCD programs targeted at the poor and disadvantaged areas.

## **CONCLUSION**

Early childhood care and development is the most concerned issue as young children are vulnerable to risks.

The following requirements are needed to realize this policy:

- Mechanism/legal framework to establish a National Committee and a Technical Coordination Committee on ECCD. These documents are included with several necessary requirements such as management structures, roles/responsibilities of the National Committee and the Technical Coordination Committee on ECCD and responsibilities of concerned ministries, institutions, and development partners;
- Prepare national plan to promote ECCD with inclusion of detailed activities and budget; and
- Mobilize support from all stakeholders.

Concerned ministries, institutions and authorities at all levels shall contribute to highly effective improvement and implementation of national policy on ECCD and shall widely disseminate the contents of the policy to people and development partners with an aim to encourage their involvement in successful implementation of the policy.

## **ANNEX**

**1. Cambodian National Council for Children**

A mechanism, which is mandated to consult, coordinate, communicate, prepare reports, monitor and evaluate the implementation of the Convention on the Right of the Child.

**2. National Committee for Early Childhood Care and Development**

A mechanism responsible for implementing the National Policy on Early Childhood Care and Development to respond to the Law on Education, in line with the Constitution of the Kingdom of Cambodia.

**3. Consultative Committee on Women and Children**

This committee has the rights and is mandated to give comments and recommendations to councils, board of governors, governors and other committees under the councils in terms of issues related to gender equality, and women and children, which are under the mandate of the councils.