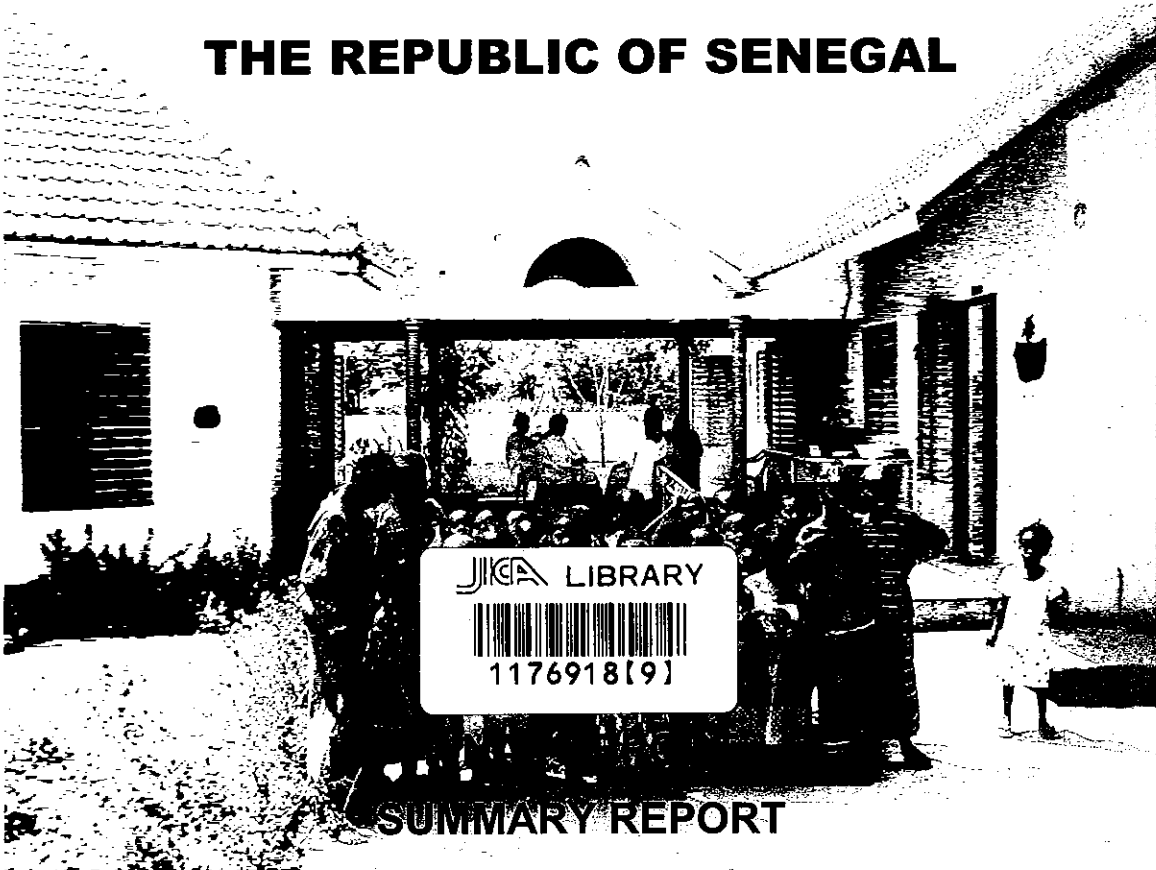


JAPAN INTERNATIONAL  
COOPERATION AGENCY

NATIONAL AGENCY OF CASE  
DES TOUT-PETITS (NACTP)  
THE REPUBLIC OF SENEGAL

**THE STUDY  
ON  
THE IMPROVEMENT OF ENVIRONMENT  
FOR EARLY CHILDHOOD  
IN  
THE REPUBLIC OF SENEGAL**



August 2004

KRI INTERNATIONAL CORP.

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**FINAL REPORT  
SUMMARY REPORT**

**AUGUST 2004**

**KRI INTERNATIONAL CORP.**

# **FINAL REPORT**

**SUMMARY REPORT**

**MAIN REPORT**

**SUPPORTING REPORT**

**DATA BOOK (MANUALS)**



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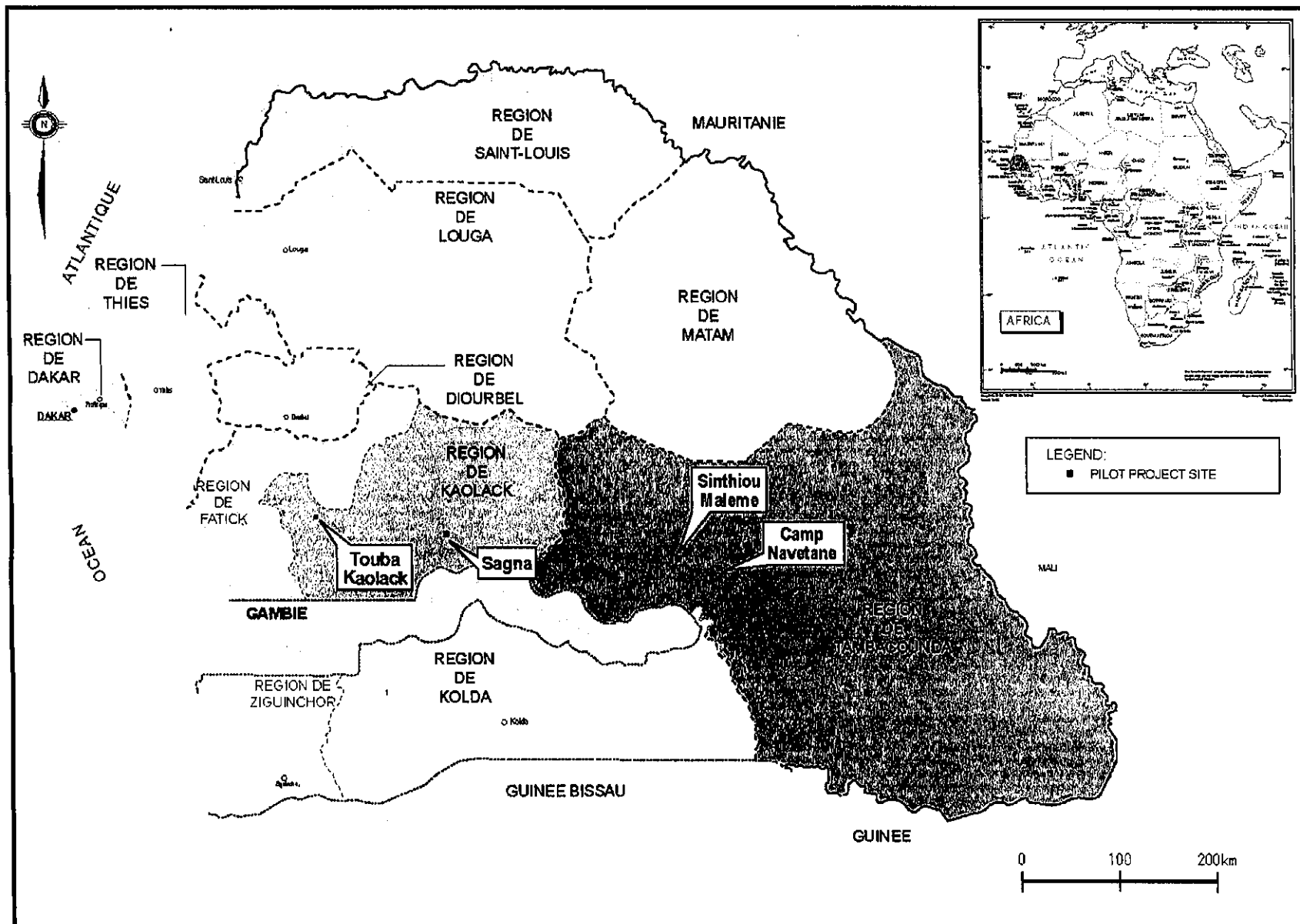
## **Exchange Rate**

(as of August 2004)

US\$1=¥110.45

US\$1=FCFA534.08

FCFA1 = ¥0.21



LOCATION MAP



**THE STUDY  
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## Abbreviations and Acronyms

ADPES	Association pour une Dynamique de Progres Economique et Social
AEMO	Action Educative en Milieu Ouvert
AIDS	Acquired Immunodeficiency Syndrome
ARI	Acute Respiratory Infections
ASC	Agents Sanitaires Communautaires
BASIC	Basic Support for Institutionalizing Child Survival
BCG	Bacillus Calmette-Guérin Vaccine
CADASTRE	Cadastral office
CBO	Community Based Organization
CCF	Christian Children Fund
CEDAW	Conventions on the Elimination of All Forms of Discrimination against Women
CLM	Cellule Nationale de Lutte contre la Malnutrition
CRC	Convention on the Rights of the Children
CSEC	Commercial Sexual Exploitation of Children
CTP	Case des Tout-Petits
CTNS	Cellule Technique Nutrition-Santé
DPT	Diphtheria, Pertussis and Tetanus Vaccine
ECCECD	Executive Coordination Committee for Early Childhood Development
ECD	Early Childhood Development
ECE	Early Childhood Education
ECPAT	End Child Prostitution, Child Pornography and Trafficking of Children for Sexual Purposes
EGM.BTV	Enterprise Generale De Mellugrie Batiments-TP-Vidange
ENDA-TM	Environnement, Développement et Action dans le Tiers Monde
EMIS	Education Management Information System
ESIS	Enquête Sénégalaise sur les Indicateurs de Santé
FDEA	Femme, Developpement et Entreprises en Afrique
FGM	Female Genital Mutilation
FP	Family Planning
GMFC	Global Movement for Children
GOJ	Government of Japan
GOS	Government of Senegal

HIV	Human Immunodeficiency Virus
IBRD	International Bank for Reconstruction and Development
IDD	Iodine Deficiency Disorders
ILO	International Labor Organization
IMCI	Integrated Management of Childhood Illness
IMR	Infant Mortality Rate
IPEC	International Program for the Eradication of Child Labor
JICA	Japan International Cooperation Agency
LBW	Low Birth Weight
MAC	Maison d' Arrêt et de Correction (Detention and Correction House)
M/C	Management Committee
MCEL	Ministry of Civil Service, Employment and Labor
MCH	Maternal and Child Health
MDGs	Millennium Development Goals
MEF	Ministry of Economy and Finances
MFSDNS	Ministry of Family, Social Development and National Solidarity
MHP	Ministry of Health and Prevention
M/M	Minutes of the Meeting
MMR	Maternal Mortality Rate
MOE	Ministry of Education
MOH	Ministry of Health
MOJ	Ministry of Justice
MPHC	Ministry of State owned built patrimony, Habitation and Construction
MPPHS	Ministry of Prevention, Public Hygiene and Sanitation
NACTP	National Agency of Case des Tout-Petits (NACTP is the counterpart agency at the end of the Study. The Study started with MFEC (Ministry of Family and Early Childhood), which was taken over by MPECTP (Ministry of Preschool Education and CTP), then MECCTP (Ministry of Early Childhood and CTP).)
NGO	Non-Governmental Organization
NPIECD	National Policy for Integrated Early Childhood Development
OPV	Oral Polio Vaccine
OVI	Objectively Verifiable Indicator
PDEF	Ten-Year Education and Training Plan

PDIS	Programme de Développement Intégré de la Santé et de l'Action Sociale
PEM	Protein-Energy Malnutrition
PHC	Primary Health Care
PNDS	Plan National de Développement Sanitaire et Social
PRDE	Educational Development Plan for Region
PRSP	Poverty Reduction Strategy Paper
PTTS	Preschool Teachers Training School
S/C	Supervisory Committee
SIP	Sector Investment Program
SOV	Source of Verification
SPP	Service Provision Points
STDs	Sexually Transmitted Diseases
TCI	Technical Committee for Implementing ECD Programs and Projects
TFR	Total Fertility Rate
USMR	Under 5 Mortality Rate
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
URBANISME	Regional office of Ministry of Town Planning and Territory Development
USAID	U.S. Agency for International Development
WCEFA	World Conference on Education for All
WEF	World Education Forum
WFP	World Food Program
WHO	World Health Organization

### Unit

m	meter
km	kilometer
km <sup>2</sup>	square kilometer
ha	hectare
kg	kilogram
%	percentage

**Currency Unit**

FCFA	Franc(s) de la Communauté Financière d'Afrique, West African Currency
US\$	US Dollar

## GLOSSARY

TERMINOLOGY	GENERALLY ACCEPTED MEANING
<b>CTP Terminology</b>	
Instructor (Animateur Polyvalent)	Teaching staff at CTP, also in charge of the Mother's class, recruited from the near-by community. Instructors must have at least junior high school education.
Assistant Mother	Assistant Teaching staff at CTP, also in charge of the Mother's class, recruited from the near-by community. Assistant Mothers must be holders of primary school diplomas.
Management Committee	A six-member committee responsible for collecting tuition, accounting and managing activities of the CTP on a voluntary-basis.
Supervisory Committee	Advisory committee on CTP operation. The members usually consist of a village chief, primary school teachers, nurses and leaders of women's groups. The committee deals with problems that the Management Committee cannot solve; for example, no collected tuition. The members are volunteers.
General Assembly	Annual meeting on the management of the CTP. The activity report and following year's plan are discussed. Members of Supervisory Committee and the Management Committee are elected by the General Assembly.
Cine-bus	A land-cruiser with cinema screening equipment procured by the JICA Senegal Office. The cine-bus visited the CTP once a month.
<b>Global Strategy-related Terminology</b>	
Early Childhood Development (ECD)	Comprehensive approach to policies and programs for children from birth to eight years of age to safeguard the rights of children to develop cognitively, emotionally, socially and physically.
Early Childhood Education (ECE)	Educational activity provided prior to primary school education. The Ministry of Education is responsible in the case of Senegal.
<b>Health related Terminology</b>	
Agents Sanitaire Communaires (ASC)	An ASC is a community health worker chosen by the community and trained to work for the Case de Sante.
Poste de Sante	Poste de Sante is a health infrastructure located in the Communauté Rurale. It belongs to the health district supervised by the chief doctor and can provide the basic treatment.
Case de Sante	Case de Sante is smaller and less capable than Poste de Sante. The minor treatment is provided by an ASC.
Infant Mortality Rate	The infant mortality rate is the ratio of infants who die before reaching one year of age, per 1,000 live births in a given year.
Under 5 Mortality Rate	The under five mortality rate is the probability that a new born will die before reaching age 5.
<b>Others</b>	
Daara	A school-like place where the Koran is taught.
Talibés	Children studying the Koran at Daara. Some children board at Daara while some commute to Daara. Talibés are not necessarily street beggars.

Source: JICA Study, JICA, UNICEF, WORLD BANK



## CHAPTER 1 INTRODUCTION

### 1.1 Study Background

The Government of the Republic of Senegal (GOS) embarked on the implementation of a holistic approach by constructing necessary facilities, including Case des Tout-Petits (CTP), in order to improve the socioeconomic and physical environment for early childhood and to promote this sector. The GOS thus requested the Government of Japan (GOJ) to conduct the Study on the Improvement of Environment for Early Childhood in the Republic of Senegal in accordance with the relevant laws and regulations in force in Japan.

In response to the request, GOJ decided to conduct the Study, and the Japan International Cooperation Agency (JICA), the official agency responsible for the implementation of the technical cooperation programs of the GOJ, has been commissioned to undertake the Study in cooperation with the Senegalese authorities concerned. A Preparatory Study Team was dispatched from JICA during the period of 28 July to 12 August, 2001 to discuss the Scope of Work for the Study. The Preparatory Study Team carried out the field survey on the Study area and held series of discussions with Senegalese officials. On the basis of this Preparatory Study, a Minutes of the Meeting(M/M) specifying the Scope of Work was prepared and agreed upon among the Ministry of Family and Early Childhood(MFEC), the Ministry of Economy and Finance and the Preparatory Study Team on August 9, 2001. For the implementation of the Study, JICA entrusted this work to KRI International Corporation and assigned the JICA Study Team to conduct the Study.

### 1.2 Objectives of the Study

The areas selected for the Study were the Kaolack and Tambacounda regions in the Republic of Senegal.

The objectives of the Study were:

- To formulate a Master Plan for the improvement of the environment for early childhood in the Kaolack and Tambacounda regions; and
- To conduct technology transfer on know-how for 1)the sustainable operation of the CTP and 2) the development of a plan to improve the Senegalese counterpart personnel through the Study.

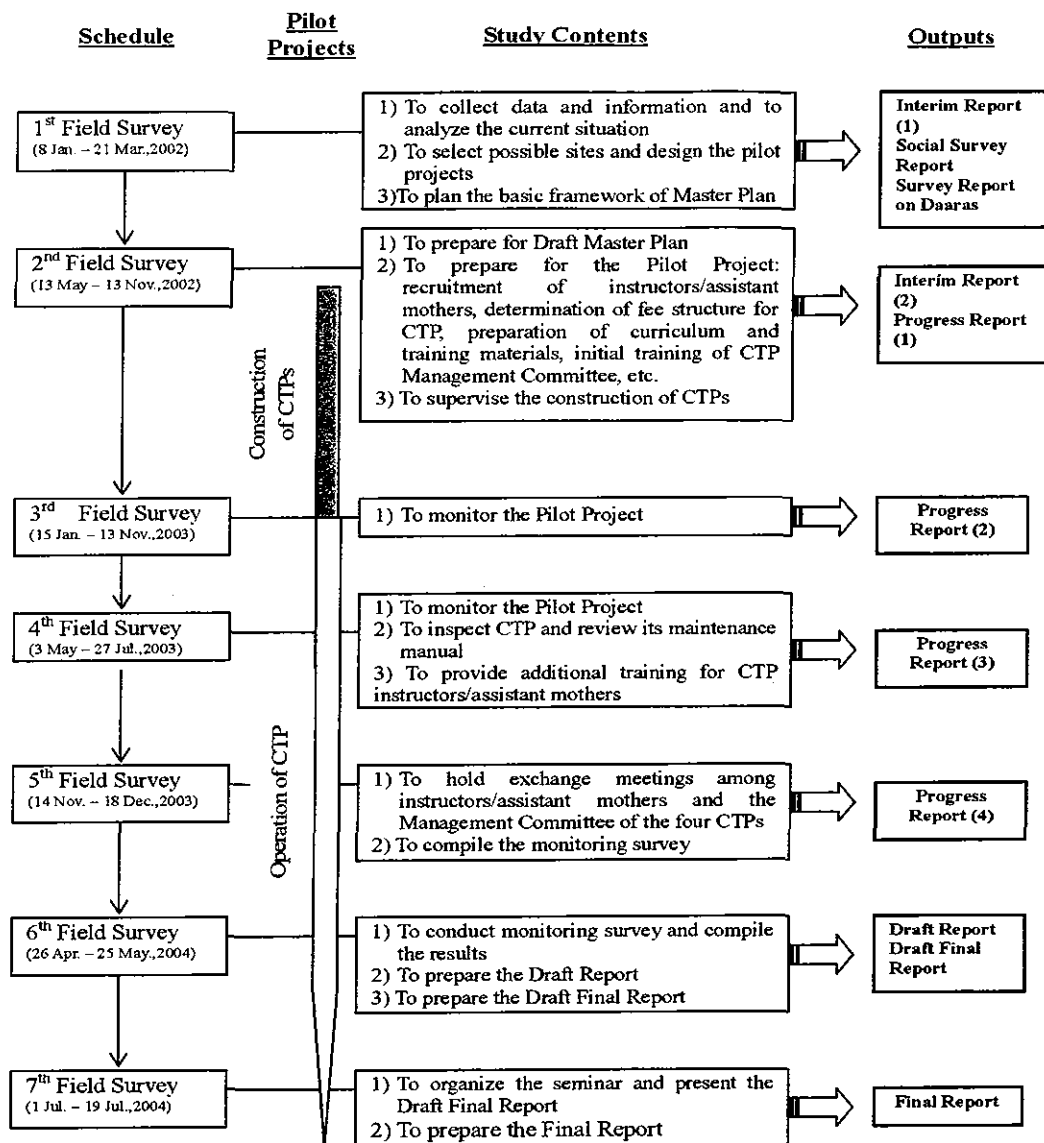


### **1.3 Progress of the Study and Outputs**

Following the preparatory works in Japan, the field surveys for the Study commenced from January 8, 2002. A few weeks later, on January 22, 2002, the initial explanation of the Inception Report was presented in Dakar to an audience of Steering Committee members, representatives of the MFEC, and related government ministries/agencies, as well as guests from international organizations and non-governmental organizations. Similar seminars were held in Kaolack and Tambacounda during January-February 2002.

In total, seven field surveys have been conducted for the Study. The schedule, major contents and outputs of these surveys are summarized in FigureS.1.

Figure S.1 Overall Study Flow



The reports listed on the right side of the above Figure are the outputs made at each field survey. In addition to these reports, the Study produced the following manuals; Manual for Community Approach, Manual for CTP Sensitization, Manual for the Management Committee on Sensitization and CTP Operation, Manual for CTP Maintenance, Regulations of the CTP Management Committee, Micro-Project Management Guide for the Use of Instructors in the Case des Tout-Petits, and 5 Training Guides for the CTP Instructors (Children’s rights, Education, Sanitation, Nutrition, and Education for Disabled Children).

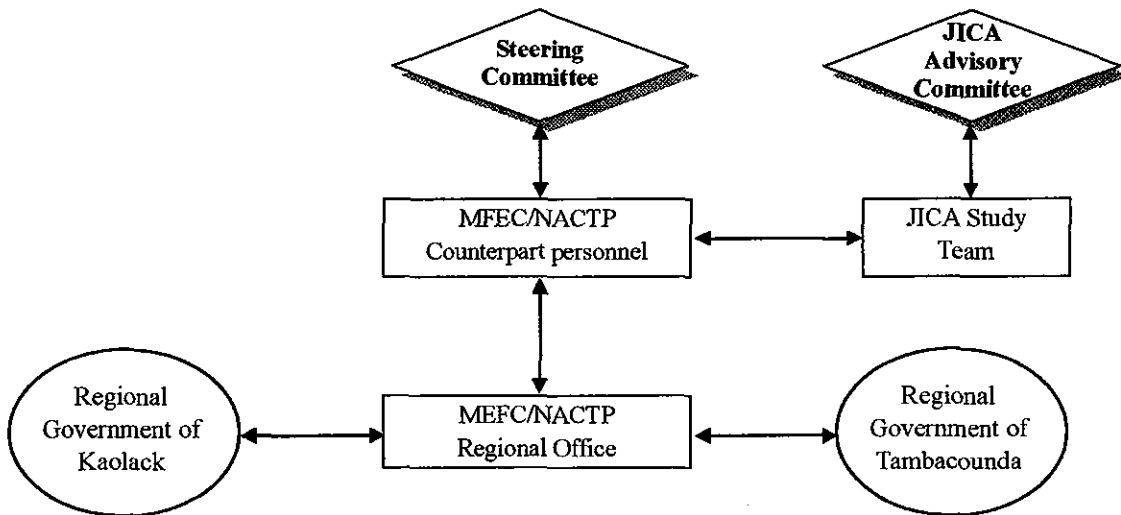
### 1.4 Organization of the Study

The Steering Committee has been established for the efficient implementation of the Study. The Committee was chaired by the Director of the Cabinet of the MFEC and consisted of directors and senior officials from ministries/agencies and local governments in Senegal.

The Study was conducted by the JICA Study Team in close cooperation with the counterpart personnel from the MFEC (now NACTP). The Study Team presented progress and results of the Study at the presentation seminars and workshops. Comments and suggestions made during these sessions have been reflected in the reports.

The overall implementing organization for the Study is summarized in Figure S.2.

**Figure S.2 Organization of the Study**



### 1.5 Structure of Main Report

This report consists of five chapters: Chapter 1 Introduction; Chapter 2 Overview of Early Childhood Development in Senegal, Chapter 3 CTP and Pilot Project Implementation; Chapter 4 Master Plan for Improvement of Environment for Early Childhood; Chapter 5 Conclusions and Recommendations.

## **CHAPTER 2 OVERVIEW OF EARLY CHILDHOOD DEVELOPMENT IN SENEGAL**

This Chapter discusses the global initiatives on early childhood, the Senegalese government initiatives, and the programs run by development partners in Senegal. Next, the chapter reviews the current situation of early childhood in Kaolack and Tambacounda (pre-school education, health and nutrition, and the children's rights) and discusses the ways in which the JICA Study on early childhood development (this study) intersects with global initiatives and the Senegalese government's initiative.

### **2.1 Early Childhood Development Initiatives**

#### **2.1.1 The Global Initiative**

Many development partners, including UNICEF, UNESCO and the World Bank have stepped up their programs on early childhood development since the 1990's. The United Nations Convention on the Rights of the Child (1989), the World Conference on Education for All (1990), and the World Education Forum (2000) noted the importance of early childhood development. The following summarizes major issues agreed upon in those and other meetings.

##### **(1) 1989 UN Convention on the Rights of the Child (CRC)**

The United Nations Convention on the Rights of the Child was organized in 1989. There are 54 articles on the rights of children. The following eight articles provide the basis of intervention in early childhood: Article 6 (*inherent right to life*), Article 7 (*birth registration*), Article 18 (*responsibility for the upbringing and development of the child and appropriate assistance of the State*), Article 24 (*health and nutrition of children, infant and child mortality, pre-natal and post-natal health care for mothers*), Article 28 (*the right to education*), Article 29 (*education of the child*), Article 30 (*the right to use his or her own language*) and Article 31 (*the right to cultural, recreational and leisure activity*). The Republic of Senegal ratified the CRC in 1990.

##### **(2) World Conference on Education for All (WCEFA) - 1990**

In gathering at Jomtien, Thailand in March 1990, the international education community adopted the World Declaration on Education for All (known as the Jomtien Declaration or WCEFA). Article 5 of the Declaration noted that *learning begins at birth*. It affirmed that early childhood is an area of education that requires national policy attention. The Senegalese government was one of the immediate signatories of the declaration.

### **(3) World Education Forum (WEF) held in Dakar - 2000**

The education community gathered again in Dakar for the 10th anniversary of the Jomtien Declaration. The Dakar Framework for Action (DFA) was endorsed. The first of the six goals was devoted to early childhood: “expand and improve comprehensive early childhood care and education, especially for the most vulnerable and disadvantaged children”. The goal was stated without a quantitative target or fixed period. The governments were urged, however, to extend access, improve quality, and ensure equity in early childhood development.

### **(4) Millennium Development Goals and Targets -2000**

The United Nations Millennium Summit (2000) adopted the Millennium Declaration and Millennium Development Goals (MDGs). Out of 8 goals to be achieved by 2015, three were related to early childhood development either directly or indirectly: Goal 2 (achieve universal primary education), Goal 4 (reduce child mortality), and Goal 5 (improve maternal health).

## **2.1.2 Senegalese Government Initiative**

### **(1) Government Initiative**

Abdoulaye Wade became President in 2000. The President began placing priority on early childhood development after taking many overseas trips. The President himself designed the CTP model and has shown strong commitment to its implementation. It was under his initiative that the request for the technical assistance from JICA was made.

The Ministry of Family and Early Childhood was established in 2001. After several ministerial reshuffles, the National Agency of Case des Tout-Petits (NACTP) was established in 2004. The Presidential Decree on the NACTP was issued on June 2, 2004. The NACTP is an agency under the jurisdiction of the Presidency. It is expected to have more autonomy in terms of ECD intervention planning and implementation. The NACTP is currently preparing the National Policy for Integrated Early Childhood Development (NPIECD). The fourth version is now available. Its major orientation is described as follows.

1. Establishment of an institutional framework for integrating all the activities on early childhood development
2. Improved access to early childhood institutions

3. Promotion of a national system for strengthening the capacities of parents and families
4. Establishment of an early childhood protection system
5. Development of a communication program, networking and partnership around ECD
6. Mechanism for funding the activities in favor of early childhood
7. Quality improvement of ECD-related services

## **(2) Development Partners' ECD Programs in Senegal**

### **1) UNICEF**

UNICEF has been assisting early childhood in the following three areas. First, UNICEF supports the government in formulating the NPIECD, training of CTP instructors and assistant mothers, and parental education.

### **2) UNESCO**

UNESCO assisted the construction of three CTPs in Thies. The UNESCO has also been involved in the preparation of the NPIECD.

### **3) The World Bank**

The World Bank has been assisting the early childhood sector by providing training to academic inspectors and regional coordinators.

### **4) The World Food Program (WFP)**

The WFP has been providing flours (to make snacks) to the CTPs in the five regions of Dakar, Kaolack, Fatick, Tambacounda and Kolda. JICA's four CTPs were included among the beneficiaries.

### **5) USAID**

USAID is implementing the "BASIC" project. The BASIC project seeks to improve the planning and management of effective and sustainable actions for the survival of children in the six regions including Kaolack.

### **6) Taiwanese Cooperation**

Taiwan supports ECD in Senegal through the construction of CTPs. Their assistance on CTP construction started before the JICA project.

## 7) NGOs

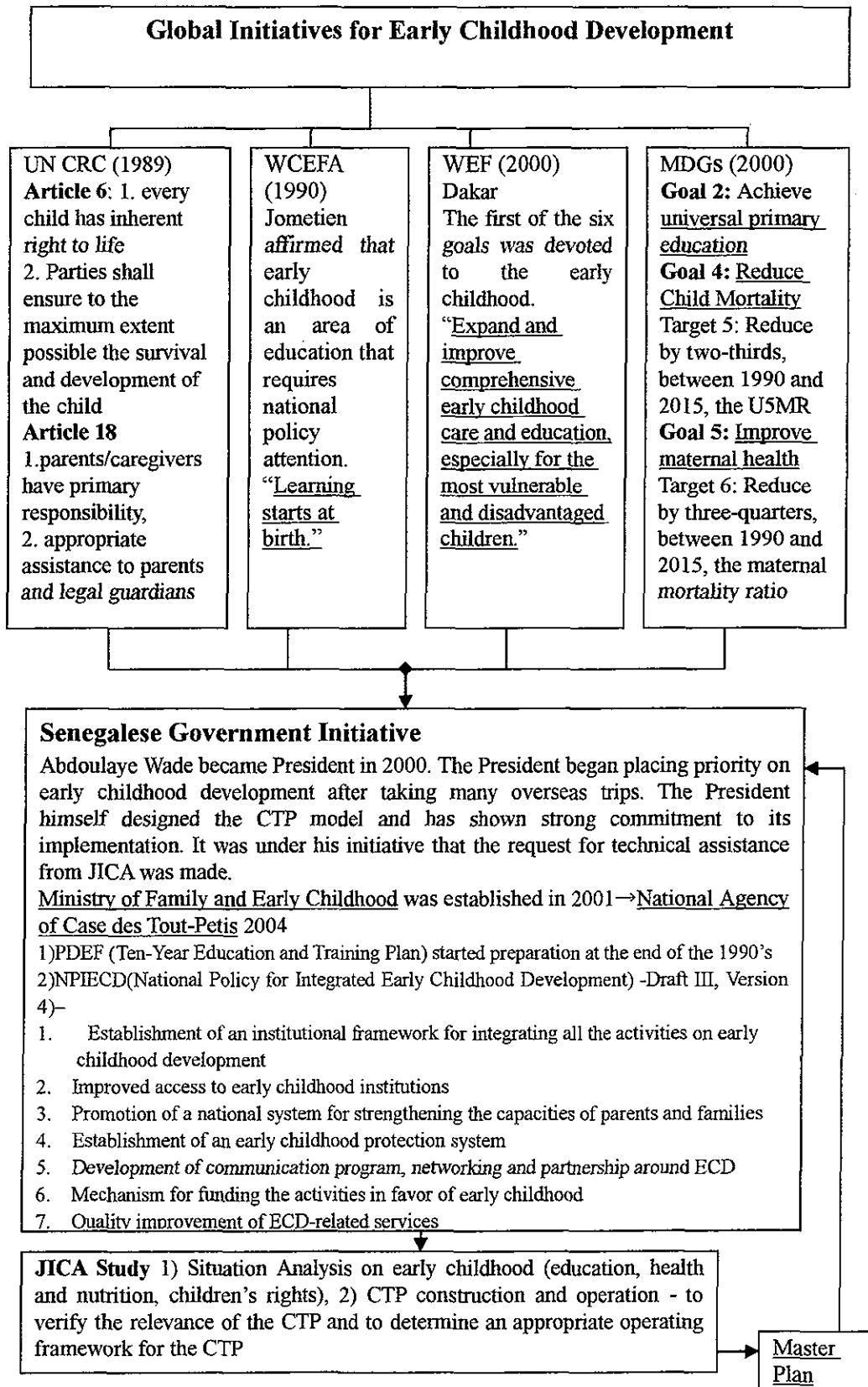
Some NGOs such as the *PLAN International* and the *Christian Children Fund (CCF)* have been supporting the ECD sector in partnership with local communities.

### **2.1.3 Definition of ECD and the JICA Study**

The development partners use the term “Early Childhood Development (ECD)” more commonly than “preschool education”.

The JICA study (“The Study on the Improvement of Environment for Early Childhood”) looks at both education and care functions for early childhood (0-6 years’ old). The Study seeks to formulate a Master Plan for Early Childhood Development through situation analysis and the implementation of the Pilot Project. Thus, the Study supports the Senegalese government’s initiative on ECD. Figure S.3 below outlines the relationship among global initiatives, Senegal initiatives, and the JICA Study.

**Figure S.3 Global Initiative, Senegal Initiative and JICA Study**





## **2.2 Current Situation of Preschool Education, Health, and Nutrition in Kaolack and Tambacounda**

The children in early childhood(0-6 years) represents 26% of the population of Senegal. The total number in this age group was estimated at 2 million in 2000. Out of 2 million, 850,000 are preschool (3-6 years) age.

Children of seven years old are supposed to go to school in Senegal. Enrolment in primary school, a priority sub-sector, has increased substantially during the last decade. Gross enrolment in Senegal rose from 58.5% in the 1990/1991 school year to 68.3% in 1999/2000. However, there is a big difference in the level of enrolment rate by region. Dakar has the highest enrolment in 1999/2000, at 86.3%. Tambacounda has a high enrolment rate of 76.3% (1999/2000), while Kaolack's rate is a mere 44.3% (1999/2000).

There are three types of early childhood institutions, kindergartens (*jardins d'enfants*), nursery schools (*ecoles maternelle*), and day nurseries (*garderiers*). More than half of preschool institutions are located in Dakar. In spite of this regional disparity in the location of preschool institutions, the enrolment in preschool institutions grew steady at an annual growth rate of 10.4% from 1995 to 2000. The preschool enrolment rate was 3.9% in 2003, versus 1.9% in Kaolack and 2.1% in Tambacounda.

As described below, the problems related to ECD are not limited to poor access to preschools. Problems with nutrition and other matters related to the health of children and mothers are prevalent. Qualified health workers (*Agents Sanitaires Communitaires*) and health huts (*case de sante*) alone cannot solve these problems. A holistic approach seems to play an important role in ECD.

### **2.2.1 Problems on Early Childhood Education**

Problems on early childhood education are identified in terms of Access, Quality, and Management. Constraints are discussed from the viewpoints of institution, organization, government resources, and social aspects.

#### **(1) Problems Related to Access**

In spite of the government's efforts to promote integrated early childhood development, the preschool enrolment ratio is still only 3.9% in Senegal (2003). The low rate of preschool enrolment suggests that preschool education is still a prerogative of urban elite families. There are only 394 preschools throughout the country, half of which are concentrated in Dakar. There are disparities in school distribution between urban and

rural areas.

Preschool institutions are poorly developed in the Kaolack region. The region has only 17 kindergartens and day nurseries. Out of these 4 are public schools and 13 are private (kindergartens and day nurseries). There are also 18 CTPs including those under construction as of March 2004.

Tambacounda has 12 kindergartens and day nurseries (2001), but only two of them are located in rural areas. Similar to Kaolack, the Regional Educational Development Plan for Tambacounda (2004-2007) emphasized the construction of CTPs. As of March 2004, there were 20 CTPs, some operating and some not.

## **(2) Problems Related to Quality**

### **1) Absence of Standard Programs**

Curricula, teaching materials, and playing kits are not well developed for preschools. Teaching programs are left to teachers' discretion. In some cases, imported teaching materials are used. Those materials do not necessarily cater to the needs of children and do not prepare them for primary school education.

The ECD institutions in regions are rather passive about teaching materials. In some cases, notebooks, learning materials, and personal computers have been provided by the development partners without any consistent policy.

### **2) Too Many Children / Too Few Qualified Teachers in Some Preschools**

Some of the existing CTPs have too many children (e.g., 126 children).. Overall, the teacher-pupil ratio is 1:60. This condition hampers quality and highlights the high social demand for more CTPs. In some cases, untrained teachers have been assigned to some of the CTPs in order to meet the needs of their communities.

The number of teachers is limited in both Kaolack and Tambacounda. The deployment of academic inspectors is proposed under the Kaolack region's educational development plan (PRDE-Kaolack). The regional plan in Tambacounda (PRDE-Tambacounda), calls for the in-service training of teachers to improve quality of ECD.

### **(3) Management**

#### **1) Insufficient Sensitization / Social Mobilization**

The implementation and operation of a CTP requires community participation. As mentioned above, absence of NACTP local representation makes it difficult to promote the participation of communities in CTP planning.

#### **2) Weak Inspection and Monitoring**

There are very few persons inspecting the preschools, and those that are have limited logistic resources and premises. This situation is detrimental to the supervision, monitoring, and continuous training of the teachers.

Regional coordinators are responsible for ECD in both Kaolack and Tambacounda. Their administrative and logistic resources such as computers and vehicles are limited.

#### **3) Lack of Database on Early Childhood**

Statistical data on early childhood is not available. Statistics will be a basis for effective policymaking, policy implementation, and policy evaluation. There is no Education Management Information System (EMIS) for preschool education.

The NACTP has started preparing a data base of CTPs. Considering the NACTP's operating capacity as of July 2004, further effort is required.

### **2.2.2 Constraints on Early Childhood Education**

#### **(1) Institutional Constraints**

- 1) No legislation for early childhood education
- 2) Lack of an integrated governmental organization for promoting ECD
- 3) Function of the NACTP is not clearly defined
- 4) Absence of local offices

The NACTP has no regional and departmental offices to ensure policy implementation. The absence of local representatives is one of the constraints for community participation and effective planning and monitoring. There is little coordination between the Ministry of Education and the NACTP in terms of policy implementation.

5) Insufficient planning capacity of NACTP officials

Due to the insufficient capacities of the NACTP officials, important functions related to CTP planning, implementation and monitoring are not sufficiently established.

6) Limited budget allocation

The regional authorities are unable to cope with the high social demand for early childhood facilities. The central government has not been able to cater to the needs of the regions as far as preschool education is concerned. Due to the ministerial reorganization made in April 2004, budget allocation for the NACTP was not confirmed as of July 2004.

7) Lack of human resources

The NACTP is understaffed. According to the Director-General, the 28 to be assigned to the NACTP lack planning and managerial skills.

8) Lack of awareness on early childhood education

Preschool education is not well recognized among parents, particularly in rural areas. Due to this lack of awareness, few parents appreciate the need for pre-school education as a preparation for elementary education. The preschools are regarded merely as day care centers. Lack of seriousness and professionalism observed in some private facilities also reinforce this opinion.

9) Many Daaras are located in Kaolack

There is a huge network of Daara. In a region with a large number of Daara, many parents send their children to the Daara, more familiar institutions with a longer history than preschools. The programs provided at the Daaras are religious, based on Koran precepts. Despite the interest of the parents, the living conditions of the *talibés* are poor. The classes are held under the open sky, a practice that puts the children at risk when the weather turns harsh.

10) Higher financial burden compared to primary school

Several factors make preschool education more expensive, for example, the required teacher-pupil ratio and the need for playing kits certain. Because of higher costs and fewer public subsidies, parents have to pay entrance fees and expensive monthly contributions.

The following table summarizes problems and constraints of early childhood education.

**Table S.1 Problems and Constraints of Early Childhood Education**

<b>Issues</b>	<b>Problems</b>	<b>Constraints</b>
Access	Low Preschool Enrolment (Senegal 3.9% - 2003) (Kaolack 1.9% -2003 ) (Tambacounda 2.1% -2003)	Lack of awareness on ECE High costs compared to primary education Daara network
	Disparities in Preschool Education	Lack of facilities and teachers in rural areas
Quality	Absence of standard programs	Lack of human resources in education administration Lack of budget (Central/Regional)
	Insufficient number of teachers	Lack of training facilities for teachers
Management	Poor coordination among government agencies	
	Weak planning ability/ Weak inspection/ weak local office	Insufficient capacity of MECCTP (NACTP) officials
	Lack of data base on ECE	Lack of human resources Lack of budget (Central/Regional)

Source: JICA Study Team

### **2.2.3 Problems and Constraints on Health and Nutrition**

#### **(1) Problems Related to the Health Status of Mothers and Children**

##### **1) High Infant Mortality and High Under-five Mortality**

The Infant Mortality Rate (IMR) was as high as 85 in Kaolack and 83.6 in Tambacounda per 1,000 births in 2002, much higher than the national average (70.1 per 1,000 births). Similarly, the Under-five Mortality Rate (U5MR) was 197.5 in Kaolack and 181.9 in Tambacounda per 1,000 births, while the national average was 145.3. The U5MRs of these two regions were even higher than the average U5MR of Sub-Saharan Africa (173 per 1,000 live births in 1999).

##### **2) High Maternal Mortality Rate**

The Maternal Mortality Rate (MMR) is as high as 560 per 100,000 live births nationwide. It cannot be denied that problems concerning pregnancy and delivery are threatening child and maternal health.

#### **(2) Problems Related to the Nutrition Status of Mothers and Children**

##### **1) Malnutrition and Micronutrient Deficiencies**

Malnutrition is prevalent among under 5 children: stunting 19%; underweight 18%; wasting 8% nationwide. Kaolack and Tambacounda have the highest

prevalence of underweight among under 5 children: 25% and 24 %, respectively, versus the national average of 18%. Kaolack also has the highest prevalence of wasting among under 5 children: 14% versus the national average of 8%.

Iodine Deficiency Disorders (IDDs) and disorders due to the deficiencies of Vitamin A and iron are recognized in Senegal and target regions: goiter and other IDDs are widely observed in rural areas and the percentages of children aged 6-59 months receiving vitamin A supplementation in Kaolack and Tambacounda are lower than the national average.

### **(3) Problems Related to Management**

#### **1) Limited Institutional Capacity of NACTP**

The NACTP plans to establish a technical unit for nutrition and health. However, the current shortage of personnel and operations at the local level make it impossible to support CTP personnel effectively.

#### **2) Poor Coordination among Government Agencies**

The Ministry of Health and Prevention plays a major role in health and nutrition. However, the present coordination with the MHP is far from smooth at both the central and local levels. There are some collaborations at the local level from time to time, but most are based on individual contacts rather than the institutional coordination.

## **2.2.4 Constraints on Health and Nutrition**

### **(1) Poor Health Status of Mothers and Children**

#### **1) Low vaccination coverage**

Kaolack and Tambacounda have the lowest vaccination coverage rates in the country: BCG 74% and 77%; OPV 31% and 28%; DPT3 33% and 39%; and measles 30% and 34%, respectively. The low tetanus (TT) vaccination rate is also affecting the mortality of infants.

#### **2) Prevalence of diseases and inappropriate treatment**

Diarrhea and malaria are prevalent through the year in both regions. Mosquito nets are used only among 9% of households in the rural area.

3) Insufficient water and sanitation system

The access to potable water in Kaolack is 51%. Diarrhea is clearly more frequent among households without access to water. The access rates to sanitary systems to treat excreta in Kaolack and Tambacounda are 20% and 11%, respectively, far below the national average (56%).

4) Insufficient services for reproductive health

The percentages of women in Kaolack and Tambacounda receiving prenatal care and having deliveries with qualified health personnel are below the national average. The percentages of women who take vitamin A supplementation after delivering their children in Kaolack and Tambacounda are lower than the national average.

5) Low coverage and poor quality of Family Planning (FP)

The contraceptive use among women at reproductive age is low as 6% in both Kaolack and Tambacounda (the national average is 9%). Problems with the quality of service hamper efforts even among women practicing FP: lack of equipment and materials, absence of supervisory personnel in the field, etc.

6) Limited health service at community level

*Agents Sanitaires Communautaires (ASC)*, trained and qualified health workers at the rural level, are limited in both number and capacities. Most of the health huts (*case de santé*) at the rural level are not functioning well. The number of *poste de santé* is also insufficient.

**(2) Poor Nutritional Status of Mothers and Children**

1) Poor socio-economic conditions and environment

The prevalence of malnutrition in the two regions is closely associated with the household socio-economic status.

2) Inappropriate feeding practice

Breastfeeding is widely practiced in Senegal. However, the practice remains inappropriate in terms of the duration and the manner in which it is provided to newborns.

### **(3) Insufficient Management**

- 1) Jurisdiction over health and nutrition is not clearly defined

Although a unit for health and nutrition will be established within the NACTP, many aspects are unclear at this moment. The roles to be played by the Agency and the unit with regard to children's health and nutrition must be defined and clarified.

- 2) Limited human resource and coordination at the central and local level

One of the constraints the NACTP is now facing, in health and nutrition, is the limited human resource. The technical unit exists only at the central level and there is no continuous support to each CTP at the local level.

### **(4) Weak Coordination with MHP (now MOH and MPPHS)**

The health sector is the most progressive sector in Senegal in terms of coordination among government and donors. Still, there has been some difficulty in coordinating between the NACTP and MHP. Efforts have been impeded by limitations on the MHP side and certain constraints identified on the NACTP side. Limited facilities, lack of human resources, and lack of budget in the MHP are the main constraints in practice, at the local level.

### **(5) Social Constraints**

- 1) Literacy and awareness of women

The female literacy rates in Kaolack and Tambacounda are 14% and 22%, respectively, much lower than the national average (29%). In strengthening the provision of information and opportunities to women, the various methodologies and services targeting women clearly must be integrated.

- 2) Socio-cultural issues

There are many social constraints in terms of people's attitude toward child and maternal health. The people reject some recommendations from health services on cultural grounds.

Problems and constraints on health and nutrition are summarized in the following table.



**Table S.2 Problems and Constraints on Health and Nutrition**

Issues	Problems	Constraints
Health Status of Mothers and Children	High IMR and U5MR (Senegal IMR70.1,U5MR 145.3 ) (Kaolack IMR85.0,U5MR 197.5 ) (Tambacounda IMR83.6,U5MR 181.9 )	- Low vaccination coverage - Prevalence of disease and in appropriate treatment - Insufficient Water and Sanitation System
	High MMR	- In sufficient service for reproductive health - Early pregnancy - Limited access to FP services - Poor quality of FP service
Nutritional Status of Mothers and Children	Malnutrition and Micronutrient Deficiencies	- Poor socio-economic conditions - Inappropriate feeding practices - Prevalence of diseases and poor environment for children
Management	Limited Capacity of MECCTP (NACTP)	- Lack of legislation - Limited Human Resources and coordination at the central and local level
	Poor Coordination among Government Agencies Poor Coordination with MHP	- Limited facilities - Lack of human resources in MHP - Lack of budget

Source: JICA Study Team

### 2.2.5 Problems and Constraints on Children's Rights

The major problems and constraints on children's rights, including those to do with living environments are identified as follows.

#### (1) Major Problems for Children

##### 1) Low Birth Registration Rate

Birth registration is a basic rights of every child. In Senegal, 40% of all children under 6 year of age are not registered. The problem is greater in the countryside (53.6%) than in urban areas (25.0%). The lowest registration rates are observed in Kaolack (44.4%) and Tambacounda 46.2% (National average is 60.9%).

##### 2) Weak Family Ties

Children from poor families are often sent away. About 4% (some 11,000 children as of 2000) of children who do not live with their parents are under 5 years old and 8.6% are between 5 and 9.

3) Ethno-linguistic discrimination

Though the language taught in preschool should be the main language spoken in the area, minority languages are rarely used.

4) Gender discrimination

*Gender discrimination is present in almost every aspect of daily life. The situation is dimmer in the countryside, where some “traditional practices” (such as FGM and early marriage) continue to violate basic women’s rights. In Tambacounda, the average marriage age for girls is 15.8 years which is below the minimum legal age to marry in Senegal. Child mothers (15-18 years) account for 20.6% of all mothers in Kaolack and 25.3% in Tambacounda (the national average is 21.0%).*

5) Child Labor

More than a third (37.6%) of children from 5 to 14 years are working. Rural areas have a much higher percentage of working children than the urban areas (43% vs.27%). Kaolack has one of the highest child labor rates in the groundnut industry and domestic work.

6) Commercial Sexual Exploitation

Although statistics are not fully reliable, it can be estimated that at least 20% of all prostituted women in Senegal are underage.

**2.2.6 Major Problems for Mothers**

Insufficient childcare stems from the following problems associated with the mother.

	<b>Main Issues</b>
Household	Long working hours and hard workload for domestic duties Inefficient and unhealthy housing environment (including kitchens) Limited decision-making for home economy and family affairs Insufficient education due to early marriage and early pregnancy
Economic activities	Hard agricultural work Lack of income-earning opportunities Insufficient access to saving and credit Limited marketing for agricultural & cottage industry products
Community	Limited access to village resources Limited access to decision-making inside the community Lack of community awareness on women’s needs and values

## **2.2.7 Constraints Identified on Children's Rights**

### **(1) Legislation**

1) Incompatibility of related treaties

There is still abundant children-related national legislation in force that is incompatible with the CRC. This legislation must be amended and harmonized with global initiatives.

2) Unclear demarcation of responsibility

There is no demarcation of responsibility for children's rights among the Ministries concerned.

3) Lack of institutional protection structures

There is no a specialized official institution for receiving and treating children-related complaints including children-at-risk issues.

4) Lack of specific programs for children at risk

There are many children-related programs but few are paying attention to children at risk.

5) Lack of coordination between related ministries and development partners

Responsibility on children-at-risk issues is excessively fragmented among the different ministries/donors with programs or responsibilities on these matters.

6) Lack of monitoring and evaluation system

There are no effective system for monitoring and evaluation and actions targeting children at risk, or for systematizing the experiences gained.

Problems and constraints on children's right are summarized and presented below.

**Table S.3 Problems and Constraints on Children's Right**

Issues	Problems	Constraints
Children <i>(The issue above includes sub-issues of access, quality, and management.)</i>	Low Birth Registration Rates (Senegal 60.9%, Kaolack 44.4%, Tambacounda 46.2%) Weak Family Ties Discrimination by ethnic group/language and gender Child Mistreatment Child Exploitation Children in Conflict with the Law	a) Legislation - Incompatibility of related treaties - Unclear demarcation of responsibility - Irregular situation & repressive approach b) Institution, Organization & Management - Lack of institutional protection structures - Lack of specific programs for children at risk - Lack of coordination in the government and donors, activities - Lack of a monitoring and evaluation system - Lack of a prevention & rehabilitation system c) Resources - Lack of data and research - Lack of qualified staff - Lack of infrastructures - Tight public fiscal situation d) Social Aspects - Lack of awareness - Prevalence of prejudices and supposed "cultural values"
Mothers/Fathers	Hard Living Condition in Rural Areas  Gender Disparity in Social Life	- Constraints in household (poor understanding of husband, family, relatives) - Constraints in economic activities (limited income-generation opportunities) - Constraints in community (poor understanding of community stakeholders)

Source: JICA Study Team

### 2.3 CTP and ECD Institutions

As of July 2004, there are 173 fully constructed CTPs operating in Senegal. In addition, some CTPs have started operation without waiting for their facilities to be completed. This highlights the strong social demand for early childhood institutions.

As reviewed in 2.2 "Current Situation of Education, Health and Nutrition, and Children's Rights in Kaolack and Tambacounda", there are several early childhood institutions, namely kindergartens, nursery schools, day nurseries and CTPs. The JICA Study conducted a comparative study of early childhood institutions as shown on the following page (Table S.4 Comparison of Early Childhood Institutions in Senegal). It should be noted that some early childhood institutions tend to take a holistic approach, e.g. nursery schools have also come to offer educational activities. However, it seems that the CTPs are appropriate as early childhood development institutions in terms of better access and sustainability of operation. One of the important functions of ECD is to improve early childhood care and education for the vulnerable children. The CTPs located in rural areas contribute to improved access. Similarly, it will be crucial to apply a participation approach insofar as possible. Just as the preamble of the NPIECD acknowledges people of goodwill and the government alone cannot solve all the tasks related to ECD. The CTPs – organizations operated with community initiatives (i.e.

voluntary management committees, and locally hired instructors)- are thus sustainable.

The Department of Preschool Education of the Ministry of Education (MOE) also reviewed the various alternatives for improving access and quality of preschool education. It identified the following alternatives: 1) construction of community huts, 2) preschool education using primary school blocks, 3) education for mothers, and 4) construction of case des tout-petits. Through its review as a national administrative body responsible for preschool education, the MOE now supports the CTP concept.

Table S.4 Early Childhood Institutions in Senegal

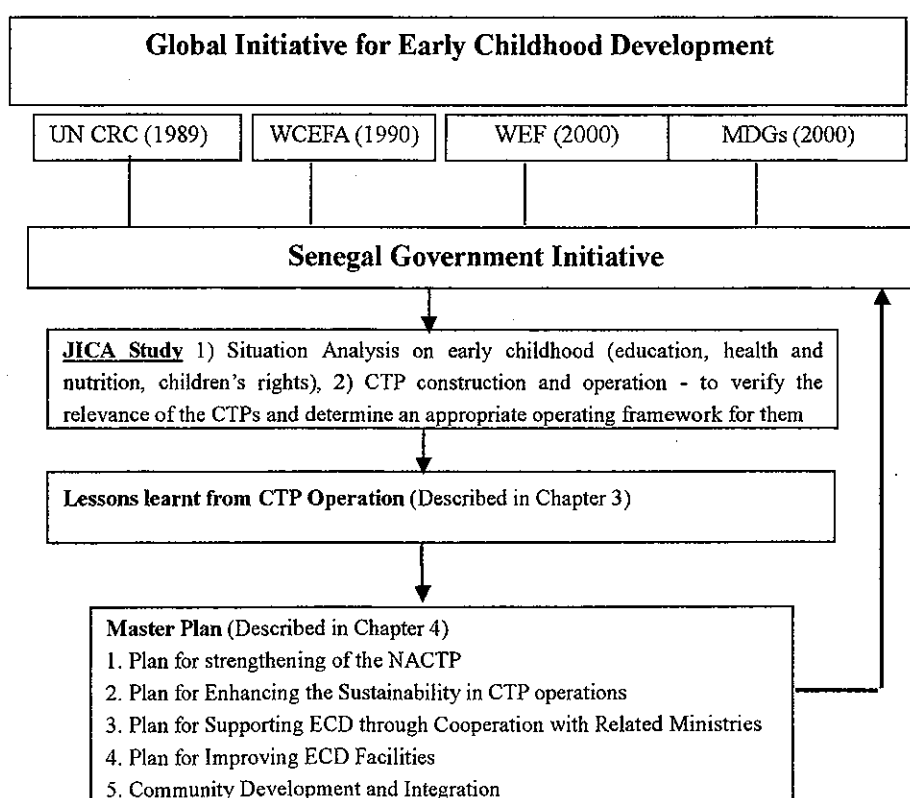
	Mission	Design	Construction	Operation	Fee Structure	Beneficiaries	Notes
CTP (including CTP constructed by the JICA Pilot-project)	Contribute to Early Childhood Development through an integrated approach of education, health and nutrition	Considered for Security, Sanitation, Mothers' room separated from classroom	Government	Community (management committee)	Operation costs recovered from users (registration and monthly fees) (1000-2500FCFA)	0 to 6 years old children in rural area, 2 years old children also accepted Mothers Community	Community participation is essential. Contribute to improved access
Kindergarten - <i>jardins d'enfants</i>	Prepare for Primary school education	Well equipped (with classroom and play room)	Private sector	Private sector	All costs recovered from users (registration and monthly fees) (20,000FCFA or more)	3 to 6 years old children in urban area Mothers	Located in urban area. Access is limited
Nursery School - <i>ecoles maternelle</i>	Care for children	Relatively Well-equipped	Government /Private Sector	Government /Private Sector	Parents pay for security guards and duty personnel	3 to 6 years old children	
Day Nursery - <i>garderies</i>	Care for children	Varies	Community	Community	Costs recovered from users	0 to 6 years old children	
Community Hut - <i>case communautaire</i>	Similar to CTP with lower quality	Poorly-equipped	Community	Community (management committee)	Costs recovered from users 500-1000FCFA	2 to 6 years old children in rural areas	Constructed in temporary structure. NGO and other development partners provide assistance.
Daaras	Koran teaching	Various types (some Daaras are like primary schools, in others, children are taught outdoors)	Private	Private	Free	3 years old and above	

## 2.4 Towards JICA Master Plan on Early Childhood Development

The government has been promoting the CTPs as the appropriate instrument for promoting the ECD. The JICA Study took its first steps by conducting a situation analysis concerning early childhood, education, health and nutrition, and children's rights. The Pilot Project was implemented with a view to verify the CTPs' appropriateness as an instrument for ECD through the pilot project. Next, the Study Team attempted to present appropriate means of operation for the CTPs. Four CTPs in Kaolack and Tambacounda were constructed and operated to achieve the above two objectives. The lessons drawn from the Pilot Project are described in Chapter 3.

The Master Plan was formulated to support the Senegal government initiatives upon the situation analysis and the pilot project implementation. The Master Plan includes four types of the ECD programs: 1) Plan for strengthening the NACTP, 2) Plan for Enhancing the Sustainability of CTP operations, 3) Plan for Supporting ECD through Cooperation with Related Ministries, and 4) Plan for Improving ECD Facilities. The interactions among the global initiatives, Senegal government initiatives and JICA Study are described in the following Figure S.4.

**Figure S.4 Senegal Government Initiatives and the JICA Study**



## CHAPTER 3 CTP AND PILOT PROJECT IMPLEMENTATION

### 3.1 Background and Objectives of the Pilot Project

Abdoulaye Wade has placed great importance on early childhood development since becoming the President of the Republic of Senegal in 2000. It was he who introduced the concept of the Case des Tout-Petits(CTP) and made early childhood development a top national priority. Soon after the President designed the CTP model, his government placed a request for technical assistance from the Government of Japan. In response, the JICA Study on the improvement of environment for early childhood started in December 2001.

A few CTPs constructed by the Taiwanese Cooperation and other agencies were already in operation when the JICA Study team started its first field work in Senegal. Most, however, were not operating well.

The Pilot Project was implemented with the following objectives:

- 1) To check the relevance of the CTP in the context of the Senegalese government initiatives for early childhood development;
- 2) To analyze and design the conditions for sustainable operation of the CTP; and
- 3) To draw lessons from the Pilot Project and incorporate the results into the Master Plan

In view of the above objectives, the construction and operation of four CTPs, two in Kaolack and two in Tambacounda, were planned out the Pilot Project. Two CTPs were constructed in each region to investigate their sustainability in the environments in which they were located, that is, one in an urban area and the other in a rural area.

### 3.2 Concept of JICA CTP

The basic concepts of the CTP chosen for application in the Study are briefly summarized below and presented in the Figure below.

#### (1) Holistic Approach

A holistic approach towards early childhood development with combined focuses on education, healthcare and nutrition is to be taken. In the CTPs, healthcare and nutrition for mother and children are also important in preschool education. To attain this, the counterpart staff and several government ministries such as the MOH, MPPHS and MFSDNS reviewed the necessary contents of the Study and prepared training materials



for instructors for healthcare and nutrition. Mothers of the CTP children were invited to the mothers' class, where the staff of nearby clinics and health posts provided orientation on healthcare for mothers and children. Videos related to vaccinations and healthcare were also presented to the people in the community through the *Cine-bus* – a land-cruiser with cinema screening equipment procured by JICA. *Cine-bus* visited each CTP site for the screening tour-operation.

## **(2) Design for Multi-purpose Buildings**

The Study Team and counterpart staff prepared the design for the JICA CTP after reviewing the existing designs. The selected design consists of two buildings, a hexagonal building for classrooms and teachers' room, and a rectangular building for the multi-purpose/mothers room and sanitary facilities. Careful consideration were given: 1) security of the children, 2) hygiene aspect, and 3) usage by the disabled. A multi-purpose room was one of the characteristics of the JICA CTP, which can be used for mothers' classes.

## **(3) Intensive Community Participation and Management**

The JICA CTP project was planned to be implemented with intensive participation of the community people from the planning, construction and operation stages. From the operation stage, all the responsibilities were handed over to the local community.

A Supervisory Committee and Management Committee made up of community leaders and resource people were established to supervise the operation and management of the CTP. Instructors and assistant mothers for the JICA CTP were also recruited from the community. After receiving government training, instructors and assistant mothers operate the CTP under the control of the Management Committee.

To assist the instructors and assistant mothers, grandmothers of the community joined the operation to provide traditional culture to the children. Another type of community participation was the implementation of Micro-projects for income generation. Community people in the CTP implemented various Micro-projects for generating income to fund the CTP operation.

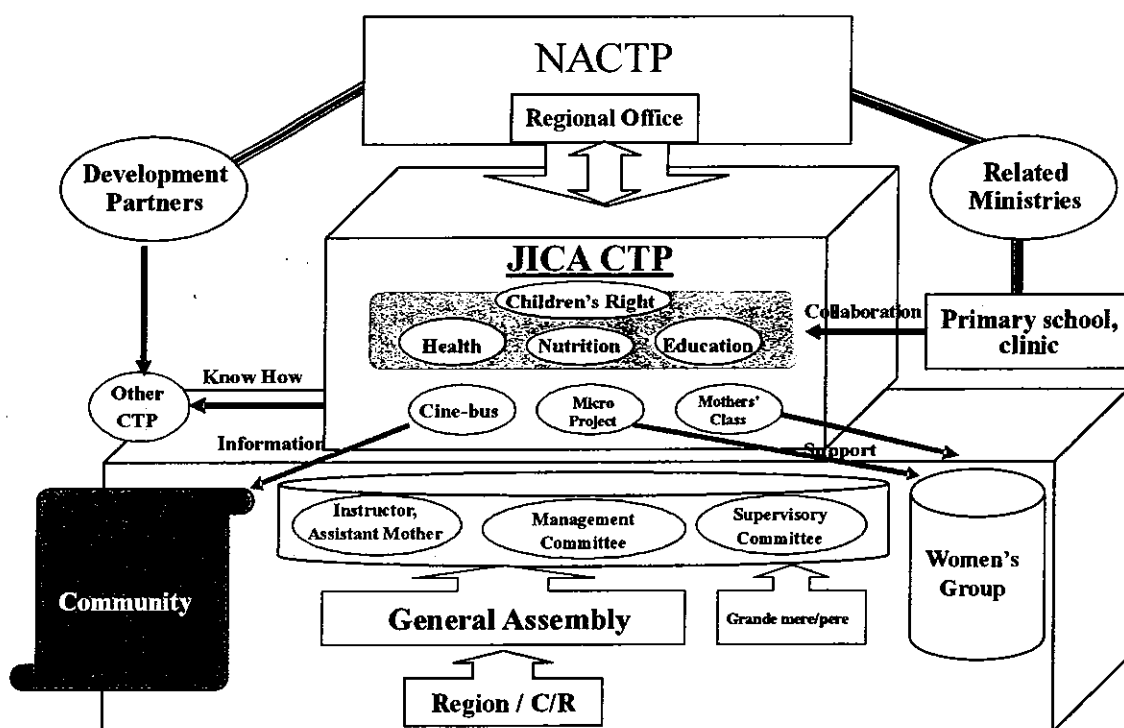
## **(4) Sustainability**

CTP facilities are constructed under the responsibility of the Government. Once the construction is complete, the operation and maintenance of the CTP are, in principle, under the responsibility of the community people. The financial sustainability of the CTP is mainly secured by entrance fees and monthly fees collected from the parents of the children. Revenue from the Micro-projects is a secondary source of income for

attaining sustainability, and further supplemental income is generated by arranging community activities such as wrestling and dance parties.

However, in some areas where the poverty is prevalent, it should be considered to have financial support of subsidies from the regions or communities. Furthermore, cooperation from other development partners such as UNICEF and UNESCO is also contributing to improve the quality of service provided by the CTP.

Figure S.5 Concept of JICA CTP



### 3.3 Design of the Pilot Project

#### 3.3.1 Flow of Pilot Project Implementation

Pilot project was implemented in the following manner and as shown in Figure S.6.

- 1) Training

Prepared the training materials, and trained instructors and assistant mothers, and management committee members.

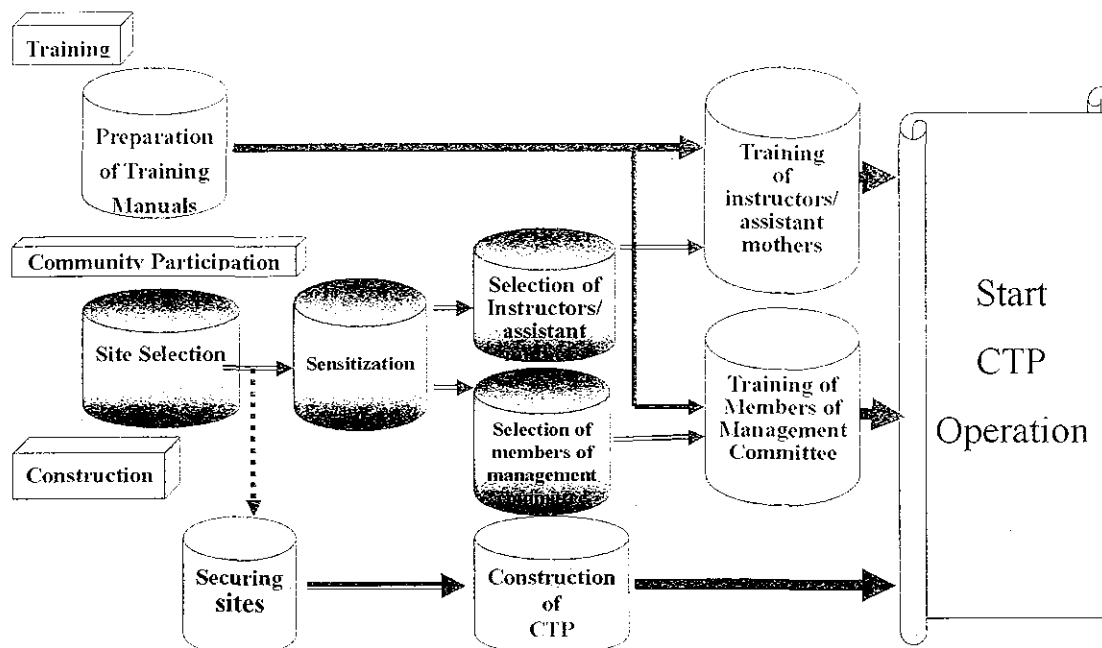
- 2) Community participation

The construction sites were selected with advice from the local authorities and the community. Sensitization workshops were organized for the local people. Instructors/assistant mothers and management committee members were selected from the near-by community.

### 3) Construction

CTPs were constructed by local contractors.

**Figure S.6 Flow of Pilot Project Implementation**



#### 3.3.2 Selection of Candidate Sites

Selection of the possible sites was made by getting the consensus of the community people with the following procedure.

##### (1) Land Allocation for CTPs

###### 1) Urban Areas

When procuring proposed sites for the CTPs in the urban areas, the first stop is to explain the Pilot Project to the state governor and prefecture in order to obtain their agreement. The JICA Study Team and counterpart staff visited URBANISME or CADASTRE (Cadastral office), which controls the urban land.

###### 2) Rural Areas

Before discussion with the authorities concerned, the JICA Study Team selected several villages where the water associations had been functioning well. The rationale was these villages already had good management skills.

## (2) Selection Criteria

After discussion with the MFEC (NACTP), the following criteria for site selection were proposed.

- 1) Available Infrastructure: water supply, health centers or health huts, primary schools nearby.
- 2) Local participation: presence of an active association with at least 2 – 3 years of experience; CTP is accepted by most residents in the community; adequate number of children of the pre-school age(0-6 years).
- 3) Geographical accessibility (accessible by road throughout the year).
- 4) Land acquisition and site location: availability of public land of 1,000m<sup>2</sup> or more without any problems (e.g. resettlement): not prone to flooding.

## (3) Proposed Sites

Through the above analysis, the sites in Table S.5 below were proposed sites for the CTP's.

**Table S.5 Selected Sites for the Pilot Project**

	<b>Region</b>	<b>Urban / Rural</b>	<b>Distance from the nearest town</b>
Touba Kaolack (commune)	Kaolack	Urban area	Within Kaolack-city
Sagna (village)	Kaolack	Rural area	18 km from Kaffrine
Camp Navetane (commune)	Tambacounda	Urban area	Within Tambacounda-city
Sinthiou Malem (village)	Tambacounda	Rural area	25 km from Tambacounda-city

Source: JICA Study Team

### **Box 1 Further Points for the Site Selection**

In selecting project sites, the JICA Study team took into account the following aspects;

- ① Touba Kaolack
  - The leader of the existing women's group and other women in the village showed great interest in the project.
  - There was a strong support from the NGO that had been operating a public kindergarten.
  - The principal of the nearby elementary school and nurses from the clinic collaborated well on the project actively and well.
- ② Sagna
  - Through the operation of the water supply facilities built by an earlier JICA's collaboration, the community had already accumulated the know-how to systemize the operation.
  - The whole village, including the chief of the village, had strong trust in Japan.
  - There was an active support from the principal of the nearby elementary school.
- ③ Camp Navetane
  - The leader of the local women's group zealously supported the project and the activities of her group were energetic.
  - The association for the disabled was very cooperative to the project.
  - The Governor's collaborated very active.
- ④ Sintiou Maleme
  - The ethnic composition is more diverse than that at the other sites.
  - The gender ratio and ethnic composition were both considered in granting admission.
  - The principal from the nearby elementary school and the nurses from the clinic collaborated actively to the project.

### **3.3.3 Participatory Workshop and Sensitization**

Dialogs with the people through workshops and sensitization activities were the most important activities for the successful operation of the CTP with full community participation.

Participatory workshops were conducted two times for each site in this study. The workshop objectives were as follows:

- 1) Explanation of the functions of the CTP;
- 2) Explanation of the fees for the CTP and confirmation of their understanding of the fees; and
- 3) Discussions about the CTP and confirmation of the results

The objectives at this stage were to clarify the role of the CTP for the people, to arrange cost sharing with the government, to discuss the possible project site, and to obtain agreement from the people.

The workshops were recorded on videotape with plans to use the recordings as a teaching material in the future.

**Box 2 Future of the Children is as Important as Water**

From the beginning of the Project, the sustainable operation of a CTP based on community participation and the establishment of a system for collecting CTP operational costs from the population was not expected to be easy. The JICA Study Team tried to make the population comprehend by presenting the example of the water supply system during the sensitization on the basic management.

In Senegal, the rural water supply facilities are operated by water management committees made up of members chosen from among the communities. Each committee collects the fee from people in the community and uses it for management and operation. If the people understand the importance of the CTPs (as they do for the water), the collected fees was expected to be sufficient to fund the effective operation of the CTPs.

The fact that the CTPs have continued operating until now proves that our efforts to sensitize the community using the example of water were quite useful to motivate the population.

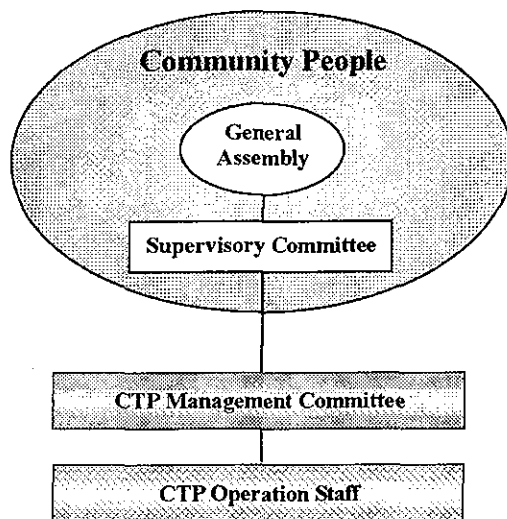
**3.3.4 Implementing Organization**

**(1) Implementing Organization**

Appropriate organization of managing the CTPs were required for their sustainable development. In principles, the operational costs for CTPs are to be borne by the local people. A close cooperation between the CTP and the local community will be an important factor for sustainable management.

The JICA Study Team proposed to set up community-based organizations for operating the CTP as shown in figure S.7, and the participants and members for the committees were selected, considering the aspects on gender, ethnic groups, and age.

**Figure S.7 Organizational Structure for CTP**



**(2) Training for the Management Committee**

An Operational Manual of the Management Committee was prepared to introduce organized administration to the committee members. This was used when the

counterpart gave an introductory course to committee members.

Teaching materials were prepared to help Management Committee members and for the counterpart staff. In addition, a video was prepared to help the M/C members learn.

### 3.3.5 Fee Structure

The basic principles for the funding and operation of the CTPs are summarized below.

- Funding for the construction of the CTPs, including minimum facilities and equipment, is provided by the Government.
- Operation costs are to be borne by the local participants.

Based on the above principles, the appropriate fees to be collected from parents were estimated based on factors such as the CTP running costs (electricity, water, stationery, personnel salaries, etc.) and the capacity of the local people to pay.

In Sagna, it was proposed that a part of the tuition fees be paid in kind with 50kg of millet per year. This type of payment method was considered appropriate for the sustainability of the CTP operation.

The fee structure proposed for each CTP site is summarized in Table S.6.

Table S.6 Fee Structure for CTP

	Touba Kaolack	Sagna	Camp Navetane	Shintiou Maleme
(FCFA)				
<b>Entrance fee per year: In Cash</b>				
0-2 years old	500	-	-	-
(20 children)	10,000	-	-	-
3-6 years old	2,500	500	1,000	500
(60 children)	150,000	30,000	60,000	30,000
<b>Total Entrance Fee/year</b>	<b>260,000</b>	<b>30,000</b>	<b>60,000</b>	<b>30,000</b>
<b>Tuition fee per child /month: In Cash</b>				
0-2 years old	500	-	-	-
(20 children)	10,000	-	-	-
3-6 years old	1,000	500	2,000	1,000
(60 children)	60,000	30,000	120,000	60,000
<b>In Kind :</b>	-	Millet50kg/yearE equivalent to 750,000 FCFA 62,500/month	-	-
<b>Total Tuition/month</b>	<b>70,000</b>	<b>92,500</b>	<b>120,000</b>	<b>60,000</b>
<b>Total Tuition/year</b>	<b>700,000</b>	<b>925,000</b>	<b>1,200,000</b>	<b>600,000</b>
<b>Total Income/year</b>	<b>860,000</b>	<b>955,000</b>	<b>1,260,000</b>	<b>630,000</b>

Source: JICA Study Team

### 3.3.6 Staff Recruitment

Two instructors and two assistant mothers were recruited for each CTP as well as grandmothers/grandfathers. The local CTP staff were recruited, in principle, at the district level or village level, depending on the location of the CTP. The main objectives were to involve the local people in the operation and management of the facility and contribute to local employment. The recruitment of women as instructors was promoted. Other candidate instructors included people with experience in the fields of health, nutrition, and early childhood care. Disabled people were also included as candidates.

### 3.3.7 Curriculum / Teaching Materials and Training

#### (1) Technical Manuals

The following three technical manuals were prepared for the training of instructors and assistant mothers.

- Guideline of Living Discipline
- Community Approach
- Disabled Personnel

#### (3) Training of Instructors and Assistant Mothers

Training programs were prepared in consideration of the trainees' capabilities and the approximately two-month duration of the training. The basic components of the training program are shown in Table S.7.:

**Table S.7 Components of the Training Program**

	<b>Hours</b>
CTP operation policy, Regulation, Records and Evaluation	70
Exercise, Play	21
Education	16
Healthcare	21
Nutrition	13
Children's Rights	10
Site Visit (Primary School)	65
Site Visit (Others)	10
Others	14
<b>Total</b>	<b>240</b>

Source: JICA Study Team



### **Box 3 Effective Training by Living Together**

Three different types of training, namely, initial training, supplemental training and exchange meeting, were provided in the pilot project. The initial training and supplemental training were held in Tambacounda. The former was conducted from 19 August to 11 October, 2002 and the latter was from 23 June to 11 July 2003. Exchange meeting was held in CTP Touba Kaolack from 4 to 5 December.

During the initial training the participants lived together. Various inquietudes and problems arose as a result.

Once these difficulties were overcome, however, the participants became like a family, bonded in a relationship conducive to working together and helping each other.

While we call it "training," there is a big difference between day training (participants return home at the end of every day) and live-in training (participants live together). In the latter, participants can discuss what they have learnt and enhance their comprehension not just during training hours, but off-hours as well. To plan training, the latter type can be a basis since side effects raised from the participants can be fully expected.

### **3.3.8 Design of CTP Buildings**

Two buildings were designed: a hexagonal building (Building A) for classrooms and the teacher's room, and a rectangular building (Building B).

- To accommodate a multipurpose room and kitchen (building B) in addition to the classroom (building A)
- To separate the toilet from the classroom
- To have a roofed terrace between the two buildings
- To prepare a ramp to accommodate disabled children

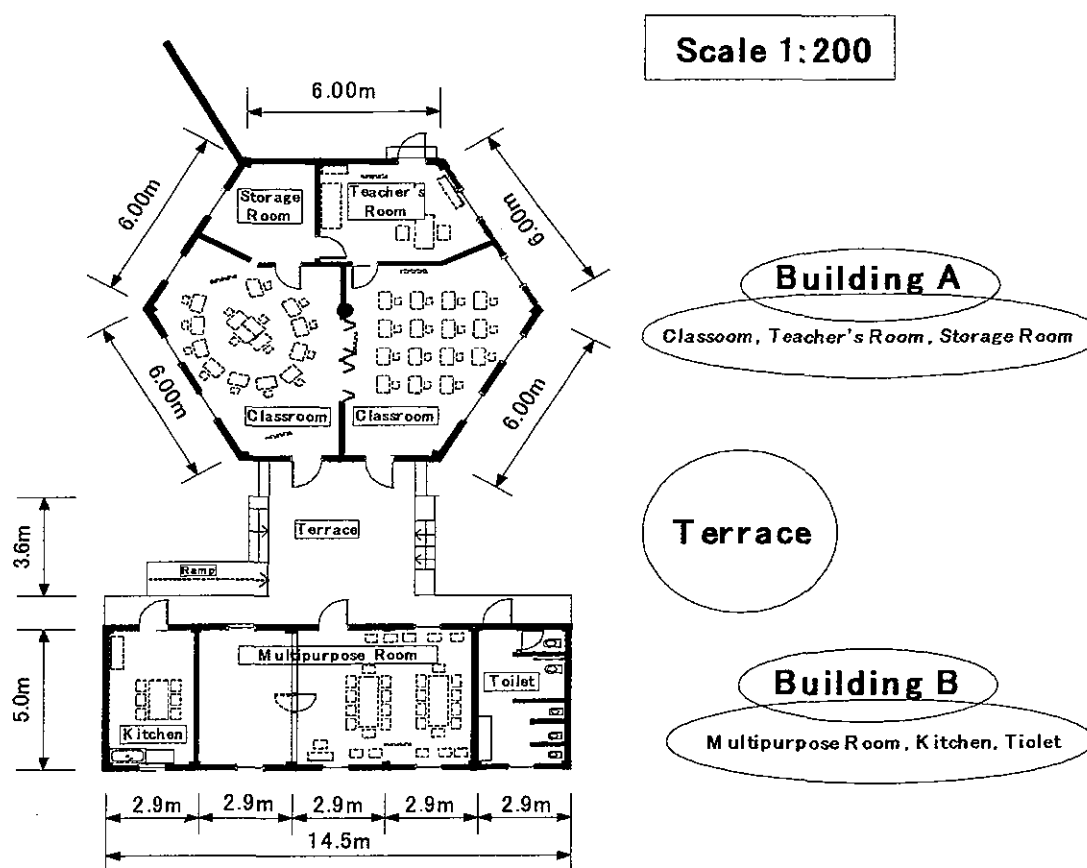
The CTPs established prior to the JICA CTPs<sup>1</sup> did not share these features. A health room was included in design of Sagna CTP since no health post was operating nearby the site. In addition, the contract was awarded to local contractors with a view to enabling better maintenance of the buildings and fixtures.

Figure S.8 shows a floor plan of a typical CTP.

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<sup>1</sup> Some NACTP staff refer to the CTPs established prior to the JICA Pilot Project as "First generation CTPs."

Figure S.8 Location and Floor Plan of CTP



**Box 3.4 Consideration for the Disabled : Design of the CTP**

The leader of the association for the disabled in Tambacounda, Mr. Sane listened to the presentation of the JICA Study Team seriously. After the presentation he came up to the JICA Study Team and asked "Can we, the disabled, work for the project?" The counterpart person answered, "The related ministries did not consider the disabled in their plan, but we would like to take the disabled into account." Following this comment, the Study Team started to work for the project in collaboration with the association for the disabled.

Although the design of the CTP was already underway, the Study Team decided to modify the design to make it barrier-free in response to the request of the disabled.

The Study Team also concluded that the instructors and assistant mothers of the CTP needed to have minimum knowledge to work with the disabled. The Study Team thus formulated a manual for working with the disabled and held training, to which Mr. Sane was invited.

These types of efforts to integrate the disabled are not yet applied to the CTPs other than JICA's. In the future, however, this JICA model is expected to be applied.

### 3.3.9 Micro-project and the Cine-bus

#### (1) Micro-project

The main objectives of implementing the micro-project are summarized below:

- To make the CTP more attractive and accessible for the local population, particularly for income generation;

- To enhance income-generating opportunities for the local participants and increase the financial viability of the CTP; and
- To provide opportunities for practical education for the children

The JICA Study Team conducted preliminary studies on the activities to be carried out in the Micro-project. The following three activities were proposed as possible projects based on budget and space limitations of the CTP.

**Table S.8 Proposed Activities for the Micro-Projects**

	<b>First</b>	<b>Second</b>
Touba Kaolack	Dyeing	Dress making
Sagna	Milling	-
Camp Navetane	Dyeing	Dress making
Shinthiou Maleme	Dyeing	Dress making

Source: JICA Study Team

**Box 5 Effects of the Micro-projects**

Micro-projects at each site were implemented in order to support the operation costs of the CTP. The flour mill was granted to Sagna and it has been well operated from the very beginning. The benefits from the project contribute greatly to the operation of the CTP.

The success of the micro-project in Sagna can be credited to the determination of the people operating the project to learn from earlier failure.

On the other hand, the other three sites chose dyeing and sewing as the subjects for their Micro-projects. Although the Study Team granted the materials and equipments for dyeing and sewing, the team was not able to establish a business model. However, the women participating in the Micro-project recognized that arithmetic was indispensable to their business. The women started to organize literacy classes using the CTP classroom after the children went home. This was an unexpected positive effect of the project.

Besides the mother's class, the fact that women started to use the CTP as a place for gathering shows a good start-up for the community development.

**(2) Cine-bus Operation**

The main objectives of introducing Cine-bus were as follows:

- To deepen the awareness of the local people on the objectives of CTP operation and its programs;
- To give basic information to local people on topics such as pre-school education, health, sanitation, nutrition and children's rights; and
- To promote rural participation in CTP.

Cine-bus, a land-cruiser with cinema screening equipment procured by JICA, visited each CTP site for the screening tour.

The following video programs were presented.

- Activities in Japanese CTP (produced by JICA Study Team)
- Health, sanitation and nutrition education (produced by NGO, UNICEF, etc.)
- Environment surrounding children's rights (produced by NGO, UNICEF, etc.)
- Introduction to Japanese culture

#### **Box 6 The Day of Cine-bus Operation**

The Study Team operated the cine-bus while monitoring the Pilot Project. The response was enthusiastic, especially in Sagna. The population from a village neighbouring Sagna also came to see the movies, lacking other diversions to amuse them in the evenings. The location of Sagna along the main street was also favourable, as truck drivers could easily park their vehicles and join the movie. Note, however, that the cine-bus activity entailed more than just cinema showings. The study team made considerable efforts to respond the expectations of the population. At the beginning of the project, for example, videos for sensitization were mostly recorded in French. Since there are not many people who understand French in the rural area, the team made the effort to find videos recorded in the local language. In order to collect as many people as possible, the team showed a popular Senegalese comedy before showing the videos for sensitization

Many families in the towns have TV sets. When good programs were being aired on TV, the population did not come out to see the movie. Factors such as this must be considered when scheduling a cine-bus show. While we refer to it narrowly as "cine-bus operation," the service itself should flexibly respond to the conditions and needs of each site.

### **3.4 CTP Operation and Monitoring**

#### **3.4.1 Objectives of the Monitoring**

CTPs operation was commenced in November 2002. Monitoring surveys started with the following objectives.

- To check the operation of the CTPs and clarify the problems, including the organizational structure to provide support for achieving more sustainable CTP operation;
- To assess the impact of the CTP on children and their families, as well as the local people; and
- To prepare a more practical plan in the final report by incorporating the improvement measures and lesson learned from monitoring.

**Box 7 Activities of the Women's Group to Support the CTP Operation**

Although the operation of the CTPs is still ongoing, some of the CTPs, especially in the rural areas, are under financial strain. It is surprising, however, that the CTPs in Senegal have managed to function without government support while the kindergartens and nursery schools in a country such as Japan so heavily depend on government funding. Among the four project sites, Sinthiou Maleme was the first to start an activity to generate revenue for the CTP. The accountant of the management committee organized a women's wrestling competition and collected entrance fees. (This accountant was an avid wrestler herself and won the competition.)

These kinds of activities were reported at the exchange meeting, a gathering of all of the instructors and assistant mothers held twice a year to share the experiences learnt their sites and reflect them in other sites.

### 3.4.2 Results of CTP Operation and Monitoring

#### (1) First year

##### 1) Operational Results

During the period from November 2002 to January 2003, four CTPs commenced their first year of operation.

The major findings of the monitoring surveys in the first year are summarized below.

##### a) Curriculum contents

The duration of the initial training (three months) was too brief to allow the instructors and assistant mothers to learn a sufficient variety of songs, games, and other contents. The instructors and assistant mothers felt the contents to be insufficient as the classes progressed.

##### b) Other supports

In some CTP, current and/or retired teachers from primary schools offered to voluntarily transfer their knowledge on the preparation of guide plans. Koran teachers (Arabic language teachers) were also invited to some of the CTPs to teach the Arabic Language to children. Some grandmothers pitched in by telling fairy tales.

##### c) Attendance record

Some of the CTPs did not take records of registered attendance in the beginning stages. The registration procedures were instructed at the supplemental training course and now all the sites keep registration records.

##### d) Rain holidays

The holidays were fixed during the rainy season from August to September. However, information on the rain holidays was not adequately explained to the

parents. Some of the parents were confused as a result and kept their children at home in July.

e) Maintenance of facilities

The maintenance of the CTP facilities has been very well handled, in general, in accordance with the prepared maintenance manual. All the CTPs are maintained with sufficient cleaning service, including sufficient cleaning of the toilets. Most of the equipment and toys are well kept well, though improper use has led to some problems.

2) Micro-projects

The flourmill at Sagna has been well operated and has provided funds for the CTP. Dyeing and dress making activities have not been successfully implemented due to the complicated process involved and limited marketing knowledge.

3) Cine-bus operation

The Cine-bus shows have been popular at each site among all generations, from children to the elderly. The Cine-bus provides useful information on the improvement of the environment for early childhood, including aspects such as health, nutrition, and human rights. The community people understand the activities of the CTPs well and seem to take an interest in them.

4) Financial situation of CTPs in the first year

During the first 9 months of operation, the Management Committee tried to manage the financial sustainability of CTP operation. Micro-projects were started as another source of financial support for the CTPs.

a) Summary of revenue and expenses

The financial situation of CTPs for the first year operation is summarized in Table S.9.

**Table S.9 Financial Situation of CTPs for the First Year(2002-2003)**

		(FCFA)			
		Touba Kaolack	Sagna	Camp Navetane	Sinthiou Maleme
(Operation period*)		(9month)	(9month)	(8month)	(9month)
<b>Income</b>					
	Registration Fee**	(1) 315,000	223,410	460,000	45,000
	Monthly Fee	(2) 688,500	108,250	886,000	467,100
	Others	(3) 58,290	262,975	266,270	389,215
	Total of monthly income ((2)+(3))	(4) 746,790	371,225	1,152,270	856,315
	Average of (4)	(5) 82,977	41,247	144,034	95,146
	Total income ((1)+(2)+(3))	(6) 949,565	594,635	1,612,270	901,315
	Average of (6)	105,507	66,071	201,534	100,146
<b>Expense</b>					
	Salary of CTP staffs	690,000	537,000	1,102,500	605,000
	Instructors /Assistant mothers	(480,000)	(392,000)	(820,000)	(435,000)
	Janitor/Cleaner/etc	(210,000)	(145,000)	(282,500)	(170,000)
	Charge	391,450	76,225	559,567	279,757
	Electricity	(27,601)	(0)	(71,600)	(104,162)
	Water	(240,059)	(25,625)	(89,125)	(2,500)
	Maintenance	(20,100)	(14,550)	(277,312)	(33,800)
	Others	(103,690)	(36,050)	(121,530)	(139,295)
	Total expense	(7) 1,081,450	613,225	1,662,067	884,757
	Average of (7)	(8) 120,161	68,136	207,758	98,306
	Balance (6)-(7)	-131,885	-18,590	-49,797	16,558

Source: JICA Study Team

Note: \*CTP Touba Kaolack started from December

\*\* Sagna: total of cash and millet selling (182,910)

b) Coverage ratio of annual income to annual expense

The Table S.10 shows the coverage ratios of actual annual income to the total annual expenses. The coverage ratios of actual income were around 90% in each site for the first year, and annual income in Sinthiou Maleme could cover all of the expenses.

**Table S.10 Coverage Ratio of Total Income to Annual Expense**

		(FCFA)			
		Touba Kaolack	Sagna	Camp Navetane	Sinthiou Maleme
Annual income	949,565	594,635	1,612,270	901,315	
Annual expense	1,081,450	613,225	1,662,067	884,757	
Coverage ratio	87.8%	97.0%	97.0%	101.9%	

Source: JICA Study Team

c) Collection rates

The Table S.11 shows the collection rates of registration and monthly fees.

The collection rates of monthly fees in rural areas were lower than urban areas.

**Table S.11 Collection Rates of Registration Fee and Monthly Fee**

	Touba Kaolack	Sagna	Camp Navetane	Sinthiou Maleme
<b>Expected full income (1st Year)</b>				
No. of children	90	54	106	95
Unit Rate of Registration Fees	3,500	1,000	5,000	500
Total of Registration Fees*	315,000	236,910	530,000	47,500
Accumulated No. of Children	529	368	620	462
Unit Rate of Monthly Fees	1,500	500	2,000	1,500
Total of Monthly Fees	793,500	184,000	1,240,000	693,000
Total of expected income from fees	1,108,500	420,910	1,770,000	740,500
<b>Actual income</b>				
Registration Fees**	202,775	223,410	460,000	45,000
Monthly Fees	688,500	108,250	886,000	467,100
Total income from fees	1,003,500	331,660	1,346,000	512,100
Collection rate of registration fee	64.4%	94.3%	86.8%	94.7%
Collection rate of monthly fee	86.8%	58.8%	71.5%	67.4%
Overall collection rate	80.4%	78.8%	76.0%	69.2%

\*Sagna: plus income from millet sales\*\*Sagna: total of cash and millet sales (182,910)

Source: JICA Study Team

## (2) Second Year

The second year of operation of the CTPs started from October 2003. The results of the monitoring survey are summarized below.

### 1) Enrolment of children

Table S.12 shows the number of registered children in each CTP for the second year.

**Table S.12 Number of Registered Children for the Second Year (October 2003)**

Register of Enrolment	Touba Kaolack		Sagna		Camp Navetane		Sinthiou Maleme	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
Small section (2-3 years)	16	20	5	6	22	19	8	20
Middle section (4years)	6	12	11	11	27	22	11	20
Large section (5-6 years)	6	6	8	6	18	24	6	9
Handicapped (8 years)	1	0	0	0	0	0	0	0
Total boys and girls	29	38	24	23	67	65	25	49
Total	67		47		132		74	

Source: JICA Study Team

### 2) Fee structure for enrolment

The Table S.13 below shows a comparison of registration fees and monthly fees between the first and second years. Each site learned lessons from the results of the first year and worked out fixed fees and how to collect them.



**Table S.13 Registration Fee and Monthly Fee**

Site	Registration fee (1 <sup>st</sup> year)	Registration fee (2 <sup>nd</sup> year)	Monthly fee (1 <sup>st</sup> year)	New Monthly fee (2 <sup>nd</sup> year)
Touba Kaolack	3,500FCFA	6,500FCFA	1,500FCFA	2,100FCFA
Sagna	1,000FCFA 50kg Millet	2,500FCFA	750FCFA	750FCFA
Camp Navetane	5,000FCFA	5,000FCFA	2,000FCFA	2,000FCFA
Sinthiou Maleme	500FCFA	1,000FCFA	1,500FCFA	1,500FCFA

Source: JICA Study Team

3) Teaching staff and CTP operation

The performance of the instructors and assistant mothers improved after one year of operation. They had confidence in answering the parents and contacting the children. Each site accepted 2-year-old children for the second year as well as the first. The parents indicated that this had reduced their workloads considerably, given that children between the ages of 2 and 3 generally require many hours of caretaking and attention. Some of the CTPs were over-enrolled in the second year. To cope with this situation, the Management Committee requested the cooperation of local volunteers called grandmothers (elderly women).

4) Maintenance of CTP facilities

The results of the monitoring surveys on the maintenance of CTP facilities are summarized as follows.

- The toilets have been kept clean. All those who use the toilets have been instructed to continue cleaning them, as before.
- The instructors, assistant mothers, and all of the other participants in the CTP have read and understand the maintenance manual prepared by the Project.
- Thanks to the training on the usage of first aid box organized at the supplemental training course, the first aid box has been well managed.

5) Micro-project

The flourmill at Sagna functions well and generates cash for CTP operation. The sustainability of the Micro-projects depends on assuring a fund for changing parts of the mill. The dressmaking and dyeing Micro-projects have had some difficulties. However, dyeing activities are implemented intermittently at the CTPs where funds for the materials are available.

6) Summary of revenue and expenses.

Table 3.12 below summarizes the financial situation of four CTPs from October 2003 to April 2004.

**Table S.14 Financial Situation of the CTPs for the Second Year (Oct 2003-April 2004)**

Operation period		Touba Kaolack 7month	Sanga 7month	Camp Navetane 7month	Sinthiou Maleme 7month
<b>Income</b>					
Registration Fee	(1)	467,000	38,000	685,000	74,000
Monthly Fee	(2)	693,000	36,000	1,618,000	337,500
Others	(3)	680,750	256,000	0	218,000
Total of monthly income (2)+(3))	(4)	1,373,750	292,000	1,618,000	555,500
Average of (4)	(5)	196,250	41,714	231,143	79,357
Total Income ((1)+(2)+(3))	(6)	1,840,750	330,000	2,303,000	629,500
Average of (6)		262,964	47,143	329,000	89,929
<b>Expense</b>					
Salary for CTP staffs		690,000	350,000	1,155,000	247,500
Instructors /Assistant mothers		(650,000)	(330,000)	(840,000)	(225,000)
Janitor/Cleaner/etc		(40,000)	(20,000)	(315,000)	(22,500)
Charge		588,988	6,450	322,858	197,125
Electricity		(6,420)	(0)	(38,060)	(42,920)
Water		(65,263)	(0)	(64,923)	(250)
Maintenance		(15,325)	(0)	(56,700)	(9,400)
Others		(501,980)	(6,450)	(163,175)	(144,555)
Total expense	(7)	1,278,988	356,450	1,477,858	444,625
Average of operation period	(8)	182,713	50,921	211,123	63,518
Expense per child per year		2,762	1,169	1,561	1,061
<b>Balance ((6)-(7))</b>		<b>561,762</b>	<b>▲ 26,450</b>	<b>825,142</b>	<b>184,875</b>

Source: JICA Study Team

a) Coverage ratio of total income to total expense

With Sagna excluded, the three sites all have coverage ratios of 100%, as summarized in Table S.15. These coverage ratios suggest that the CTPs in Touba Kaolack, Camp Navetane, and Sinthiou Maleme are financially sustainable. Note, however, that this data covers only the first seven months of the second year, while registration fee to be utilized throughout the year is collected only at the beginning of the year.

**Table S.15 Coverage Ratio of Total Income to Total Expense**

	(FCFA)			
(Oct.2003-Apr.2004)	Touba Kaolack	Sagna	Camp Navetane	Sinthiou Maleme
Total Income	1,840,750	330,000	2,303,000	629,500
Total Expense	1,278,988	356,450	1,477,858	444,625
Coverage Ratio	143.9%	92.6%	155.8%	141.6%

Source: JICA Study Team

b) Collection Rate of Registration and Monthly Fees

Table S.16 shows the collection rate of registration and monthly fees.

With Sagna excluded, the collection rate of the registration fee is high. The collection rate of monthly fee is low, in Sagna and Sinthiou Maleme.

**Table S.16 Collection Rate of Registration Fee and Monthly Fee**

	(FCFA)			
(Oct.2003-Apr.2004)	Touba Kaolack	Sagna	Camp Navetane	Sinthiou Maleme
Collection rate of registration fee	107.2%	32.3%	98.6%	100.0%
Collection rate of monthly fee	71.3%	15.7%	85.4%	53.7%
Overall collection rate	82.4%	21.4%	89.0%	58.6%

Source: JICA Study Team

**Box 8 CTP as a Base for Disseminating the Information to the Community**

The mothers' class held by instructors (mainly) twice a month now serves the important function of disseminating information to the community. The mothers particularly value the classes for health and nutrition.

The nurse from the clinic in Sinthiou Maleme recommended widespread voluntary participation in the mother's class, remarking that, "Hospitals only care for the sick, while even the healthy have so much to learn." The staff working for the clinic at Touba kaolack, takes part in every mother's class and provides useful information ordinarily obtainable at the hospital. Participants appreciate information such as "Thanks to donor X we can offer vaccinations cheaply".

While Senegal still has an extended family system, the mother's class is clearly a place for mothers to meet and exchange their concerns about parenting.

**3.5 Condition for a Sustainable Operation of CTP**

Judging from the result of the Pilot Project, sustainability seems possible if several conditions are met. The main conditions requisite for the sustainable operation of the CTPs are described below.

**(1) Site Selection**

The site selection is quite important to ensure the sustainable operation. Essential factors such as the presence of leaders and personnel with experience in cooperatives will be required if the sustainability is to be assured. For sites without human resources, training will be necessary at the preparatory stage of each CTP.

Minimum infrastructure and facilities such as water supply, health facilities, and primary schools will be required nearby each proposed site.

Another important factor for site selection will be to check the level of income of the residents. If a site with low capacity to pay is selected, special consideration for subsidy or institutionalizing additional income should be taken into account for sustainable operation.

## **(2) Community Perception of CTP**

The CTP is operated by the initiative of the local people. However, it will not be easy to continue paying the salaries of the CTP staff and maintaining the facilities.

Note, however, that water supply corporations in Senegal are able to maintain the water supply facilities using funds collected from the people. These corporations already have economic power and the ability to manage. If the residents consider CTPs as important as water, the fees for the CTPs can be paid and controlled. Therefore, it will be critically important to conduct intensive sensitization training for the community (utilizing the experience of the CTPs under this Study) to help the people understand the importance of early childhood development and the expected outcomes of the CTPs.

## **(3) Careful Social Consideration**

If the CTPs are to be rooted into the communities, they must be accepted by the local residents. This makes it all the more important to pay careful attention to the social and cultural situations.

When selecting the members of the Management Committee, the members of the Supervisory Committee, the instructors/assistant mothers, and the children to enrol, great care should be taken to strike an equitable balance of ethnicity, gender, age and other social factors. It will be imperative to avoid complaints among the residents.

## **(4) Continuous Support from the Government and Other Donors**

The construction of the CTPs is funded by the central government, while the community is responsible for operation and maintenance. However, for the rural communities where disposable income is limited, continuous government support is necessary. Beside this, major improvements or rehabilitations of the CTPs require considerable costs that the communities will be hard pressed to provide on their own. Therefore, some subsidy is to be allocated for this purpose by the national or regional government.

At present, the WFP regularly provides supplemental food and some materials related to CTPs. To improve operation, cooperation with these organizations is preferable.

The financial assistance and other supports provided to the JICA CTP for supporting

operation is summarized below.

**Table S.17 Financial Assistance Extended to the CTPs**

	<b>Touba Kaolack</b>	<b>Sagna</b>	<b>Camp Navetane</b>	<b>Sintiou Maleme</b>
City	Allocated fund for operation Plans to institutionalize its budget allocation	N/A	N/A	N/A
Rural Council	N/A	N/A	N/A	Rural Council allocated fund for the past two years. Trying to institutionalize its assistance
Community	Management Committee members work for CTP voluntarily	Management Committee members work for CTP voluntarily	Management Committee members work for CTP voluntarily	Management Committee members work for CTP voluntarily

Source: JICA Study Team

Note: The Governor of Tambacounda has been particularly supportive of the CTP Operation.

**Box 9 Financial Supports by the Local Government and Approach**

The CTP in Sintiou Maleme in the rural area of Tambacounda has received financial support from the Rural Community for two consecutive years and this support is about to be integrated as a part of the annual budget.

The administrative units in Senegal are as follows (in descending order):region, prefecture, county, rural community and village. The rural community seems to be the most flexible unit in meeting community needs.

The experience from Sintiou Maleme shows the conditions under which the rural community can secure the budget annually.

-Although the rural community is made up of several villages, not every village has the same capacity. Usually there is a main village that occupies the principal role of the council. This kind of village tends to receive the budget more easily than the others.

-If the councillor joins the supervisory committee, he might feel the activities of the CTP more closely and understand its positive effects. As a result, his attempt to secure the budget will be expected.

Needless to say, the petition repeated by the management committee is indispensable to secure the budget. As demonstrated in Sagna, the CTP tour for the councillors seems to be a useful way of highlighting the importance of the CTP.

**(5) Selective Micro-project for Fundraising**

Several Micro-projects were introduced to strengthen the financial viability of the CTPs in the Pilot Project. These limited activities were successful for supporting the CTPs.

The following lessons were learnt through this experience:

- The activities of a Micro-project should be simple and free of complicated procedures;
- The activities of a Micro-project should include as many participants as possible to guarantee transparency to the community;
- The activities of a Micro-project should help the people in the community gain experience and learn from various problems;
- The activities of a Micro-project should produce quick cash income;
- A Micro-project should provide not only training in production techniques, but also instruction on process for marketing the products and securing profits.

To attain sustainable operation of the CTP, a selective Micro-project should be introduced in due consideration of the above.

#### **(6) Cooperation with Nearby Primary Schools and Health Clinics**

Cooperation with primary schools and health clinics seems very important for the successful operation of the CTPs. In the Pilot Project, teachers from the primary schools and doctors/nurses from health clinics provided advice to the CTP instructors on how to treat children. The principals of the primary schools and nurses from the health clinics joined the Management Committees of the CTPs as members and provided valuable advice.

#### **3.6 Lessons Learnt from the CTP Operation**

Several lessons have been drawn from the pilot CTP operation. The major points are summarized in Table S.18.

**Table S.18 Lessons Learnt from the CTP Operation**

Issues	Lessons Learnt
<p>1. Site Selection</p> <ul style="list-style-type: none"> <li>- The low level of the household income at Sagna adversely affected the sustainability of the CTP.</li> </ul>	<ul style="list-style-type: none"> <li>- Presence of community leaders with active Cooperatives is one of the most important factors for sustainable CTP operation.</li> <li>- A primary school and healthcare facilities must be located nearby the CTP.</li> <li>- Income levels of the community must be analyzed to determine the people's capacity to pay.</li> </ul>
<p>2. Sensitization and Community Appreciation</p> <ul style="list-style-type: none"> <li>- To make the people understand the importance of the CTP, the JICA Study Team referred to the experience in water management organization.</li> </ul>	<ul style="list-style-type: none"> <li>- Sensitization and understanding of ECD and the CTPs are important for sustainable CTP operation.</li> </ul>
<p>3. Social analysis</p> <ul style="list-style-type: none"> <li>- As the ethnicity is more diverse at Sintiou Maleme, much care was taken in selecting the members of the Management Committee.</li> </ul>	<ul style="list-style-type: none"> <li>- Due attention must be paid to ethnic groups, gender, age and other social factors such as (e.g., disability) when selecting the members of the Management Committee.</li> </ul>
<p>4. Continuous Support from Government/Donors</p> <ul style="list-style-type: none"> <li>- Sintiou Malem received financial support from the rural community that enhanced the financial sustainability of the CTP.</li> </ul>	<ul style="list-style-type: none"> <li>- Government monitoring is required for CTP operation.</li> <li>- Public relations is important in obtaining support from development partners.</li> </ul>
<p>5. Micro-project</p> <ul style="list-style-type: none"> <li>- The flour mill introduced at Sagna produces regular income for the CTP. The other projects (sewing and dyeing) at the other three sites have not satisfied expectations.</li> </ul>	<p>The following issues shall be taken into account in implementing Micro-project</p> <ul style="list-style-type: none"> <li>- Micro-project activity shall involve as many participants as possible from the community in order to keep the project transparent/</li> <li>- Quick outputs including cash, are effective for maintaining the interest and motivation of the people.</li> <li>- Guidance is essential not only on production techniques, but marketing as well.</li> </ul>
<p>6. Volunteers at CTP</p> <ul style="list-style-type: none"> <li>-Grandmothers and assistant CTP staff joined to take care of the 2-year old children at the CTP.</li> </ul>	<p>Support from volunteers ("grandmothers") is useful in:</p> <ul style="list-style-type: none"> <li>- Taking care of all of the children, especially when more than the allotted numbers of children are enrolled</li> <li>- Taking care of the 2-year old children in particular (2-year children were originally not supposed to attend the CTPs)</li> </ul>
<p>7. Network with Neighboring Facilities</p> <ul style="list-style-type: none"> <li>- Collaboration with nearby facilities such as primary schools and health clinics promoted the holistic approach introduced by the CTP.</li> </ul>	<p>Networking with neighboring facilities include the following benefits:</p> <ul style="list-style-type: none"> <li>- Elder brothers and sisters of nearby primary schools visit CTPs to communicate with their younger brothers and sisters</li> <li>- Primary school teachers provide CTP instructors with teaching materials</li> <li>- Doctors and nurses from nearby clinics provide advice on how to treat the children at the CTPs</li> <li>- The principals of primary schools and nurses are good candidates for management committee members</li> <li>- Clinic nurses provide advice on nutrition and vaccinations during the mother's classes at the CTPs</li> </ul>

## **CHAPTER 4 MASTER PLAN FOR IMPROVEMENT OF ENVIRONMENT FOR EARLY CHILDHOOD (KAOLACK AND TAMBACOUNDA REGIONS)**

### **4.1 Objectives and Approach to the Master Plan**

The overall goal of the Master Plan is to promote the early childhood development (ECD) in the Kaolack and Tambacounda regions. The Master Plan has been prepared for the NACTP, the body responsible for ECD in Senegal. It has therefore been suggested the NACTP take the initiative in implementing the improvement plans proposed in the Master Plan in collaboration with the ministries concerned. The beneficiaries of this Master Plan are children in early childhood (0-6 years old), their family members, and eventually the people of the communities of Kaolack and Tambacounda.

The main objectives of the Master Plan are to formulate plans for improving the environment for early childhood in the Kaolack and Tambacounda regions and to realize goals of the National Policy for Integrated Early Childhood Improvement (NPIECD) in accordance with global strategies for the ECD.

As its Pilot Project to attain these objectives, the Study has adopted the plan for CTP construction and operation advocated by the President of the Senegal and promoted by the NACTP. The results of the Pilot Project thus far obtained have clearly demonstrated the effectiveness with which the CTPs promote ECD using a holistic approach, and the positive impact this has had on the environment for early childhood. Thus, the improvement plans are focused mainly on the expansion of the CTPs for ECD in the two regions covered under the Master Plan.

#### **4.1.1 Approach to the Master Plan**

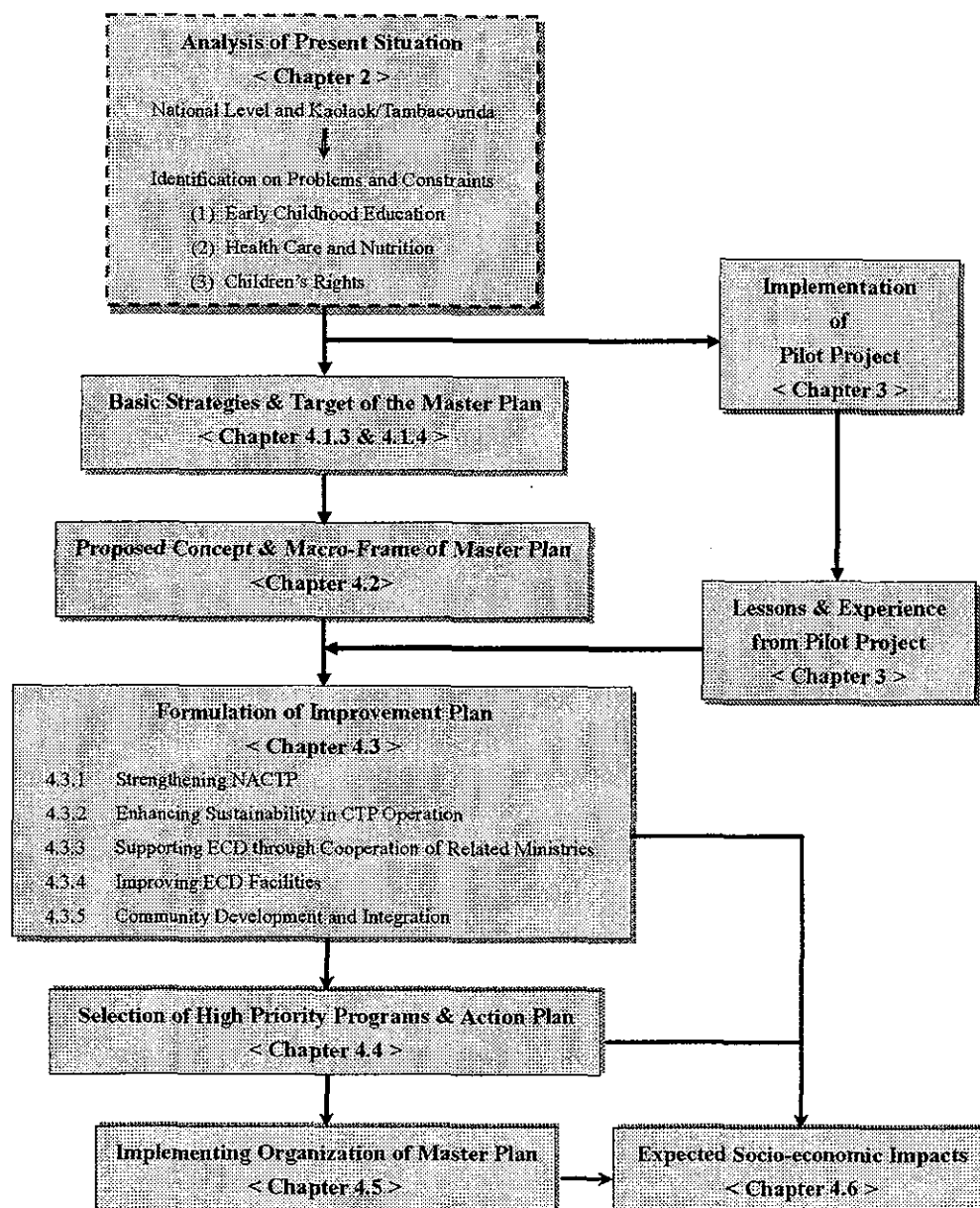
The Study Team took the following approach in formulating the Master Plan:

- 1) Identification of problems and constraints surrounding ECD Kaolack, Tambacounda, and Senegal as a whole after a review of the present situation;
- 2) Formulation of basic strategies for preparing the Master Plan;
- 3) Setting up the ECD targets in Kaolack, Tambacounda and Senegal as a whole(target year is set up year 2015);
- 4) Implementation of the CTP operation and management as a Pilot Project in Kaolack and Tambacounda;
- 5) Compilation of lessons learned from the experience of the Pilot Project;
- 6) Formulation of the Master Plan for ECD in Kaolack and Tambacounda, including the plans to improve organizational development and capacity building at the national level; and
- 7) Selection of high-priority programs and preparation of the action plan.



The procedures taken for the formulation of the Master Plan are shown in Figure S.9.

**Figure S.9 Approach to Master Plan Formulation**



Source: JICA Study Team

### 4.1.2 Basic Strategies

The following aspects were taken into account as the basic strategies in formulating the Master Plan.

#### (1) Preparation of Realizable Improvement Plans

The indicators of the environment for early childhood -e.g., pre-school enrollment rate, health, and nutrition- tend to be fairly low in Senegal in comparison with those in other developing countries. To make matters worse, the indicators in Kaolack and

Tambacounda are lower than the national average of Senegal. It was these conditions that first prompted President Wade to promote the establishment of CTPs as a means of improving ECD in his country. Yet CTPs alone are not enough to solve all of the problems and constraints facing ECD. Taking this into account, the Study has proposed a number of definite goals and possible improvement plans.

## **(2) Plans for Organizational Development at the National-level as well as Plan for ECD in Kaolack and Tambacounda**

The objective of the Study is to set up the Master Plan for ECD specifically in Kaolack and Tambacounda. Yet many of the current problems and constraints in the two regions are quite similar to those affecting other regions in Senegal. To tackle these problems, the Master Plan proposes plans for policy-making and organizational development at the national level in addition to improvement plans for ECD in the two regions. This is why the plans at the national level are considered indispensable for improving ECD in Kaolack and Tambacounda.

## **(3) Formulation of Master Plan through the Implementation of Pilot Project**

In the Pilot Project of this study, four (4) CTPs were constructed and operated through community participation in Kaolack and Tambacounda. The results of the Pilot Project have clearly shown, firstly, that the CTPs are an effective means to promote ECD using a holistic approach, and secondly, that the CTPs have had more positive impact on the environment for early childhood than other ECD facilities such as nursery schools and kindergartens.

Therefore, the experiences and lessons gained through implementation of the CTPs were duly applied in the formulation of the Master Plan, including the proposed plans to improve organizational development and capacity building, in order to realize sustainable construction and operation of the CTPs in Kaolack and Tambacounda.

## **(4) Formulation of Improvement Plan for NACTP as Executing Agency**

Besides the NACTP, various ministries such as the MOE, MOH, MPPHS and MFSDNS have been involved in ECD in Senegal. At present, the NACTP is in charge of CTPs with a holistic approach and shoulders the important responsibility of preparing the national basic strategy for ECD. It has therefore been proposed that the NACTP act as the executing agency of the Master Plan. In such a capacity, the NACTP will certainly require the support of other related ministries in its efforts to promote ECD. Accordingly, the NACTP is to be assigned to the secretariat of the Executive Coordination Committee for ECD, a body of representatives from related ministries (refer to the Proposed Plan 1-5).

## **(5) Priority to Bottom-up Approach through Community Participation**

Through the implementation of the Pilot Project, it became obvious that community participation was crucial for the construction and operation of sustainable CTPs. Thus, in parallel with the policy formulation and institutional capacity development at the national level, a bottom-up approach through community participation is to be promoted for the realization of the sustainable development of the CTPs.

### **4.1.3 Target of the Master Plan**

Prior to formulating the improvement plan, the Study Team is to confirm the projected socio-economic framework of Senegal during the target year of 2015 based on the targets to be set for the improvement of the sub-sectors of ECD.

## **4.2 Proposed Concept and Framework of the Master Plan**

### **4.2.1 Proposed Concept of the Master Plan**

As explained in the preceding section, the Master Plan for ECD emphasizes the expansion of CTP under the NACTP. The plan was formulated in accordance with the following concepts on the basis of lessons learned and experienced gained from the Pilot Project implemented in Kaolack and Tambacounda. The basic concept of the Master Plan is shown in Figure S.10.

#### **(1) Strengthening of the NACTP**

Firstly, plans to strengthen the organizational development of the NACTP (the agency in charge of the construction and operation of the CTP, as well as the executing agency responsible for ECD in Senegal) have been proposed based on a review of the NACTP's functions and jobs. In addition to the organizational development and capacity building of the NACTP, the formulation of a Executive Coordination Committee for ECD with a specific set of roles within the NACTP has been proposed.

#### **(2) Enhancing Sustainability in CTP Operation**

On the basis of lessons and experience in the Pilot Project, plans for enhancing sustainability in CTP operation are proposed. Several approaches toward the enhanced effectiveness of the community participation have also be proposed; namely, the raising of people's awareness, strengthening of the training system for CTP staff, the establishment of an evaluation and monitoring system, and standardization of CTP structures and management.

### **(3) Cooperation with Related Ministries for ECD**

In addition to the NACTP initiative, cooperation with related ministries such as the MOE and MOH will be indispensable for promoting ECD with a holistic approach at the CTPs. Meanwhile, the related ministries have recommended ECD support through definite cooperation plans using the CTPs, including plans for the acceptance of birth registration, education for health and nutrition through mother's classes, vaccinations, and literacy education.

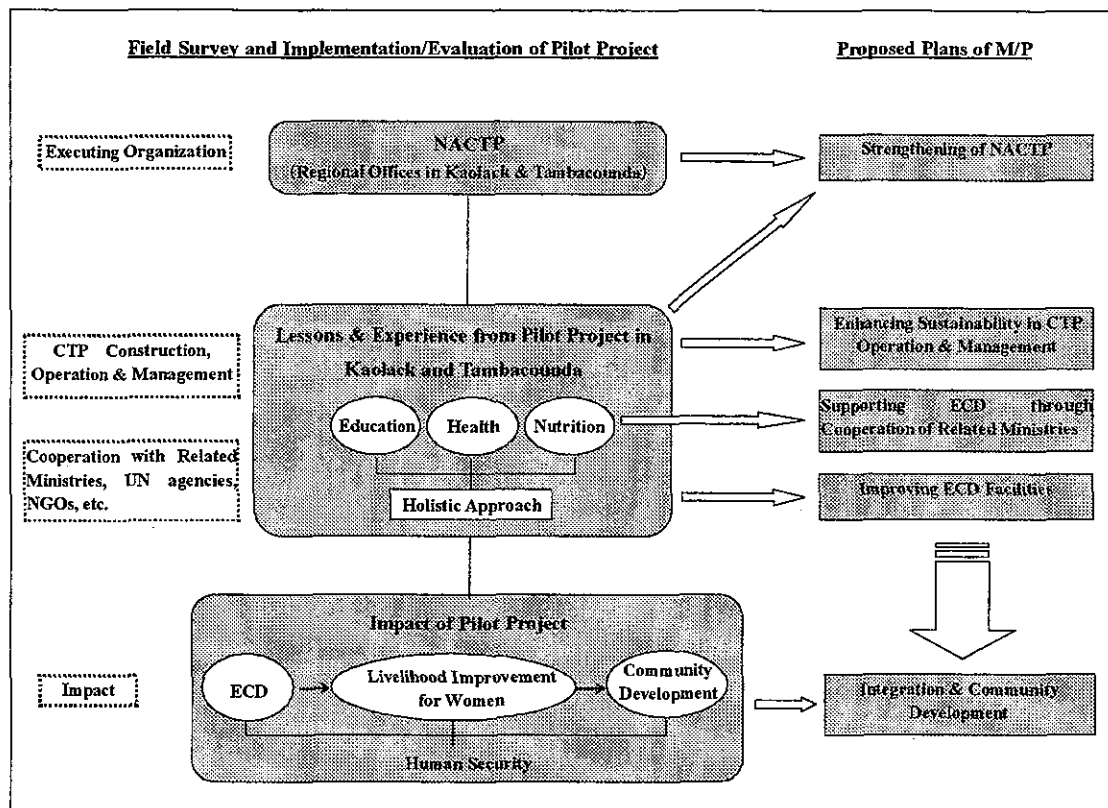
### **(4) Improving ECD Facilities**

The ECD facilities are to be strengthened in order to improve the access and quality of ECD. The promotion of new construction and the activation of the existing CTPs have been proposed. An incentive plan for private kindergartens has also been proposed. In addition, the experience and lessons from the CTP construction and operation will be applied for dissemination to ECD facilities, including other CTPs, kindergartens, community huts, and daaras.

### **(5) Community Development and Integration**

Basic concepts of the Master Plan consist of four categories of improvement as mentioned above. However, the proposed plans will contribute not only to ECD but also to support mothers/women's group activity for livelihood environment and community development as revealed in the result of the evaluation in the Pilot Project. Thus, community development and integration will be further promoted through the application of a holistic approach.

Figure S.10 Concept of Master Plan



#### 4.2.2 Framework of the Proposed Master Plan

Table S.19 gives an overview of the framework of the Master Plan, including its objectives, approaches, targets and improvement plans.

**Table S.19 Framework of Master Plan for the Improvement of Environment for Early Childhood in Kaolack and Tambacounda (2004 to 2015)**

Summary	Indicator	Important Assumptions
<p>&lt;Overall Goal&gt; Promotion of Early Childhood Development in Kaolack &amp; Tambacounda</p>	<p>Target indicators in the National Policy for Integrated Early Childhood Development (NPIECD) are realized in Kaolack and Tambacounda.</p>	<p>Senegalese government establishes the NPIECD and continues to place high priority on ECD.</p>
<p>&lt;Purpose&gt;</p>	<p>1. Most of CTPs in Kaolack and Tambacounda are operated with financially sustainable.</p>	<p>NACTP takes on responsibility for ECD and continues to provide technical and administration services in Kaolack and Tambacounda.</p>
<p>1. Sustainable operation and management of CTP</p>	<p>2. Most of CTPs in Kaolack and Tambacounda are operated and managed with a standard structure and standard curriculum, teaching materials, and manuals.</p>	
<p>2. Improved ECD facilities (CTPs, kindergartens, community huts, etc.)</p>	<p>3-1. Preschool enrollment rate increases to 10% in 2015 from 2.2% in 2004 in Kaolack and to 11% in 2015 from 2.8% in 2004 in Tambacounda.</p>	
<p>3. Improved quality of ECD</p>	<p>3-2. Full vaccination coverage rate increases to 75% in 2015 from 22% in Kaolack and 25% in Tambacounda. 3-3. Birth registration rate increases to 100% in 2015 from 44% in Kaolack and 46% in Tambacounda.</p>	
<p>&lt;Output&gt;</p>	<p>1-1. NACTP strengthens institution and organization in accordance with NPIECD and disposes necessary personnel who provide required services for the CTPs (including the regional offices). 2-1. CTP structure and CTP management organization are standardized. 2-2. CTP curriculum and teaching materials &amp; manuals are integrated and disseminated to the CTPs. 2-3. Necessary staff (399 teachers and 728 CTP staff in Kaolack and 262 teachers and 491 CTP staff in Tambacounda) are trained through the NACTP regional offices of Kaolack and Tambacounda by 2015.</p>	<p>Local communities in Kaolack and Tambacounda understand the objectives of ECD and provide continuous support for the CTPs and other ECD facilities.</p>
<p>1. Strengthened capacity of NACTP</p>	<p>3-1. ECD is supported by related ministries using the CTPs: (i) Awareness on ECD for local people, (ii) health/nutrition, children's rights, literacy through mother's class, (iii) Increase of birth registration, (iv) Promotion of gender equity</p>	
<p>2. Enhanced sustainability in CTP operation</p>	<p>Local governments provide supplementary budget for supporting CTP operation.</p>	
<p>3. Established to promote the cooperation of related ministries</p>	<p>4-1. Necessary facilities for ECD (182 CTPs and 133 kindergartens in Kaolack and 123 CTPs and 87 kindergartens in Tambacounda) are constructed by 2015.</p>	
<p>4. Improved ECD facilities</p>	<p>4-2. Lessons from CTPs, especially health &amp; hygiene, are disseminated to ECD related facilities.</p>	
<p>&lt;Proposed Plans&gt;</p>	<p>3. <u>Plan for Supporting ECD through Cooperation of Related Ministries</u> 3-1. Enhancing Awareness of ECD through CTP Operation 3-2. Support for Integration of Standard Curriculum and Teaching Materials for CTPs 3-3. Support for Training of CTP Staff 3-4. Support for Increasing Birth Registration using CTPs 3-5. Support for Improving Access to Healthcare using CTPs 3-6. Support for Improving Living Environment of CTPs 3-7. Support for Mothers and Women using CTPs / Promotion of Gender Equity 3-8. Budgetary Support for CTP Operation</p>	
<p>1. <u>Plan for Strengthening of NACTP</u></p>	<p>4. <u>Plan for Improving ECD Facilities</u> 4.1. Activation Program for the Existing CTPs 4.2. Establishment of CTP Federation and Promotion of Collaboration 4.3. Construction Plan for CTPs 4.4. Incentive Plan for Private Preschools 4.5. Supporting Plan for Community Huts 4.6. Plans for Improving the Daaras 4.7. Plan for Establishing a Fund to Support ECD</p>	
<p>1-1. Resolution of Clarified Function of NACTP and Budget Allocation</p>	<p>5. <u>Plan for Integration and Community Development</u> 5.1. Plans for Community Development through CTP Operation</p>	
<p>1-2. Organizational Development and Capacity Building of the NACTP</p>		
<p>1-3. Strengthening of NACTP Regional Services</p>		
<p>1-4. Establishment of National Policy on ECD</p>		
<p>1-5. Establishment of Executive Coordination Committee for ECD</p>		
<p>1-6. Consolidation of Legal Framework on Children's Rights</p>		
<p>2. <u>Plan for Enhancing Sustainability in CTP Operation</u></p>		
<p>2-1. Standardization of CTP Structure and Organization</p>		
<p>2-2. Standardization of CTP Curriculum</p>		
<p>2-3. Integration of Teaching Materials and Manuals for CTP Staff</p>		
<p>2-4. Facilitating Provision of Teaching Materials/Equipment</p>		
<p>2-5. Strengthening of Sensitization and Social Mobilization</p>		
<p>2-6. Consolidation of CTP Training System and Continuous Training</p>		
<p>2-7. Establishment of Data Base for ECD Facilities</p>		
<p>2-8. Establishment of Training School for CTPs</p>		
<p>2-9. Strengthening of Monitoring and Evaluation System</p>		

### **4.3 Selection of High-Priority Programs and Preparation of Action Plan**

#### **(1) High-Priority Programs and Stage-wise Development Plan**

The target year of the Master Plan is set at the year 2015 in due consideration of the current status of ECD in Kaolack and Tambacounda. The high-priority programs in the Master Plan have been selected by applying the following criteria. In selecting the programs, individual projects proposed are integrated with others when consolidation is more efficient for the implementation.

- Criteria 1: Quick project for strengthening of the NACTP as an executing agency of ECD
- Criteria 2: Urgent project for sustainable operation of the CTPs
- Criteria 3: High demand project for ECD with support of related ministries
- Criteria 4: Project for the efficient expansion of CTP facilities

The following high-priority programs have been selected by applying the above criteria. The details are presented in Appendix.

- 1) Strengthening of Organization and Capacity Building of the NACTP
- 2) Standardization/Integration of CTP Curriculum and Instruction Manuals
- 3) Community Sensitization and Training of CTP Staff
- 4) Support Activities for ECD using CTPs
- 5) Activation and Promotion Plan for CTPs

A stage-wise development plan for the improvement of ECD was prepared in due consideration of the priority of the development and needs at the community level as presented in Table S.20.

As indicated in Table S.20, the plan calls for the implementation of 18 projects by 2007 as a short-term target, and an additional 12 projects by 2015 as the target of the Master Plan.

Table S.20 Stagewise Development Plan

No.	Proposed Programs	Executing Agency	Project Schedule		
			2005	2007/8	2015
<b>1.</b>	<b>Plan for Strengthening of NACTP</b>				
1.1	Resolution of Clarified Function of the NACTP and Budget Allocation	NACTP*	█		
1.2	Organizational Development and Capacity Building of the NACTP	NACTP	█		
1.3	Strengthening of NACTP Regional Services	NACTP*	█		
1.4	Establishment of National Policy on ECD	NACTP*	█		
1.5	Establishment of Executive Coordination Committee for ECD	NACTP*	█	-----	
1.6	Consolidation of Legal Framework on Children's Rights	MOJ/NA CTP*			█
<b>2.</b>	<b>Plan for Enhancing Sustainability in CTP Operation</b>				
2.1	Standardization of the CTP Structure and Organization	NACTP*	█		
2.2	Standardization of the CTP Curriculum	NACTP*	█		
2.3	Integration of Teaching Materials and Manuals for CTP Staff	NACTP*	█		
2.4	Facilitation of the Provision of Teaching Materials/ Equipment	NACTP*		█	
2.5	Strengthening of Sensitization and Social Mobilization	NACTP*	█	-----	
2.6	Consolidation of the CTP Training System and Continuous Training	NACTP*	█	-----	
2.7	Establishment of a Data Base for ECD Facilities	NACTP*	█	-----	
2.8	Establishment of a Training School for the CTPs	NACTP*			█
2.9	Strengthening of the Evaluation and Monitoring System	NACTP	█	-----	
<b>3.</b>	<b>Plan for Supporting ECD through Cooperation of Related Ministries</b>				
3.1	Enhancing Awareness of ECD through CTP Operation	NACTP*	█	-----	
3.2	Support for Integration of Standard Curriculum and Teaching Materials for the CTPs	MOE/MO H/MPPHS	█		
3.3	Support for Training of CTP Staff	MOE/MO H/MPPHS	█	-----	
3.4	Support for Increasing Birth Registration using the CTPs	NACTP*		█	
3.5	Support for Improving Access to Healthcare using the CTPs	NACTP*		█	



No.	Proposed Programs	Executing Agency	Project Schedule		
			2005	2007/8	2015
3.6	Support for Improving the Living Environment of the CTPs	NACTP*			
3.7	Support for Mothers and Women Using the CTPs / Promotion of Gender Equity	NACTP*			
3.8	Establishment of a Budgetary Support System for CTP Operation	NACTP			
<b>4.</b>	<b>Plan for Improving ECD Facilities</b>				
4.1	Activation Program for the Existing CTPs	NACTP			
4.2	Establishment of a CTP Federation and Promotion of Collaboration	NACTP			
4.3	Construction Plan for the CTPs	NACTP*			
4.4	Incentive Plan for the Construction of Private Preschools	MOE/NACTP			
4.5	Support Plan for the Community Huts	NACTP*			
4.6	Plans for Improvement of Daaras	NACTP*			
4.7	Plan for Establishing a Support Fund for ECD	NACTP*			
<b>5.</b>	<b>Plan for Integration and Community Development</b>				
5.1	Plan for Community Development through CTP Operation	NACTP*			

Note High-priority programs/projects are shadowed.

\* To be implemented in collaboration with other related agencies

Source: JICA Study Team

## (2) Action Plan for NACTP

As explained in the preceding chapters, the NACTP is to take a leading role in ECD. However, due to the restructuring of the government organization undertaken in April 2004, the new organization and its functions yet to be clearly defined.

Under this situation, the following stepwise actions are to be undertaken in order to implement the proposed projects/programs for early childhood development in Kaolack and Tambacounda.

Firstly, the function of the National Agency of CTP (NACTP) is to be legally clarified as soon as possible after the enactment of the decree to establish the NACTP in June 2004.

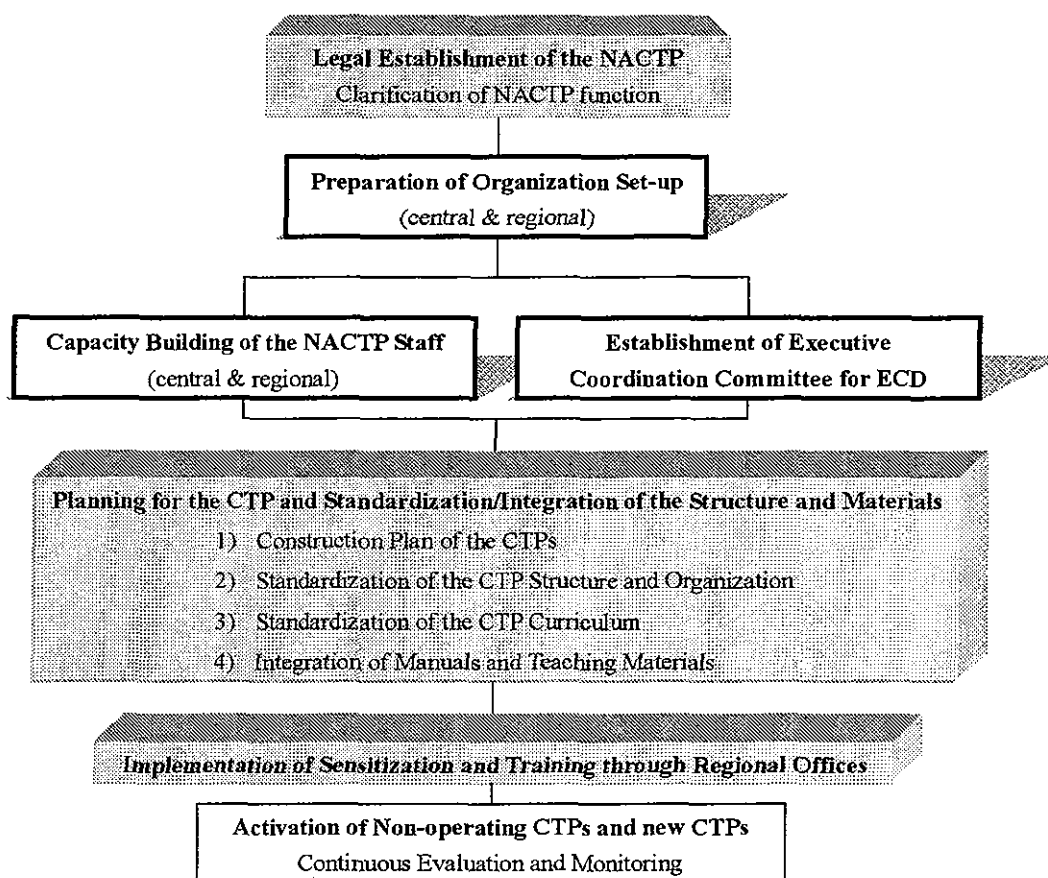
Following this, the organizational structure of the NACTP, at both the central and regional levels, is to be set up. This structure will encompass all of the required service departments.

Next, capacity building for the NACTP central and regional staff is to follow. The Executing Coordination Committee for ECD, a body explained in the proposed plan 1-5, is also to be urgently established at this stage to ensure the efficient implementation of various related activities through integration and well managed coordination.

To ensure that the NACTP implements the CTP with optimal efficiency, a CTP development plan consolidating the existing plans under different ministries/agencies will have to be prepared and all CTP-related activities will have to be standardized and integrated.

This series of actions will facilitate the activation of non-operating CTPs and new implementations. Monitoring and evaluation are to be followed continuously in order to support the existing CTPs. The actions to be undertaken mainly by the NACTP are summarized in the following figure.

**Figure S.11 Actions to be undertaken mainly by the NACTP**



Source: JICA Study Team

#### **4.4 Implementing Organization of the Master Plan**

The NACTP is proposed as the executing agency for ECD in the Master Plan. The NACTP is to ensure necessary organization and staff and promote ECD through the CTPs. The regional organization of the NACTP will have the more important role of promoting the sustainable development of the CTPs in rural areas in collaboration with local governments.

On the other hand, to promote ECD with a holistic approach, the establishment of an Executive Coordination Committee for Early Childhood Development (ECCECD)<sup>1</sup>, the body mentioned in the proposed plan 1-5, will be urgently needed for the supervision and coordination of the activities of the related ministries in ECD under the leadership of the NACTP.

##### **(1) Organization Structure**

###### **1) Executive Coordination Committee for ECD (ECCECD)**

The ECCECD, which is mentioned in the proposed plan 1-5 of the Main Report, is established to supervise and coordinate the activities of the related ministries in ECD in view of promoting ECD with holistic approach. The ECCECD is chaired by the General Secretary of the Presidential Office and co-chaired by the Director General of the NACTP.

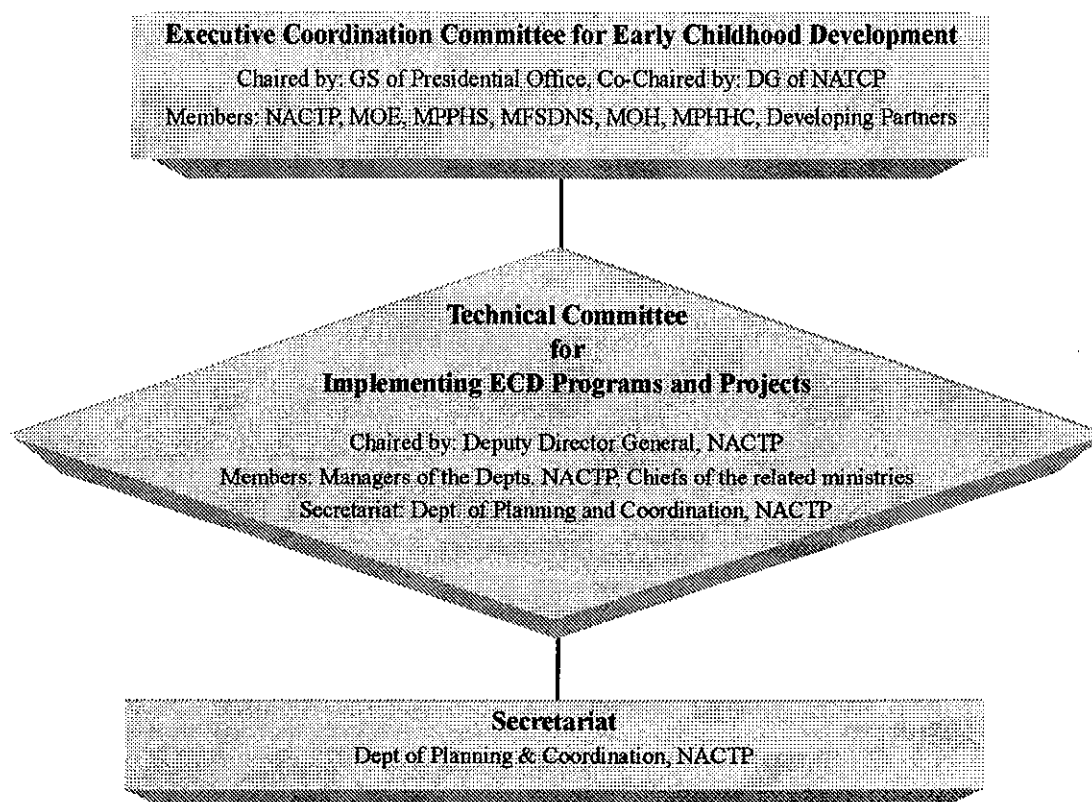
###### **2) Technical Committee for Implementing ECD Programs and Projects (TCI)**

The Technical Committee for Implementing ECD Programs and Projects is proposed as a body to provide operational services. The TCI is to be headed by the Deputy Director General of the NACTP. The Department of Planning and Coordination of the NACTP will assume the role of Secretariat of the TCI.

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<sup>1</sup> The ECCECD is equivalent to the "National Permanent Secretariat for Early Childhood (Secretariat National Permanent de la Petite Enfance)" proposed in the National Integrated Development Policy Document for Early Childhood

Figure S.12 Proposed Executive Committee for ECD

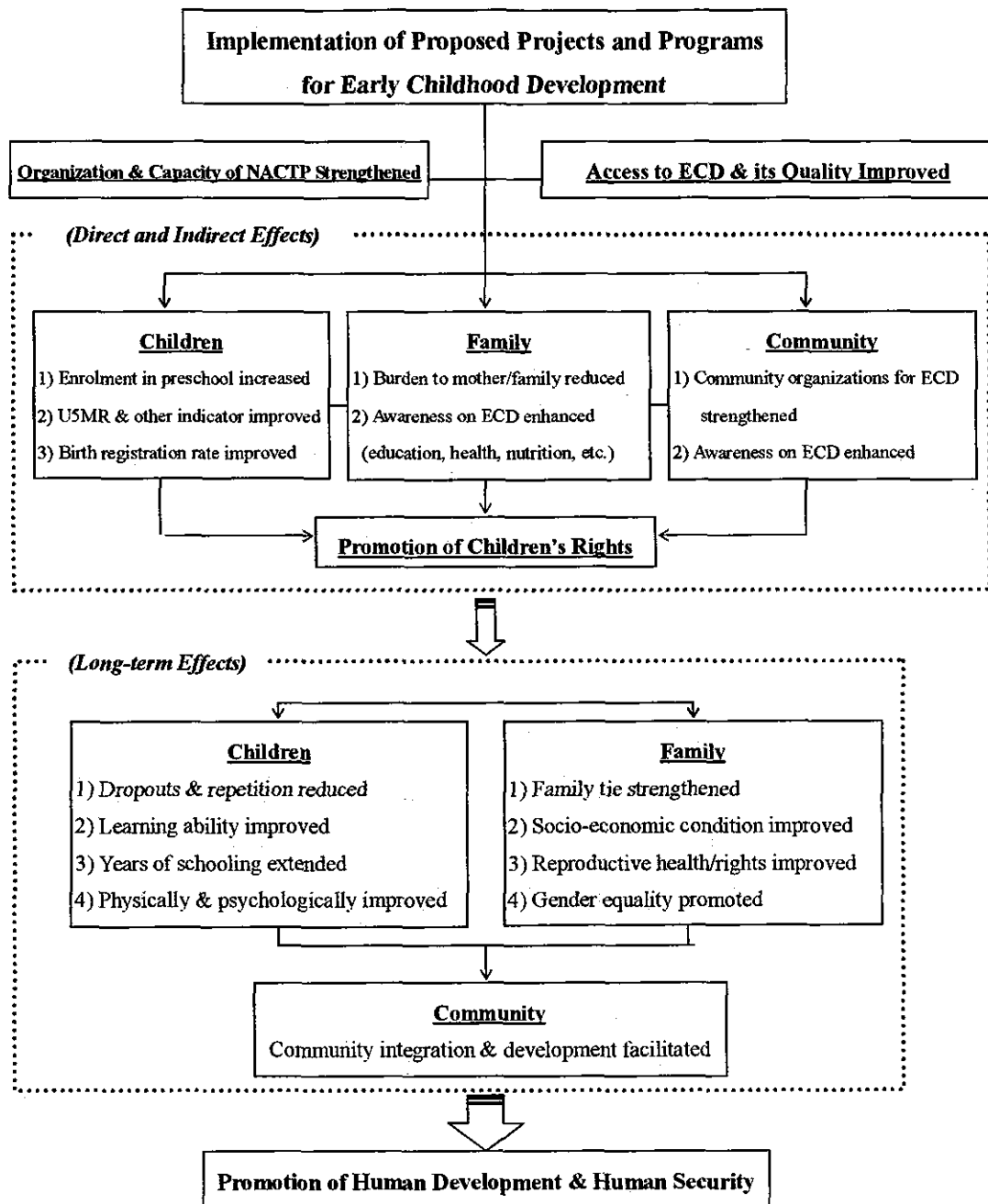


Source: JICA Study Team

#### 4.5 Expected Socioeconomic Impacts

The proposed projects and programs aim, not only at early childhood development in Kaolack and Tambacounda, but eventually at the promotion of human development and human security for enhancing the socioeconomic levels. In addition to benefiting ECD, the proposed projects and programs will have various socioeconomic impacts on the local people and communities in Kaolack and Tambacounda. Figure S.13 summarizes the specific impacts expected.

Figure S.13 Socioeconomic Impacts of the Implementing Proposed Improvement Plans



## CHAPTER 5 CONCLUSION AND RECOMMENDATIONS

### 5.1 Conclusion

#### Pilot Project

The implementation of the Pilot Project has had various effects not only on the children in the CTPs, but also the mothers/women, the families, and the communities as a whole. The foremost improvements observed in early childhood education have been improved discipline, growth of intelligence, and an improved health environment for the children. The alleviation of the childcare burden and increased knowledge on health/nutrition among mothers are two of the important direct effects on mother/family. The integration of the people in the community and community empowerment through the operation of the CTPs with the people's participation are the proven effects on the community.

Consolidating the assessment of the above effects, the overall evaluation of the Pilot Project is as summarized as follows.

- The CTPs provide an effective and holistic approach towards ECD.
- JICA's applied CTP model will be a model for future development.
- CTP operation can be financially viable.

Through the implementation of the Pilot Project, conditions for a sustainable CTP are summarized below.

- 1) The site must be selected in due consideration of socioeconomic aspects.
- 2) High community perception of the CTP will be required.
- 3) Social backgrounds and situations are to be well considered in CTP management.
- 4) Continuous support from the government (particularly at the regional level) will be required.
- 5) Selective Micro-projects for fundraising are to be implemented.
- 6) Cooperation with nearby primary schools and health clinics will also be indispensable.

#### Master Plan

The following aspects are to be taken into account at the basic strategies in preparing the Master Plan.

- 1) Preparation of Possible Improvement Plans on the basis of Current Situation

- 2) Preparation of an Improvement Plan at the National-level in addition to the Plan for ECD in Kaolack and Tambacounda
- 3) Formulation of the Master Plan through the Implementation of the Pilot Project
- 4) Formulation of an Improvement Plan for the NACTP as the Executing Agency of the CTPs
- 5) High Priority on the Bottom-up Approach through Community Participation

Applying the basic strategies stipulated above, 30 improvement plans have been formulated for implementation from 2004 to 2015. The plans have been classified by purpose:

To Strengthen the NACTP: 6 projects

To Enhance the Sustainability of CTP Operations: 9 projects

To Support ECD through the Cooperation of Related Ministries: 8 projects

To Improve ECD Facilities: 7 projects

The proposed projects are divided into two phases, namely short term development (to be implemented by 2007) and long-term development (to be implemented by 2015). The projects with the highest priority have now been selected and consolidated into the High-Priority Program summarized below.

- 1) Strengthening of the Organization and Capacity Building of the NACTP
- 2) Standardization/Integration of CTP Curriculum and Instruction Manuals
- 3) Community Sensitization and Training of CTP Staff
- 4) Support Activities for ECD using CTP
- 5) Activation and Promotion Plan of CTP

## 5.2 Recommendations

In order to successfully promote ECD through the implementation of the proposed projects/programs, the Study Team recommends that the NACTP make the following preparations and arrangements in close collaboration with the related ministries/agencies and international development partners.

- 1) Establish a National Policy on ECD and Clarify the Function of the NACTP  
First, Senegal is to establish its national policy on ECD. Next, the responsibilities

of the related ministries and agencies are to be defined. The functions and responsibilities of the NACTP are also to be clarified in relation to the related ministries.

2) Increase the ECD Budget

The allocated budget for ECD now accounts for less than 1% of the total education budget. This is to be increased to 5-10% of the budget allocated for primary schools.

3) Improve Coordination among the Related Ministries/Agencies and Development Partners

In view of the limited communication among the different sub-sectors, a newly established Executive Coordination Committee is to urgently encourage the improvement of the related ministries/agencies in ECD and coordinate their roles. In addition to integrating and coordinating the development plans, the committee is to coordinate the assistance from international development partners when necessary.

4) Strengthen the Organization of the NACTP

Once the NACTP, is established as a legal entity, the central and regional organizational structures presented in the Action Plan are also to be established. In addition to establishing its organization at the central level (setting up six departments), the NACTP urgently needs to strengthen its regional offices, the main sites through which its services are extended. Each regional office of the NACTP is to be regularly monitored by a minimum of two inspectors responsible for overseeing sensitization, training of CTP staff and monitoring/evaluation in collaboration with regional coordinators and inspectors of preschool education.

5) Extend the CTP as a Model of the Holistic Approach toward ECD

The Pilot Project proved the effectiveness of the CTPs for ECD through a holistic approach. The development plan for the CTPs is to be formulated by integrating all of the related plans prepared by the related ministries/agencies. An activation program for the existing CTPs is also to be prepared and incorporated within the CTP development plan. For implementation, the experiences and lessons gained in the Pilot Project are to be used as much as possible.

6) Strengthen the Sensitization and Training Functions of the NACTP

The CTPs are operated by instructors/assistant mothers and M/Cs selected by the people in the communities. As such the sensitization of the communities and the training of the CTP staff form the very foundation of CTP management. The current organization and functions of the NACTP are still insufficient to



accommodate the expected future extension. The staff is to be strengthened both in number and in quality particularly at the regional level.

7) Establish a Training Facility for CTP staff

To meet the increased demand for training instructors/assistant mothers and M/Cs in the near future, a training school is to be established at the central level. This school will function as the center of CTP training responsible for the training and retraining of the CTP staff and regional staff of the NACTP.

8) Strengthening Supporting Systems for the CTPs

The support systems for the sustainable extension of the CTPs are to be further strengthened. As experienced in the Pilot Project, the NACTP provides important support by introducing monitoring and evaluation systems once the CTPs are put into operation. The organization of a federation of CTPs will provide effective forums for the exchange of experiences and information among the CTPs and eventually enhance the sustainability of operations. Another important support for the CTPs will be coordination with the regional/rural communities and international development partners/NGOs in arranging supplemental assistance in cash or in kind to the CTPs.