

Kingdom of Cambodia

Nation Religion King



NATIONAL ACTION PLAN ON EARLY CHILDHOOD CARE AND DEVELOPMENT 2014-2018

Endorsed by the National Committee of Early Childhood Care and Development in the Session dated 13th August 2014

Preface

Cambodia has reached a new stage of human capital development, which requires emphasis on strengthened basic education and quality of learning for the sake of national economic development. This long-term vision must start from early childhood education which is the congret fundemantal that starting from the intergration of Early Childhood Care and Development. To achieve this goal, the Royal Government of Cambodia introduced the National Policy on Early Childhood Care and Development, which was endorsed in the plenary session of the Council of Ministers on Februry 19, 2010.

To enable sucessful implementation of the nine strategic areas of the National Policy on Early Childhood Care and Development, a realistic and feasible National Action Plan on Early Childhood Care and Development is required. The National Action Plan on Early Childhood Care and Development was formulated through a broad consultation with relevant ministries, agencies and development partners to ensure that these stakeholders are able to fulfill their respective roles and responsibilities.

The National Action Plan on Early Childhood Care and Development, 2014-2018 surely contributes to the realization of the Cambodian Millenium Development Goals, National Strategic Development Plan 2014-2018 and Education Strategic Plan 2014-2018, and other Sector strategy plan. In addition, the National Action Plan and reform programs were developed to create linkage between policies and strategies with financial resources.

Priorities included in this National Action Plan include the formulation of legal framework and mechanisms, improvement of monitoring and evaluation mechanisms, capacity development, expansion of health education and care services to women and young children, especially early provision of basic education to young children with special focus on victimized, vulnerable and poor young children. Motivation and capacity development for relevant officials at all levels for the implementation of these activities are also incorporated.

The National Action Plan on Early Childhood Care and Development, 2014-18 was developed with clear mechanisms through researches, dialogues and broad participation from relevant ministries/agencies and development partners at national and sub-national levels. This National Action Plan will serve as a roadmap for effective implementation of early childhood care and development related activities.

Phnom Penh,August 2014

National Committee of Early Childhood Care and Development Chairperson

Content

Preface	1
Content	2
1. Background	1
2. Strategies	8
Strategy 1:	8
Strategy 2:	1
Strategy 3:	2
Strategy 4:	2
Strategy 5:	3
Strategy 6:	3
Strategy 7:	4
Strategy 8:	5
Strategy 9:	6
3. Action Plan	8
4. Expenditure	5
Budget for each of the nine strategies is presented below:	5
5. Collection of resources to support the implementation of the action plan 36	6
5.1 Procedure of collecting resources	7
5.2 The participation and responsibility of stakeholders	7
6. Monitoring and Evaluation	9
7. Conclusion	2



1. BACKGROUND

1. Background

The National Policy on Early Childhood Care and Development was officially approved by the Council of Ministers on Februry 19, 2010. This policy was develop under the leadership and coordination of the Ministry of Education, Youth and Sport with full cooperation from another 10 relevant ministries which are involved in early childhood care and development services including (1) Ministry of Agriculture, Forestry and Fisheries, (2) Ministry of Environment, (3) Ministry of Economy and Finance, (4) Ministry of Health, (5) Ministry of Interior, (6) Ministry of Information, (7) Ministry of Planning, (8) Ministry of Rural Development, (9) Ministry of Social Affairs, Veterans and Youth Rehabilitation and (10) Ministry of Women's Affairs.

Based on this Policy, Ministry of Education, Youth and Sport developed a five-year National Action Plan on Early Childhood Care and Development, 2014-2014, to provide integrated and coordinated services together with relevant sectors. The National Action Plan on Early Childhood Care and Development will contribute to the achievement of the targets of Cambodian Millenium Development Goals and the National Plan on Education for All by placing emphasis on the improved quality of services and the rapid expansion of the coverage of early childhood care and development services.

The National Action Plan seeks to increase enrolment and enhance protection for children aged 0 to 6 years, especially children from poor families, indigenous minorities and children with disiabilities and priorize community-based pre-school and home-based early childhood education program through:

- Translating the National Policy on Early Childhood Care and Development into operational activities;
- Developing a working framework to promote early childhoood care and development;
- Developing working framwork and mechanisms and coordinating early childhood care and development;
- Mobilizing resources to support early childhood care and development related activities;
- Development a joint monitoring and evaluation framework for early childhood care and development related activities.

1.1 The National Policy on Early Childhood Care and Development

The vision of the National Policy on Early Childhood Care and Development is: All young children, from conception to less than six years of age, especially disadvantaged, vulnerable and poor children, shall be provided with care and development services, in line with the Constitution of the Kingdom of Cambodia.

Goals and objectives of the Policy include:

- 1. All women are provided with care, health education services and nutrition during pregnancy;
- 2. All children have their births registered, are provided with care, regular health checkups, adequate immunisation and nutrition, and early learning;
- 3. All young children are ready to start grade one at age six;

- 4. Technical staffs, caregivers, parents and guardians are provided appropriate knowledge on early childhood care and development;
- 5. All relevant ministries and institutions work together closely to address and deal with the issues concerning early childhood care and development; and
- 6. All young children from birth to school age shall enjoy physical, cognitive, mental and emotional development at their own home and centres which provide quality and sustainable health services, nutrition and education.

The National Policy on Early Childhood Care and Development contains the following key content:

- 1. Ensuring provision of early chilldhood care and development services from conception to under six years of age;
- 2. Ensuring that young children are provided with inclusive care and development;
- 3. Ensuring that relevant ministries, public agencies and relevant civil society will work in synergy on early childhood care and development.

1.2 Situation

In 2013, Cambodia had a total population of around 14.7 million persons, with the annual population growth of 1.46% and the birth rate of 2.8% (inter-census survey). 78.6% of population resides in rural areas. Minorities account for approximately 10% of the total population. The World Bank estimated that in 2010, the number of Cambodian children aged between 0 to 6 years is between 361,000 to 1,611,000 or 11.1% of the total population.

Since 2012, Gross Domestic Product (GDP) per capita has been more than USD 1,000. This figure was almost five times more than GDP per capita a decade ago. With this increasing trend, Cambodia will be graduated from least developed country in the near future. The percentage of the population living below the poverty line of US\$0.93 per day was 22.9% in 2009 and continued to decrease to 18.9% in 2012 (National Working Group on Povery Measurement, Ministry of Planning), while the target of CMDGs is set at 19.5% by 2015.

Adult literacy between ages 15 to 45 was 87.05% in school year 2013-2014, and the target set for 2017-2018 is 90.55% (MOEYS, ESP 2014-2018). Some parents are poor because they are illiterate or semi-literate.

Although general health status is improving in Cambodia, life expectancy is only 61 years (60.5 years for men and 64.3 years for women, UNICEF 2008) in contrast to an average of 78 years in industrialised countries. Between 2000 and 2010, Cambodia has made significant progress in improving the health of its children. The infant mortality rate has declined from 95 to 45 deaths per 1,000 live births and the under-five mortality rate has decreased from 124 to 54 deaths per 1,000 live births (CDHS 2010), setting Cambodia on track to reach its Millennium Development Goal 4 to reduce child mortality. This progress in child mortality reduction is mainly attributed to the strong performance of the national immunization programme, successful breastfeeding promotion (breastfeeding within the first hour after birth increased from 11% to 65.2%, while exclusive breastfeeding increased from 11.4% (CDHS 2000) to 73.5% (CDHS 2010) and factors outside the health sector, including poverty reduction, improved education and better roads.

Malnutrition remains a significant problem in Cambodia despite some improvements in the first half of the decade. In 2010, child stunting was stagnant at around 40% and Cambodia was considered as one of the countries with the highest child stunting rate in the region. Child wasting decreased from 17% in 2000 to 8% in 2005 but increased to 10.9% in 2010 (CDHS).

Micronutrient deficiencies remain widespread and anaemia is common among 52.7% of pregnant women, 44.4% of women in reproductive age and 55% of children (CDHS 2010). After some improvement, vitamin A supplementation of children aged 6 to 59 months now reaches 71%.

Every year, approximately 2,300 children die from diarrhoea. Malnutrition increases the number and duration of diarrhoea episodes. In rural areas of Cambodia only 24.7% of rural households have a toilet and approximately 53.1% have access to improved drinking water. With sanitation and safe water supply this low, Cambodia is constantly exposed to infection which can cause environmental entropy. Children who are often sick as a result of unsafe water and inadequate sanitation develop poor intestinal capacity to absorb nutrients. Stunted children are less likely to learn well because they suffer long-term cognitive damage.

The use of contraceptives is still poor. Only 27% of adults used contraceptives in 2007 and had inadequate antenatal health and nutrition care. In 2008, the proportion of pregnant women with two or more antenatal care visits with skilled health personnel was 81% and 89% of pregnant women had at least one antenatal care visit before birth. In 2010, only 59% had the 4 or more antenatal visits. Skilled attendants were present at 71% of deliveries and 54% of women delivered in a health care centre or hospital. The quality of antenatal education and deliveries at hospital should be further improved.

Prompt registration at birth is seen as an essential means of protecting a child's right to identity, as well as ensuring realisation of his/her fundamental rights. Birth registration is also essential to protection efforts such as: (i) preventing child labour by enforcing minimum-employment age laws; (ii) ensuring that children in conflict with the law are not treated legally and practically as adults; (iii) protecting children from under age military service or conscription; (iv) prohibiting child marriage; and (v) reducing child trafficking as well as assessing children who are repatriation and reunited family member. Data for births are essential for government for planning of services for populations, setting priorities, formulating essential national strategies and making decision about resource allocation at national and sub-national level.

In 2010, only 62% of children under five are registered in Cambodia, which is lower than the 2005 figure of 65%. 60% of children live in rural area registered their birth compared to 74% of children living in urban area. 48% of the poorest children registered as opposed to 78% of the richest.

Early Childhood Intervention (ECI) services are low at present for vulnerable children from birth to three years of age with or at high risk of developmental delays, malnutrition, disabilities or atypical behaviours. In addition, children with underweight or disabilities at brith are often not detected until they are enrolled in primary school.

Immunisation rates have greatly improved in recent years due to effective nationwide campaigns. According to Cambodia Demographic and Health Survey 2010, 94% were

immunised against Tuberculosis, 83.8% against Polio (PV3), 77% against Measles, 83.6% against Diphtheria, Pertussis and Tetanus (DPT3), 73% against Hepatitis B and 73.6% for all vaccinations above.

The incidence of mortality is quite high among children under five. 48% were taken to a health provider with suspected pneumonia, and respiratory diseases are endemic to this population of young children. 50% received oral rehydration for diarrhoea (and many more were not treated). Malaria case fatality rate reported by the Public Health Sector was 0.36% (MoH 2004) and the proportion of population at high risk who did not slept under insecticide-treated bed nets during the previous night was 64% (MoH HIS 2007); and HIV/AIDS infected or affected children are increasing and prevention rates are low.

In recent years, Early Childhood Education (ECE) sub-sector in Cambodia has shown significant improvement through four ECE programmes i.e. (i) State Preschools, (ii) Community Preschools, (iii) Home-based Programmes and (iv) Private Preschools. Enrolment rate among children aged 3 to 5 has increased from 13.6 per cent in 2005/06 school year to 32.7% in 2012/13 and from 27.3 to 56.5% among five-year olds (Education Congress Report, MoEYS, 2013). Curriculum, teacher training modules and teaching materials have been developed for different kinds of ECE programmes. Bilingual Preschool Education and Inclusive Preschool Education programmes were initiated in 2011 to extend ECE to children from ingenious minority groups and children with disabilities, who were most marginalized from early learning opportunities. Despite all those progress, issues on insufficient outreach to most rural areas, standardization of learning quality among the different programmes, and low incentive and retention of community preschool teachers, remain as the major challenges to be addressed.

Formal basic education is a function of early childhood development and planning to maximise educational budgetary resources. Net primary school enrolment has risen to 98.2% in 2013 - 2014 (MoEYS 2014). Primary school completion rate in 2012-2013 was 88.94%. Primary school dropout rate was 10.5%. Repetition rate averages 4.8% and is higher in rural areas (MOEYS 2014). These levels of internal inefficiency of the education system have led to high costs to society. Many researches throughout the world have shown that investing in early childhood care and development (ECCD) greatly reduces the internal inefficiencies of education systems, improves student achievement and expands the literate workforce. In addition, it has been shown that the savings pertaining to improving the internal efficiency of primary school education more than pays the costs for all ECCD services (Jaramillo and Mingat 2007).

It is estimated that 600,000 Cambodian children from birth to 17 years are orphans (UNICEF 2007), and only 83% of school age orphans are reported to be attending school. Due to lack of social welfare services, many families in poverty are abandoning traditional values that prioritize family- and community-based care and relying on residential care facilities, a trend that has contributed to a rapidly increasing and largely unregulated residential care industry in Cambodia. While around more than 11,000 children are living in residential care in 2013, an estimated 72% have at least one living parent. International research has shown that some of residential care institutions were not good conditions, so it can prevent the healthy development of children, leading to delays in their development, emotional insecurity and an inability to develop the social skills needed. More strategic support is necessary to improve

residential care institutions with standard and prevent unnecessary separation of children from parents and promote family reintegration for those separated.

Violence against children remains a significant issue in Cambodia, resulting in actual or potential harm to the child's health, survival, development or dignity. As of July 01, 2014, there were 31 children, including 18 girls, detained with their mother, most of them are under 3 years age, according to the figure of the General Department of Prison, Ministry of Interio. In accordance with the 2011 Law on Prisons, children who are residing with incarcerated mothers should be removed as of the age of 3.

Cambodia ratified the Convention on the Rights of the Child on Oct 15, 1992 and two Optional Protocols on Involvement of Children in Armed Conflicts and the Protocl on the Sale of Children, Child Prostitution and Child Ponorgraphy on Feb 21, 2002.

Though Cambodia has achieved significant progress after the devastation by war and subsequent turbulence from 1970 to 1993, the situation of the infants and young children remain a big concern. If the situation of young children is not improved quick enough, the Rights of the Child cannot be realized and many children will still suffer and and this country will be short of well educated and trained human resources, a key foundation for achieving the National Development Goals.

1.3 Priority Issues

Based on the above situational analysis, the National Action Plan on Early Childhood Care and Development seeks to improve birth outcomes, parenting skills and child development, in order to realize the full potential of all children in Cambodia and alleviate the social inequality stemming from inadequate health and nutrition services and poor education outcomes. The National Action Plan will develop early childhood intervention and inclusive education services for vulnerable children with or at high risk of developmental delays, malnutrition and disabilities.

Investment in ECCD reduces youth and domestic violence and lessens the need for costly services for criminal justice, prisons and social welfare.

The implementation of this National Action Plan will lead to timely school entry at six years of age, improved educational achievement, and reduced internal inefficiencies of the education system.

The National Action Plan on Early Childhood Care and Development will lay the foundation for improving national economic productivity and competitiveness.

Priority issues include:

- Expanding and enhancing quality of early childhood care and development
 - Educating pregnant women and parents or child caregivers: The use of contraceptives, the use of counseling services at health centers and deliveries at health center, hospital or health facility;

- Promoting nutrition and child well-being: Provision of micro-nutrients (vitamins and minerals), immunization, the use of latrine and safe water, enhancing nutrition for children and use of health services;
- Birth registration: registering birth of every child;
- Preventing violence and child labor: Preventing all forms of violence agains tchildren, preventing child labor, eliminating child trafficking and providing legal protection to children from unnecessary separation from family;
- Early childhood education: Increasing enrolment and care for children between
 0 to 6 years of age, especially children from poor families and indigenous group,
 vulnerable children, children at risk and children with disabilities and
 prioritizing community pre-school and home-based ECE program.

• Working framework, working mechanism and coordination for early childhood care and development:

- Formulating legal framework: Modernizing laws and policies, transferring functions to sub-national administration, combating trafficking and smuggling in persons and child labor, promoting gender, promoting anti-corruption mechanism;
- Formulating multi-sectoral coordinating mechanism at all levels: Sectoral Early Childhood Technical Coordination Committees and relevant Sub-Committees at national and sub-national levels.

Mobilizing resources to support early childhood care and development related activities:

- Enhancing partnership in providing early childhood care and development services: Integrate the plan between public institutions, private sector, civil society organizations and development partners in early childhood care and development;
- Commune/sangkat development plan and investment program: Encouraging commune/sangkat to include early childhood care and development activities in their development plan and increasing budget for early childhood care and development in the commune/sangkat investment program funding and other sources;

• Joint monitoring and evaluation framework for early childhood care and development:

- Monitoring and evaluation: Identifying roles and responsibilities and coordinating the setting of indicators, data collection, analysis and reporting on the progress and impact of early childhood care and development;
- o Policy review: Studing policy options and impacts of the policy implementation.



2. STRATEGIES

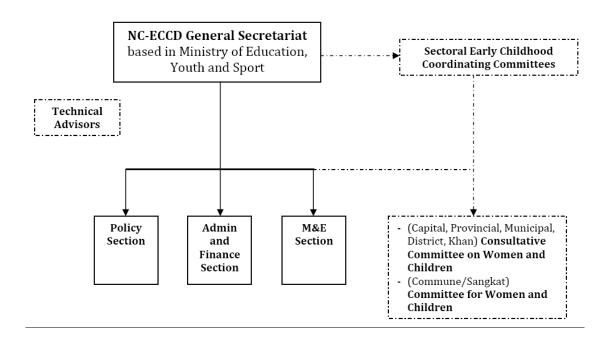
2. Strategies

- 1. Prepare a legal framework, standards and mechanisms to effectively support and implement the policy, by identifying cooperation and the duties of main stakeholders.
- 2. Improve existing or newly established monitoring and evaluation mechanism including database with participation from ministries/institutions, communities and development partners, and improve national and sub-National Technical Coordination Committees with clear divisions of roles and responsibilities.
- 3. Build capacity (pre-service and in-service training) for programme practitioners, child care supervisors and implementers in line with curriculum and decentralisation and deconcentration policy.
- 4. Develop national and sub-national mechanisms for the provision of certificates or recognition letters to programme practitioners based on actual care service.
- 5. Expand services and education on health care and nutrition to all pregnant women and their partners
- 6. Expand health care and healing services for all infants from birth to three years with regular health check-ups, timely and adequate provision of immunisation and monitoring of nutritional services for children with malnutrition, chronic illnesses, delayed development and disabilities.
- 7. Expand early childhood care and development services provision, including state, community, private and home-based services, especially early learning for young children
- 8. Ensure that all households have access to such information and services as safe water and sanitation, health, nutrition, breastfeeding, food supplementation, immunisation, Vitamin A, iron and iodised salt, early learning, birth registration, prevention of all types of diseases, such as HIV/AIDS, malaria, protection from violence, including corporal punishment, and other forms of vulnerabilities.
- 9. Develop communication mechanisms on early childhood care and development to attract support for these services.

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

- National Committee on Early Childhood Care and Development (NC-ECCD): is composed
 of representatives from Ministry of Education, Youth and Sport, 10 relevant ministries
 and Office of the Council of Ministers. This Committee will ensure the sustainability of
 the system of early childhood care and development by provding guidance and
 facilitating the implementation of the National Policy and National Action Plan on Early
 Childhood Care and Development. This Committee is tasked to:
 - 1. Urge relevant ministries, agencies and development partners to effectively carry out roles and tasks as elaborated in the National Policy on Early Childhood Care and Development;
 - 2. Urge and provide coordination to all relevant ministries and agencies to set up sectoral Early Childhood Technical Coordinating Committees to ensure effective implementation of the National Policy on Early Childhood Care and Development;
 - 3. Promote and coordinate the implementation of the National Policy on Early Childhood Care and Development at sub-national level;
 - 4. Cooperate with Consultative Committee on Women and Children at capital, provincial and municipal, district and khan levels and Commune/Sangkat Committee for Women and Children;

- 5. Approve and disseminate the National Policy and National Action Plan on Early Childhood Care and Development to relevant ministries, agencies, national and international organizations as well as development partners at national and subnational levels;
- 6. Develop legal framework for implementing Early Childhood Care and Development Program;
- 7. Set up a research mechanism to identify, search for and early detect young children with special needs and disabilities;
- 8. Develop supporting mechanisms for public service, community-based service, private service and home-based and house group-based service on early childhood care and development with special care for children in disadvantaged areas, ethnic minority children and marginalized children;
- 9. Review and revise the National Policy on Early Childhood Care and Development;
- 10. Mobilize resources for supporting the undertaking of early childhood care and development;
- 11. Monitor and evaluate the implementation of all early childhood care and development programs;
- 12. Report the progress of early childhood care and development to the Royal Government;
- 13. Undertake other tasks as assigned by the Royal Government.
- General Secretariat of the National Committee on Early Childhood Care and Development. The General Secretariat is tasked to:
 - 1. Undertake administrative and technical management to ensure sustainable functioning of NC-ECCD;
 - 2. Disseminate regulations approved by NC-ECCD to all relevant ministries, agencies and development partners;
 - 3. Undertake financial management for NC-ECCD;
 - 4. Monitor, evaluate and promote the implementation of the National Policy on Early Childhood Care and Development;
 - 5. Propose review and revision of the National Policy and National Action Plan on Early Childhood Care and Development to NC-ECCD;
 - 6. Cooperate with sectoral Early Childhood Technical Coordination Committees;
 - 7. Report to NC-ECCD;
 - 8. Perform other tasks as assigned by NC-ECCD



- Sectoral Early Childhood Technical Coordinating Committee: Is composed of technical officials and other stakeholders in respective sectors. This committee will help NC-ECCD to ensure timely and effective implementation of activities related their respective roles and responsibilities related to early childhood care and development. This Committee can form a number of sub-committees as needed;
- Decentralized ECCD working system: The General Secretariat of the NC-ECCD will
 work closely with the Consultative Committees for Women and Children at Capital,
 Provincial and Municipal, District and Khan level and the Commune/Sangkat Committee
 for Women and Children to ensure the development of annual plan, coordination,
 monitoring, evaluation and quarterly reporting on early childhood care and
 development related activities.

Strategy 2: Improve existing or newly established monitoring and evaluation mechanism including database with participation from ministries/institutions, communities and development partners, and improve national and sub-National Technical Coordination Committees with clear divisions of roles and responsibilities.

- Develop a database and national reporting mechanism to monitor and evaluate and coordinate early childhood care and development related work by using existing M&E systems of line ministries/agencies. GS/ECCD will be responsible for coordinating data collection from line ministries through Sectoral Early Childhood Technical Coordinating Committees, entering to the database and assessing and disseminating the progress on ECCD.
 - o In order to design the M&E mechanism, an initial mapping study will be conducted to identify and describe existing M&E functions, services, instruments, and resources in ECCD services including health, nutrition, education, social protection, and sanitation/hygiene such as Education Management Information System (EMIS), Health Information System (HIS), Commune Database (CDB), IDpoor and regular household surveys such as Cambodia Socio-Economic Survey (CSES) and Demographic and Health survey (DHS);
 - M&E and reporting will be constant elements of ECCD work at all levels, from Commune to District, Provincial and National levels. Reporting formats will be prepared for each level. A monitoring and evaluation manual which incorporate all basic instruments and forms will be developed, field-tested and implemented in each commune and district:
 - These reports will be compiled by the General Secretariat for ECCD every quarter, semester and year and submitted to the NC-ECCD by incorporating an executive summary and recommendations, which will also be widely disseminated to stakeholders;
 - o The database will be reviewed and updated every five years.
- ECCD programmes supported by Development Partners, NGOs, civil organizations and private sector should be also included in monitoring and evaluation, so that the NC-ECCD can identify the best practices for potential nationwide replication through mainstreaming.

Strategy 3: Build capacity (pre-service and in-service training) for programme practitioners, child care supervisors and implementers in line with curriculum and decentralisation and deconcentration policy.

- Provide pre- and in-service training for ECCD service providers to expand ECCD services and improve the quality of work of the service providers based on sound ethics.
 - Provide training to ECCD service management including managers of private preschools, community pre-schools, civil society organizations, NGOs, institutes and others;
 - Provide pre- and in-service training to personnel at national and sub-national levels and local ECCD service providers in the areas of education, health, nutrition, hygiene and education, child protection, social work, psychology, early childhood interventions and community development;
- A national system for pre- and in-service training will be developed for implementation in existing training institutions. A capacity development plan will also be developed to fill the gaps of service provision.
 - A study will be conducted to review past and current situation of early childhood care and development including the identification, mapping and assessment of training capacities and gap areas. This study will identify existing resources, possible areas for expansion and gap filling;
 - Pre- and in-service training will be done through national universities, teacher training colleges, technical colleges and public training instituttions, civil society organizations, non-governmental organizations, private sector, national and international development partners who have always provided regular support to early childhood care and development;
 - Pre- and in-service training on ECCD will be based upon the best available education curricula, materials and methods. The General Secretariat will coordinate the development of common training manuals;
 - Pre- and in-service training takes the form of pre-service training, basic vocational training, short training, fixed-site training based on the national curricular and linked with the curricular of countries in the region and exchange visit.
- Procedures and code of conduct for early childhood care and development will be developed to ensure immediate actions in neccessary cases, especially when there is a report on abuses.

Strategy 4: Develop national and sub-national mechanisms for the provision of certificates or recognition letters to programme practitioners based on actual care service.

- Provide diplomas and certificates to those who have gone through all forms of pre- and in-service trainings.
 - Promote cooperation among all stakeholders by establishing an Inter-Ministerial Working Group to jointly set up an accreditation system for all forms of ECCD training;
 - o Develop standards for training institutions and training programs to get accreditation;

- Provide certificates to those who complete pre- and in-service training according to the level of training. The certificates are issued by accreditated training institutions;
- Develop a database to manage those who have been awarded diplomas or certificates in order to plan for regular in-service training;
- Set criteria and provide credits for continuing education to early childhood intervention specialists, pre-school educators, psychologists, social workers and other professionals.

Strategy 5: Expand services and education on health care and nutrition to all pregnant women and their partners

- Disseminate information on family planning and pre-conception counseling as needed;
- Raise awareness on antenatal care, early and regular pregnancy care to reduce the risks
 of infant and maternal mortality, pre-mature birth, underweight birth and atypical baby
 after birth;
- Raise awareness on the importance of nutrition for pregnant women through counseling and provision of nutritious diet, nutritional rehabilitation and micro-nutrients (iron, folic acid, etc. as needed);
- Change the practices and behaviors to deliver at hospital or health center and ensure that pregnant women have a plan to travel to recognized health service providers or to hospital for delivery, especially minority women.

Strategy 6: Expand health care and healing services for all infants from birth to three years with regular health check-ups, timely and adequate provision of immunisation and monitoring of nutritional services for children with malnutrition, chronic illnesses, delayed development and disabilities.

- Health and nutrition services focus on Integrated Management of Child Illness (IMCI) and Community-based IMCI (C-IMCI) services, to effectively address the critical issues regarding maternal and early childhood health and nutrition. The National Action Plan asks the MoH and its coordinating agencies to place special priority on:
 - o Promoting early breastfeeding within the first hour after birth and exclusive breastfeeding during the first six months of life, continued breastfeeding until two years of age, and appropriate complementary feeding.
 - Ensuring the timely immunization for all children against all kinds of vaccinepreventable diseases, i.e. Tuberculosis (BCG), Polio (PV3), measles, Diphtheria, Pertussis and Tetanus (DPT3), Hepatitis B.
 - o Providing nutritious food supplements and early stimulation for children with malnutrition, along with guidance for food security and safety.
 - Ensuring the provision of essential micronutrients through established health centres or countrywide sales of fortified foods.
 - o Provision of deworming pills through established health centres and schools.
- Establish strong coordinating mechanisms with all existing health posts and health centers at commune and district levels and with all relevant services to ensure that all

children will be provided health screening, health care, immunization, treatment and regular nutritional supplements as needed.

- Provide psycho-socio support and nutritional rehabilitation in a swift manner for children with special needs for nutrition including children with wasting and underweight.
- Provide health protection, especially to children with disabilities, children with delayed development, children with chronic diseases, indigenous children and disadvantaged children;
- Educate parents on good parenting skills by focusing on nutrition and health education and activities to be undertaken with their children according to their development;
- Conduct home visit and organize parents in group and develop a transition plan to provide inclusive education in pre-schools or primary schools.

Provide proactive outreach and parent education services regarding ECI eligibility to identify eligible children at the earliest possible point, from birth onward and to encourage parents to enrol their children in ECI services.

Strategy 7: Expand early childhood care and development services provision, including state, community, private and home-based services, especially early learning for young children.

- Educate parents to recognize their role as the key ECCD providers and equip them with appropriate knowledge and practice, so that they are able to provide their children with the essential care and early learning opportunities.
- Develop a standardized multi-disciplinary parenting education package that covers the essentials of health, nutrition, hygiene, protection and psychological stimulation in early childhood to be consistent with relevant sectors.
- Provide community-based and home-based ECCD to children who cannot be with their mothers, fathers or extended family members to ensure good child care and development
 - Centre-based Early Child Care and Development services provided by the public and private sectors and by civil society organisations
 - Family Child Care Homes, managed by family, friends or neighbours for children from two or more families.
 - Decentralize ECCD services for children from birth to 3 years of ageat sub-national level.
 - Set up minimum standards and accreditation for ECCD centers.
 - Conduct a mapping exercise to identify and quantify the populations with the needs for services according to the order of priorities, which will be the basis for projecting the budgets that will be required to serve targeted populations.
 - o Give special attention to very high-risk children including 1) orphans and separated children by providing good nurturing, health and nutritional care, protection and

appropriate developmental activities to them daily, and 2) children with special needs, such as developmental delays, malnutrition, disabilities and atypical behaviours who require inclusive child care and development services.

- Expand all forms of early childhood education services in every place for children from 3 to 6, especially in areas with low admission rate and low net enrolment rate, high dropout rate and areas with low nutritional status, child protection and health service utilization;
- Strengthen and expand bilingual community pre-schools for indigenous areas;
- Expand inclusive education program for children with disabilities in public pre-schools and community pre-schools;
- Seek supports for pre-schools or ECCD centers, who accept children from low-income families to learn and receive feeding services at school;
- Construct and expand public pre-schools, community pre-schools and pre-school resource centers according to quality standards by providing WASH facilities, handwashing stations, first aid kits and playground;
- Increase budget for ECCD in the commune development budget and other sources by integrating plans of the public sector, prvate sector and civil society organizations together;
- Conduct feasibility studies to encourage factories and enterprises to organize ECCD services for workers and employers with young children.
- Incorporate heath screening, provision of nutrients, de-worming tablets and vaccination trhough existing ECE programmes, and establish referral system to heatlh facilities.

Strategy 8: Ensure that all households have access to such information and services as safe water and sanitation, health, nutrition, breastfeeding, food supplementation, immunisation, Vitamin A, iron and iodised salt, early learning, birth registration, prevention of all types of diseases, such as HIV/AIDS, malaria, protection from violence, including corporal punishment, and other forms of vulnerabilities.

- Provide parents with information on good sanitation and hygiene practices and where they can access, by building and using toilet facilities or household water treatment and storage.
- Provide communities with information on sanitation practices to decrease contamination of common water resources.
- Provide safe water facilities and supplies and latrines in schools and public places and promote handwashing with soaps and tooth brushing among children.
- Develop training modules on safe water and options for household and community safe water treatment and storage.
- Construct and repair basic latrines and provide cash for latrine construction.
- Disseminate and receive information on health care and nutrition for pregnant women and children through the media, booklets, posters and guidebooks.
- Raise awareness on the importance and requirements for birth registration through monthly outreach and short educational messages.

- Provide sufficient equipment and supplies for birth registration at commune and district level.
- Reinforce existing laws and regulations on civil registration and eliminate informal fees.
- Strengthen cooperation with health services and activities to facilitate birth registration for babies.
- Establish mechanisms to ensure safety, injury prevention and first aids.
- Ensure that vulnerable children aged 0 to 6 who are living in public areas or in care centers are considered as priority target groups for case management, search for family, integration and planning for permanent residence.
- Build capacity of social workers, parents and community-based caregivers on identification and referral of children victimized by violence to specialized services.
- Organize parenting programs to raise awareness on positive parenting practivies and motivate them no to impose excessive disciplines on children or cause inappropriate harms or impacts.
- Combat domestic violence, which impacts every family member, especially most on the mother and young children leaving them with negative impacts for the whole life.
- Increase awareness rising on the rights of the child in school, public areas and communities.
- Develop and improve regulations related to child protection.

Strategy 9: Develop communication mechanisms on early childhood care and development to attract support for these services.

- Broad information dissemination and bulletins on activities and reports related to early childhood care and development through all media
- Develop a communication program through policy dialogues, social media, community forum, inter-personal communications through different formats such as workshop on key initiatives for leadership and stakeholders, national and international roundtables to:
 - o Promote effective involvement of policy makers to enable joint commitments for early childhood care and development.
 - Increase awareness of parents and stakeholders in communities to promote more demand for better ECCD services and ownership.
- The General Secretariat of ECCD will undertake preliminary research, take stock of consultative fora by coordinating with line ministries and agencies in regard to:
 - o Comprehensive review on the current sectoral practices in order to identify challenges and propose key recommondations.
 - o Provide feedback to include recommendations in sectoral action plan.
 - o Monitor the implementation of action plans to mobilize additional support and resources.



3. ACTION PLAN

3. Action Plan

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

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Ensure sustained and effective working sysem of the National Committee for Early Childhood Care and Development	 Urge relevant ministries, agencies and development partners to carry out roles and tasks as elaborated in the National Policy on Early Childhood Care and Development Urge and provide coordination to all relevant ministries and agencies to set up sectoral Early Childhood Technical Coordinating Committees 	 Guidelines and regulations for the undertaking of roles and duties Decision on the establishment of sectoral Early Childhood Technical Coordinating Committees 	2014-2018	NC-ECCD	25,000.00
		→ Promote and coordinate the implementation of the National Policy on Early Childhood Care and Development at sub-national level	 Guidelines and operational plan for the implemnetation of the National Policy and National Action Plan on Early Childhood Care and Development at sub-national level 	2014-2018	NC-ECCD, DPs and Stakeholders	60,000.00
		 Cooperate with Consultative Committee on Women and Children at capital, provincial and municipal, district and khan levels and Commune/Sangkat Committee for Women and Children in terms of action planning and ECCD monitoring 	 20% of provinces and districts, commune developed their own NAP -ECCD 	2015-2018	NC-ECCD, Relevant Ministries, DPs	500,000.00
		 Approve and disseminate the National Policy and National Action Plan on Early Childhood Care and Development to relevant ministries, agencies, national and international organizations as well as development partners at national and sub-national levels 	 The number of officials at national and sub- national level participating in the dissemination workshop on the National Policy and National Action Plan on 	2014-2015	NC-ECCD, DPs	210,000.00

			Early Childhood Care and Development			
		 Develop legal framework for implementing Early Childhood Care and Development Program 	Regulation and guidelines for sectoral implementation of ECCD program	2014-2018	NC-ECCD, Relevant Ministries, DPs	15,000.00
		 Set up a research mechanism to identify, search for and early detect young children with special needs and disabilities 		2014-2016	NC-ECCD, Relevant Ministries, DPs	20,000.00
		 Develop supporting mechanisms for public service, community-based service, private service and home-based and house group- based service on early childhood care and development with special care for children in disadvantaged areas, ethnic minority children and marginalized children 	 Working framework for supporing public, community-based, private, home-based ECCD developed 	2014-2016	NC-ECCD, Relevant Ministries, DPs	50,000.00
		 Mobilize resources for supporting the undertaking of early childhood care and development 	 Percentage of fund for ECCD increased 	2014-2018	NC-ECCD, Relevant Ministries, DPs	10,000.00
		 Report the progress of early childhood care and development to the Royal Government 	o Report on the progress of ECCD prepared	2014-2018	NC-ECCD, Relevant Ministries	10,000.00
2	Ensure sustained and effective working sysem of the General Secretariat of the	 Undertake administrative and technical management to ensure sustainable functioning of NC-ECCD 	 Workplan for the operation of the General Secretariat of NC-ECCD 	2014-2018	GS-ECCD	50,000.00
	National Committee for Early Childhood Care and Development	 Disseminate regulations approved by NC- ECCD to all relevant ministries, agencies and development partners 	 Officials of relevant ministries, agencies and development partners receive information on regulations 	2014-2018	GS-ECCD	50,000.00
		 Develop and Stregnthen financial management system for NC-ECCD 	 Budget plan and income-expense statements of NC-ECCD prepared 	2014-2018	GS-ECCD	50,000.00

	1		1			
		 Propose review and revision of the National Policy and National Action Plan on Early Childhood Care and Development to NC-ECCD 	 Approval from NC- ECCD on the proposed review and revision of the National Policy and National Action Plan on Early Childhood Care and Development 	2014-2018	GS-ECCD	5,000.00
3	Identify and establish sectoral Early Childhood Technical Coordinating Committees	 Develop regulation on the establishment of sectoral Early Childhood Technical Coordinating Committees 	o Regulations prepared	2014	NC-ECCD, Relevant Ministries	2,000.00
		 Develop sectoral action plans and budget plans to incorporate into the National Action Plan on Early Childhood Care and Development 	 Action plan and budget plan prepared 	2014	NC-ECCD, Relevant Ministries	15,000.00
		 Prepare a stocktaking report and submit to NC-ECCD 	Periodical report prepared	2014-2018	Relevant Ministries	10,000.00
4	Strengthen the implementation of decentralized system of ECCD	 Promote the implementation and monitoring of the decentralized early childhood care and development 	 Progress report and monitoring report 	2014-2018	Relevant Ministries	50,000.00

Strategy 2: Improve existing or newly established monitoring and evaluation mechanism including database with participation from ministries/institutions, communities and development partners, and improve national and sub-National Technical Coordination Committees with clear divisions of roles and responsibilities.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	joint and sectoral mechanism on ECCD monitoring and evaluating mechanisms	○ Develop a joint monitoring and evaluating mechanism on ECCD	o A joint monitoring and evaluating mechanism on ECCD	2014-2018	NC-ECCD, Relevant Ministries, DPs	20,000.00
		 Develop sectoral monitoring and evaluating mechanisms on ECCD 	 Sectoral monitoring and evaluating mechanisms on ECCD 	2014-2018	NC-ECCD, Relevant Ministries, DPs	26,500.00
		o Monitor, evaluate and report at all levels from commune level	 M&E plan developed and monitoring result reports prepared at all levels 	2014-2018	NC-ECCD, Relevant Ministries, DPs	124,000.00
		 Procedures for reporting and compiling quarterly, semester and annual reports to submit to NC-ECCD 	 Quarterly, semester and annual progress reports prepared 	2014-2018	NC-ECCD, Relevant Ministries, DPs	10,000.00
		 Database will be reviewed and updated every 5 years Input the indicator for M and E on the implementation ECE by the Development Partners 	 Baseline data and update data prepared Baseline data prepared based on progress reports and mid-term report 	2014-2018	GS-ECCD	20,000.00

Strategy 3: Build capacity (pre-service and in-service training) for programme practitioners, child care supervisors and implementers in line with curriculum and decentralisation and deconcentration policy.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Pre- and in-service trainings for ECCD service providers	 Training for management and in-service training for personnel on ECCD 	 The number of ECCD personnel trained 	2014-2018	MOEYS	400,000.00
2	Pre- and in-service training systems at national level developed for implementation in existing training	o Study and review ECCD progress	 Study and progress reports on ECCD prepared and disseminated 	2014-2018	MOEYS, Relevant Ministries, DPs	10,000.00
	institutions	 Develop curriculum and training materials and provide in-service training on ECCD skills according to the national curriculum and curricular of countries in the region 	 Curriculum and ECCD skill training materials prepared 	2014	MOEYS	40,000.00
3	Improve technical coordinating committees at national and subnational levels	 Develop procedures and framework for implementation 	 Legal framework and regulations related to code of conduct on ECCD developed 	2014-2018	NC-ECCD, Relevant Ministries, DPs	5,000.00

Strategy 4: Develop national and sub-national mechanisms for the provision of certificates or recognition letters to programme practitioners based on actual care service.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Provide diplomas and certificates to those who have gone through all forms of pre- and inservice trainings	 Develop standards for training institutions and training programs and provide accreditation to all forms of ECCD trainings 	 Manuals on standards for training institutions and training programs and accreditation for all forms of ECCD trainings developed 	2014-2018	MOEYS, Relevant Ministries, DPs	20,000.00
		 Provide certificates to those who complete pre- and in-service trainings 	 The number of trainees awarded with certificates 	2014-2018	MOEYS, Relevant Ministries,	50,000.00
		 Develop a database to manage those who have been awarded diplomas or certificates 	 A database to manage those who have been awarded diplomas or certificates developed 	2014-2018	MOEYS, Relevant Ministries,	5,000.00

Strategy 5: Expand services and education on health care and nutrition to all pregnant women and their partners.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Disseminate information on family planning and pre-conception counselling as needed	 Develop plans on the use, revision and/or preparation of documents related to: 1. Family planning and 2. Education on readiness for pregnancy 	 plans on the use, revision and/or preparation of documents related to: Family planning and Education on readiness for pregnancy prepared 	2015	MoH, Relevant Ministries, DPs	20,000.00
		 Use materials from health center and ECCD services during home visits and group meetings 	 The number health centers, villages and houses where the materials are disseminated 	2014-2018	MoH, GS-ECCD	50,000.00
		 Develop plans and training schedules to train local staff of MOH and ECCD personnel so that they know how to use these materials during home visits and group meetings 	 Training plans and schedules prepared 	2014-2015	MoH, GS-ECCD	40,000.00
2	Raise awareness on antenatal care and early and regulary pregnancy care	 Develop booklets and teaching materials on key messages on antenatal care, delivery, neonatal care and maternal health 	 Training materials developed 	2014-2015	MoH, GS-ECCD	50,000.00
	care	 Train community volunteers and pilot the program in 4 districts in different provinces 	 The number of volunteers trained 	2014-2015	MoH, GS-ECCD	500,000.00

		 Monitor and evaluate services provided in pilot areas 	O The number of areas monitored 2014-2015 MoH, GS-ECCD 100,000.00
3	Raise awareness on the importance of nutrition for pregnant women	 Expand these services as soon as possible according to the annual plan of MOH 	O Number of services expanded 2014-2018 MoH, GS-ECCD 600,000.00
	. 0	 Ensure that all ECCD, antenatal care, neonatal care and parenting education services are available in communes and districts Encourage women to use health facilities 	 Number of communes with services Numer of women receiving services 2014-2018 MoH ECCD Services at commune and district levels
4	 Change the practices and behaviors of delivering outside hospital or health center Promote the use of skilled health staff and 	Develop and three messages to be disseminated on the media to encourage women to use health center, hospital and health facilities and skilled workers for antenatal care and delivery	O Materials prepared, printed and distributed 2014-2015 MoH ECCD Services at commune level
	health facilities for antenatal care and deliveries	 Field test the messages and adapt them to the culture, translate them and disseminate on radio and TV 	 Field test undertaken, materials fianlized and disseminated on the media 2014-2015 MoH ECCD Services at commune level

Strategy 6: Expand health care and healing services for all infants from birth to three years with regular health check-ups, timely and adequate provision of immunisation and monitoring of nutritional services for children with malnutrition, chronic illnesses, delayed development and disabilities.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Health and nutrition services focus on Integrated Management of Child Illness (IMCI) and Community-based	 Promote early breastfeeding within the first hour after birth and exclusive breastfeeding during the first six months of life 	 Percentage of mothers who breastfeed the infant early 	2014-2018	MoH, 10 Ministries, DPs	30,000.00
	IMCI (C-IMCI) services	o Ensure the timely immunization for all children	 Percentage of children immunized 	2014-2018	MoH, Relevant Ministries, DPs	100,000.00
		 Provide nutritious food supplements and early stimulation for children with malnutrition 	 The number of children provided with nutritious food supplements and The number of children provided with treatment food 	2014-2018	MoH, Relevant Ministries, DPs	1,000,000.00
		Ensuring the provision of essential micronutrients to children	 The number of children provided with essential micronutrients 	2014-2018	MoH, Relevant Ministries, DPs	200,000.00
		 Provide deworming pills through established health centres, outreach and schools 	Percentage of children provided with deworming pills	2014-2018	MoH, Relevant Min, DPs	180,000.00
2	Establish strong coordinating mechanisms with all existing health posts and health centers at commune and district levels	Put in place regulations, human resources and action plan	 Coordinating mechanisms developed The number of health centers with health workers according Minimum Package of Activities 	2014-2015	MoH, Relevant Ministries, DPs	10,000.00

3	Educate parents on good parenting skills from birth to three years of age	Prepare program document and enhance capacity of implementers and service providers	The number of parents participating in the program	2014-2018	MOEYS Relevant Ministries, DPs	133,989.00
		Monitoring at service level	 The number of houses with services and monitoring 			

Strategy 7: Expand early childhood care and development services provision, including state, community, private and home-based services, especially early learning for young children.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibil e Person	Budget (USD)
1	Educate parents to recognize their role as the key ECCD providers	Develop parenting program documents	 Parenting program documents developed 	2014	MOEYS, DPs	50,000.00
2	Develop a multi- disciplinary parenting education package	Develop training modules for implementers	 Training modules developed 	2014	MOEYS, DPs	35,000.00
3	Provide community- based and home-based ECCD services	Parenting program linked with public preschools and community-based pre-schools	 The number of public pre-schools and community pre-schools implementing parenting program 	2014-2018	MOEYS, DPs	5,695,321.00
		o Home-based ECCD services for home-based care	 The number of home- based ECCD services established 	2014	MOEYS, DPs	1,582,190.00
		 Center-based ECCD services provided by the public sector, private sector and civil society organizations 	 Number of services established 	2014	MOEYS, DPs	10,000,000.00
		Decentralization of ECCD services for children between 0 to 3 at sub-national level	 ECCD services for children between 0 to 3 at sub-national level are implemented in a decentralized manner 	2014	MOEYS, DPs	50,000.00
		 Minimum standards and accreditation for ECCD centers 	 Minimum standards developed 	2014	MOEYS, DPs	403,376.00
		o Mapping of ECCD needs	 Map of ECCD needs prepared 	2014	MOEYS, DPs	30,000.00

		o Attention on high-risk children	 Number of high risk children protected 	2014-2018	MOEYS, DPs	100,000.00
		 Maximize agricultural productivity including vegetable garden, animal raising and multiple crops in the yard 	 The number of houses with vegetable gardens, animal raising and multiple crops increased 	2015-2018	MAFF, DPs	260,000.00
4	Expansion and strengthening of ECE services	 Expand all forms of early childhood education services in every place for children from 3 to 6 	 Number of services increased and service coverage strengthened 	2014-2018	MOEYS, DPs	4,610,920.00
		 Strengthen and expand bilingual community pre-schools for indigenous areas 	 Bilingual community pre-schools expanded 	2014-2018	MOEYS, DPs	5,772,764.00
		 Expand inclusive education program for children with disabilities in public pre-schools and community pre-schools 	 The number of inclusive education program in public pre-schools and community pre-schools expanded 	2014-2018	MOEYS, DPs	100,000.00
		 Construct and expand public pre-schools, community pre-schools and pre-school resource centers according to quality standards 	o The number of public pre-schools, community pre-schools and pre-school resource centers complying with the quality standards increased	2014-2018	MOEYS, DPs	15,869,930.00
5	Increase budget for ECCD in the commune development budget and other sources	 Develop regulations on the increase of budget for ECCD in the commune development budget and other sources Identify Community Preschool functions and relegulated as obligatory function for transfering to commune/sangkat councils. 	 Percentage of budget for ECCD in the commune development budget and other sources increased Community Preschool will be implemented by all commune/sangkat councils 	2014-2018	MOEYS, MOI, GS-ECCD	10,000.00

6	Conduct feasibility studies to encourage factories and enterprises to organize ECCD services	 Develop regulations and set up working group to conduct feasibility studies to encourage factories, enterprises and investment companies to organize ECCD services 	 The number of factories, enterprises and investment companies to organizing ECCD services 	2014-2016	MOEYS, Relevant Ministries,	43,000.00
7	Access to community pre-school program and parenting and family support program	 Parents recognize the value and importance of ECCD and early childhood education 	 The number of officials at national and subnational levels implemented ECCD increased The number of parents and stakeholders increasing their attention and recognizing clearly the value of ECE 	2014-2018	MOWA, MOEYS, MOI, DPs	250,000.00
8	Conduct monitoring and evaluatoin on the effectiveness of ECCD and community preschool	 Visit target provinces to provide technical support and conduct M&E 	 Community pre-school process and parenting and family education process proceed safely and with quality 	2014-2018	MOWA, MOEYS, MOI, DPs	150,000.00

Strategy 8: Ensure that all households have access to such information and services as safe water and sanitation, health, nutrition, breastfeeding, food supplementation, immunisation, Vitamin A, iron and iodised salt, early learning, birth registration, prevention of all types of diseases, such as HIV/AIDS, malaria,

protection from violence, including corporal punishment, and other forms of vulnerabilities.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibil e Person	Budget (USD)
1	Provide parents and children with information and services related toon good sanitation and hygiene practices, safety and nutrition	 Develop relevant techical messages Develop and disseminate agricultural technical messages related to nutrition, hygiene and sanitation, health and safety to parents and children 	The number of media disseminating the messages	2015-2018	MOEYS, MAFF, MoInfo, MRD, DPs	1,805,500.00
2	Provide communities with information and services related to hygiene practices and environment support	Develop relevant techical messages	The number of media disseminating the messages	2015-2018	MOEYS, MoInfo, MRD, DPs	406,400.00
3	Provide safe water facilities and latrines in schools and public places	Equip safe water facilities and latrines in schools and public places	The number of schools and public places provided with safe water facilities and latrines	2014-2018	MRD , DPs	412,500.00
		Develop training modules on safe water and options for safe water treatment and storage	 Training modules on safe water and options for safe water treatment and storage developed 	2014-2015	MOEYS, MRD, DPs	100,000.00
		 Construct and repair basic latrines and provide cash for latrine construction 	The number of basic latrines constructed	2014-2018	MOEYS, MRD, DPs	1,000,000.00

4	Raise awareness on the importance and requirements for birth registration	 Develop mechanisms and materials for dissemination Provide sufficient equipment and supplies for birth registration Reinforce existing laws and regulations on civil registration and eliminate informal fees 	0	The number of children with birth registration increased	2014-2018	MOI, MOEYS, DPs	10,000.00
5	Ensure that vulnerable children aged 0 to 6 are provided with care	Establish mechanisms to collect those children for services	0	The number of children provided with services	2014-2018	MOSVY, DPs	50,000.00
6	Build capacity of social workers, parents and community-based caregivers	 Establish mechanisms for implementation Provide ToTs to farmer community, village animal health workers, commune agricultural extension workers, animal raising communities, fisheries communities, forestry communities (2015 - 2016) Disseminate further to local community (2015 - 2018) 	0	MOSVY, parents and community-based care providers have their capacity enhanced	2014-2018	MOSVY, MAFF, DPs	433,000.00
7	Prevention of domestic violence	o Establish mechanisms for implementation	0	The number of violence case decreased	2014-2018	MOI, MOSVY, MOEYS, DPs	60,000.00
8	Enhance awareness on the rights of the child	 Establish mechanisms for implementation Prepare dissmination materials and conduct outreach on the rights of the child in local communities 	0	The number of media disseminating	2014-2018	MOI, MOSVY, MOEYS, DPs	45,000.00
9	 Develop and improve regulations related to child protection 	 Develop and improve regulations related to child protection Develop the policy on ECCD in agriculture sector 	0	Regulations related to child protection improved and developed	2014-2018	MOI, MOSVY, MOEYS, DPs	35,000.00
10	 Supporting Childrend in an emergency or disaster 	 Create program such as education, nutrition, health, care, and protection for children that located in an emergency or disaster 	0	The number of children who benefit from projects	2014-2018	MoEYS Relevant ministries DPs	1,200,000.00

Strategy 9: Develop communication mechanisms on early childhood care and development to attract support for these services.

No.	Sub-Strategies, Programs, Main Activities	Taks and Program Coverage Activities	Indicators	Deadline	Responsibile Person	Budget (USD)
1	Develop a website and facebook page for broad information dissemination and bulletins on activities and reports related to early childhood care and development	 Develop a website for broad information dissemination and bulletins on activities and reports related to early childhood care and development 	 Website for broad information dissemination and bulletins on activities and reports related to early childhood care and development developed 	2015	MoInfo, DPs Relevant ministries	778,110.00
2	Develop a communication program through: - policy dialogues	 Promote effective involvement of policy makers 	 Effective involvement of policy makers 	2014-2018	MOI, MOSAVY, MOEYS, DPs	29,000.00
	- social media - community forum - inter-personal communications through different formats	 Increase awareness of parents and stakeholders in communities 	The number of parents and stakeholders in communities where ECCD services are supported	2014-2018	MOI, MOSAVY, MOEYS, DPs	18,000.00
3	The General Secretariat of ECCD will undertake preliminary research, take stock of consultative	 Conduct comprehensive review on the current sectoral practices 	 Relevant sectors have update information on ECCD services 	2014-2018	GS-ECCD, DPs	16,000.00
		 Provide feedback to include recommendations in sectoral action plans 	 Feedback to include recommendations in sectoral action plans received 	2014-2018	GS-ECCD, DPs	18,000.00
		 Monitor the implementation of action plans to mobilize additional support and resources 	 Monitoring of the implementation of action plans organized 	2014-2018	NC-ECCD, DPs	50,000.00



4. EXPENDITURE

4. Expenditure

Budget for each of the nine strategies is presented below:

No.	Topics of the Strategies	Budget (USD)
1	Prepare a legal framework, standards and mechanisms to effectively support and implement the policy, by identifying cooperation and the duties of main stakeholders	1,132,000.00
2	Improve existing or establish M&E mechanisms with involvement of ministries, agencies, communities and development partners and improve the national and sub-national technical coordinating committees with clear division of duties and responsibilities	200,500.00
3	Build capacity (pre-service and in-service training) for programme practitioners, parents, guardians and child care supervisors and implementers on the content of and how to provide care in line with curriculum and decentralisation and deconcentration policy.	455,000.00
4	Develop national and sub-national mechanisms for the provision of certificates or recognition letters to programme practitioners based on actual care service.	75,000.00
5	Expand services and education on health care and nutrition to all pregnant women	1,935,000.00
6	Expand health care and healing services for all infants from birth to three years with regular health check-ups, timely and adequate provision of immunisation and monitoring of nutritional services for children with malnutrition, chronic illnesses, delayed development and disabilities	1,653,989.00
7	Expand early childhood care and development services provision, including state, community, private and home-based services, especially early learning for young children	45,012,501.00
8	Ensure that all households have access to such information and services as safe water and sanitation, health, nutrition, breastfeeding, food supplementation, immunisation, Vitamin A, iron and iodised salt, early learning, birth registration, prevention of all types of diseases, such as HIV/AIDS, malaria, protection from violence, including corporal punishment, and other forms of vulnerabilities	5,164,900.00
9	Develop communication mechanisms on early childhood care and development to attract support for these services	909,110.00
	Total	56,538,000.00



5. Collection of resources to support the implementation of the action plan

5. Collection of resources to support the implementation of the action plan

5.1 Procedure of collecting resources

Implementation of the Action Plan for the period 2014 to 2018 resources of approximately \$55,470,500.00 will be expected to support the implementation. Collecting resources:

Budget support: resources will be transferred and integrated with the government's budget and the use of the existing system. Activities will focus on the priorities set out in the strategic plan of each sector.

Partnership Fund: the resources are gathered to support activities that focus on the target group and similar scope. Development partners and stakeholders have agreed to complement the activities or priorities in line with the strategic plan of each sector. Procedures carried out will be determined or government system.

Separate project: resources will be focused on intervention or action or secondary priority that government services are not accessible. Resource management will be applied directly develop partners or organizations.

In the short future with the Public Finance Management Reform Programme, relevant ministries will be responsible for implementing programs or activities that are currently running. In accordance with the decentralized management reforms and decentralization action plan will be reviewed by examining the response coordination and study of the transfer of resources and responsibilities to subnational levels.

5.2 The participation and responsibility of stakeholders

In the period 2014-2018 the participation and responsibility of stakeholders are expected as follows:

Royal government: responsible for providing related services as defined in the constitution, especially institutions and organizations under the control of the government such as public school kindergarten, teacher salary, training and pre-service training to teachers and other infrastructure construction.

Commune councils: In the context of decentralization and deconcentration, commune investment funds will support the costs associated with the protection and development of children.

Development partners and NGOs: support for new initiative, separate experimental intervention, studies, and other relevant activities.

All programs and activities carried out by the relevant ministries will be reflected in the strategic plan and annual operating plan in each relevant sector to ensure adequate resources for implementation.



6. MONITORING AND EVALUATION

6. Monitoring and Evaluation

Monitoring and evaluating ECCD Policies and their National Action Plans helps ensure that they will meet their objectives and achieve expected results. In addition, under the ECCD Policy and NAP, a small number high-priority research projects should be identified and undertaken.

Ministries involving in ECCD shall put in place M&E system or mechanism for ECCD program or services in their respective sector to monitor the progress of each service.

Impact Evaluation

Mid-term and final review will be conducted on the National Action Plan on Early Childhood Care and Development in 2016 and 2018 respectively to assess the impact of the implementation. Mid-term and final evaluation will be contributed by independent evaluation reports. The review will be managed by the National Committee for Early Childhood Care and Development, which will review the justfication related to quality and effectiveness of the programs and strategies to contribute to the implementation of the National Policy on Early Childhood Care and Development.

Monitoring of the Action Plan Implementation

Mid-year and annual stock-taking meetings will be organized from 2014 to 2018 to review progress of the indicators included in each strategy. Relevant ministries will prepare result reports by each strategy and program and submit to the National Committee for Early Childhood Care and Development to take stock and jointly review before the overall progress report is submitted to the Royal Government mid-year and at the end of the year from 2014 to 2018.

Monitoring of the Implementation of Sectoral ECCD Programs

Relevant ministries involving in the implementation of ECCD programs or provision of ECCD services shall put in place an M&E system to assess the impacts of each sectoral program and monitor the implementation of ECCD services at sub-national level and service leve. Sectoral M&E will be linked with monitoring plan, report submission and relevant monitoring forms for the outcomes of each service.

The General Secretariat of the National Committee for Early Childhood Care and Development coordinates M&E mechanisms of each sector and collects outcome reports from all ECCD service providers and sectoral M&E reports and coordinate meetings to review results and implacts of the implementation of the National Action Plan and the National Policy on Early Childhood Care and Development.

In addition, ECCD programmes supported by Development Partners, NGOs, civil organizations and private sector also need be monitored and evaluated by ECCD National Committee. Those interventions may offer innovative and more integrated ECCD models for Cambodia. Experience from those interventions should be duly documented and examined in terms of impact, efficiency in inter-sectoral coordination, cost effectiveness, and scalability, so that the government can determine the best practices for scaling up under its capacity.

Appendix of National Action plan of ECCD

Numerical indicator, target in each year, budget breakdown by program, and setting priority action by relevant sector will be attached in the appendex for result based monitoring performaence and and analysis in annual planning each year by concerned sector.

Monitoring Methodologies	Timeframe	Responsible Person
Mid-term review	2016	NC-ECCD
Final evaluation	2018	NC-ECCD
Progress of sectoral ECCD	2 times per year	GS-ECCD Secotral Technical Coordinating Committees
Progress of the implementation of sectoral ECCD programs or services	4 times per year	GS-ECCD Secotral Technical Coordinating Committees



7. CONCLUSION

7. Conclusion

Within the ECCD NAP, it is critically important that Strategy 1 be given initial emphasis in order to establish rapidly the National Committee for ECCD (NC-ECCD), the National Technical Coordination Committee for ECCD (NT-ECCD), and the General Secretariat for ECCD (GS-ECCD) for NAP Implementation. The GS-ECCD will be instrumental in guiding, coordinating and conducting key ECCD activities.

The National Action Plan on Early Childhood Care and Development focuses mainly on developmental activities that will assist with the future planning of ECCD services. Both the Government and international partners are slated to increase their investments in ECCD, with this first period focusing especially on developmental activities. Developmental activities will emphasise: developing, field testing and ensuring cultural and linguistic appropriateness of educational curricula, materials, manuals, methods and media; designing, piloting and evaluating quality ECCD services; and conducting a few key studies that will support future programme development.

In line with current plans of ministries and international development partners, some on-going services have been selected for improvement and expansion. These services include: preconception education, antenatal health and nutrition care; medically attended births and birth registration; preventive and basic IMCI and C-IMCI services from birth to three years of age; early childhood care and development services for children; State, Community and Home-Based Preschool Education services; child rights and protective services; and sanitation and hygiene services.

During the five years of this first ECCD NAP, a few new ECCD services will be designed to fill gap areas in essential services, including especially:

- Antenatal education services that will complement and extend antenatal health and nutrition services;
- National parenting education package with components in all ECCD areas: health, nutrition, early child development, preschool education, sanitation/hygiene, and child rights and protection.
- Early Childhood Intervention services for children with developmental delays, malnutrition and disabilities combined with parent education.
- Transition activities for children, parents and teachers from home or preschool to primary school at expected entry-level age

These services will be piloted and evaluated with the goal of taking them to scale with nationwide coverage.