State Early Childhood Care and Education (ECCE) Policy

1. Introduction

1.1 Early childhood refers to the formative stage of first six years of life, with well-marked sub stages (conception to birth; birth to three and three years to six years) having age-specific needs, following the life cycle approach. It is the period of most rapid growth and development and is critical for survival. Growing scientific evidence confirms that there are critical stages in the development of the brain during this period which influence the pathways of physical and mental health, and behaviour throughout the life cycle. Deficits during this stage of life have substantive and cumulative adverse impacts on human development.

1.2 Early Childhood Care and Education (ECCE) encompass the inseparable elements of care, health, nutrition, play and early learning within a protective and enabling environment. It is an indispensable foundation for lifelong development and learning, and has lasting impact on early childhood development. It is imperative to accord priority attention to ECCE and invest in it since it is the most cost effective way to break the intergenerational cycle of multiple disadvantages and remove inequity, leading to long term social and economic benefits.

1.3 Punjab has 21,26,595 children in the 0 (Conception)-6 year’s age group (Nov 2019) and the challenges of catering to this important segment of population for ensuring the holistic development of children in the state of Punjab are well acknowledged.

1.4 The State Early Childhood Care and Education (ECCE) Policy reaffirms the commitment of the Government of Punjab to provide integrated services for the holistic development of all children, along the continuum,
from the prenatal period to six years of age. The Policy lays down the way forward for a comprehensive approach towards ensuring sound foundation for survival, growth and development of Child with focus on care and early learning for every child. It recognises the synergistic and interdependent relationship between the health, nutrition psycho-social and emotional needs of the child.

2. Context and Need for the policy

2.1 Social Context

2.1.1 State of Punjab has a tradition of valuing the early years of a child’s life, and a rich heritage of practices for stimulating development and inculcating "sanskaras" or basic values and social skills in children. In the past this was delivered primarily within families, through traditional child caring practices which were commonly shared and passed on from one generation to another. However, there have been changes in the family as well as social context in the past few decades. Besides, there is a globally emerging realisation of the importance of the early years.

2.1.2 Strengthening capabilities of families, communities and services to ensure quality care and education for children in the early years is therefore a priority for Punjab. Discrimination and inequities based on gender, social identity, disability and other exclusionary factors need to be addressed proactively to ensure universal access to integrated services towards fulfilment of right to free, universal pre-primary education. The diversity in social contexts and family structures needs to be appropriately addressed in order to bring balanced parenting, including inputs from fathers, mothers and other caregivers in the family through enabling provisions in programs.
2.2 Policy Context

2.2.1 The Government of India recognised the significance of ECCE, through the amended Article 45 of Indian Constitution which directs that "The State shall endeavour to provide ECCE for all children until they complete the age six years."

2.2.2 The Right of Children to Free and Compulsory Education Act (RTE) which came into effect from April 1, 2010, has also addressed ECCE under section 1.1 of the Act which states, "with a view to prepare children above the age of three years for elementary education and to provide early childhood care and education for all children until they complete the age of six years, the appropriate Government may make necessary arrangement for providing free pre-school education for such children."

2.2.3 ECCE has received attention in the National Policy for Children (1974), consequent to which the Integrated Child Development Services (ICDS) was initiated on a pilot basis in 1975 with the objective of laying the foundation for holistic and integrated development of child and building capabilities of caregivers. In the 11th Plan period, the ICDS programme has been universalised to cover 14 lakh habitations. Reforms are afoot to ensure that universalisation with quality as well as focus on early childhood development is actualised in subsequent plans.

2.2.4 The National Policy on Education (1986) considers ECCE to be a critical input for human development and recognizes the holistic and integrated nature of child development. The Nation Policy (1993) has also recommended interventions for child care and nutrition during early childhood. The National Health Policy (2002) and National Plan of Action for
Children (2005) along with Position paper on ECCE in the National Curriculum Framework (2005) have also been supportive policy initiatives for early childhood. The Five Year Plans have also acknowledged the importance of Early Childhood Care and Education (ECCE) as the stage that lays the foundation for life-long development and the realisation of a child's full potential. The 12th Five Year Plan emphasizes the need to address areas of systemic reform in ECCE across all channels of services in the public, private and voluntary sectors, going beyond ICDS (AWCs).

2.2.5 India is also a signatory to both Convention on the Rights of the Child (CRC) 1989 and Education for All (EFA) 1990 which has postulated ECCE as the very first goal to be achieved for Education For All, since "learning begins at birth." The Dakar Frame for Action (2000) and Moscow Framework for Action (2010) have reaffirmed the commitment to ECCE, and State of Punjab supports such initiatives.

2.3 Programme Context

2.3.1. ECCE services are delivered through public, private and non-governmental service providers.

The public channel is the largest provider of ECCE services, historically through Integrated Child Development Services (ICDS) which is the world's largest programme mandated to provide ECCE. Today the ICDS programme provides services to nearly 80 million children less than six years of age, through a network of 1.4 million approved Anganwadi Centres (AWCs), and in Punjab this count is 8,10,478 Programs for universalizing elementary education such as the Sarva Shiksha Abhiyan (SSA) and National Programme for Education of Girls at Elementary Level (NPEGEL) have also supported
setting up of ECCE centres, attached to primary schools certain districts of the country as a stop gap arrangement till Anganwadi Centres are universalized in the area.

2.3.2. Crèche services are provided both through public schemes and statutory provisions. The Rajiv Gandhi National Crèche Scheme for Working Mothers offers care and education services for children below 6 years of age and figures for 2011-2012 indicate that a total of 23,785 crèches (MWCD Annual Report 2011-12) are operational across the country and 217 in state of Punjab. Statutory crèches services include crèches legally mandated under laws and Acts such as a) The Mines Act (1952) b) Factories (Amendment) Act, 1987 c) Plantation Labour Act, (1951) d) Building and Other Construction Workers (Regulation of Employment and Conditions of Service) Act, 1996 and e) The Mahatma Gandhi National Rural Employment Guarantee Act (2005).

2.3.3 Various other national governmental programs that support quality access to basic services for all, such as National Rural Health Mission, Total Sanitation and Drinking Water Campaign, targeted and conditional schemes like the Janini Suraksha Yojna and the Indira Gandhi Matritva Sahyog Yojna and provisions of maternity benefit that support women’s reproductive health and child care needs as also schemes such as the Integrated Child Protection Schemes (ICPS) are expected to contribute towards an enabling environment for families to care for young children.

2.3.4 The unregulated private channel, both organized and unorganized is perhaps the second largest service provider of ECCE, and its outreach is steadily spreading even into the rural areas across the country although
with varied quality. This channel suffers from issues of inequitable access, uneven quality and growing commercialization.

2.3.5 In the non-governmental channel, there are small scale initiatives which are largely supported by trusts, societies, religious groups or international funding agencies.

2.3.6 There is a need to harmonise the activities of all these service providers, in accordance with service delivery norms, standards and regulations. The primary responsibility for this lies with the Government.

2.3.7 Despite the existence of multiple service providers, there is no reliable date available about the actual number of children attending ECCE provisions and their breakup as per delivery of service/ type of service. Out of the 158.7 million children in the below six years category (Census 2011) about 76.5 million children i.e. 48.2 percent are reported to be covered under the ICDS, (MWCD, 2011). With emphasis on quality in the strengthened and restructured ICDS, this figure is likely to increase further. Broad estimations indicate that a significant number is also covered by the private service providers, besides some limited coverage by the non-governmental service providers for which no reliable date exists.

2.3.8 The quality and coverage of non formal preschool/ early childhood care and education imparted through these multiple service is uneven, and varies from a minimalist approach to accelerated academic programs. This is largely an outcome of inadequate understanding of the concept of ECCE and its basic premises, its philosophy and importance among all stakeholders. This coupled with inadequate institutional capacity in the existing system
and an absence of standards, regulatory norms and mechanisms to ensure quality, has aggravated the problem.

2.4 In the above context, there is a need to ensure Early Childhood Care and Education (ECCE) for every child below six years across the country through appropriate reforms, measures and corrective actions enshrined in the Policy.

3. The Policy

3.1 The State of Punjab’s ECCE policy conforms to the vision of holistic and integrated development of the child, with focus on care and early learning at each sub stage of the developmental continuum, in order to support children’s all-round and holistic development. This is envisaged to be provided by several care providers such as parents, families, communities and other institutional mechanisms like public, private and non-governmental service providers.

3.2 The sub stages with their age specific needs are as follows:

(i) Conceptions to birth - ante and post natal health and nutritional care of mother, maternal counselling, safe childbirth, maternity entitlements, child protection and non-discrimination.

(ii) Birth the three years - survival, safety, protective environment, health care nutrition including infant and young child feeding practices for the first six months, attachment to an adult, opportunity for psycho-social stimulation and early interaction in safe, nurturing and stimulating environments within the home and appropriate child care centres.
(iii) Three to six years - protection from hazards health care, nutrition, attachment to an adult, developmentally appropriate play-based preschool education with a structured and planned school readiness component for 5 to 6 year olds.

3.3 Their age-specific needs are the basis for providing ECCE services in accordance with appropriate technical norms and standards. The various needs in the children will be taken care of by the State ECCE Policy in convergence with related programs and policies of other sectors such as health, nutrition, education etc.

3.4 The policy recognizes that young children are best cared for in their family environment; however in a state of widespread diversity and stratification, many families need supportive measures for the optimal development of the child. The policy thus acknowledges multiple models of ECCE service delivery and would be applicable to all ECCE programs that are offered by public, private and non-governmental service providers in all settings which could go by the nomenclature of AWCs, crèches, play groups, play schools pre-school, nursery schools, kindergartens, preparatory schools, balwadis, home-based care etc.

4. Vision of the policy

4.1 the vision of the policy is to achieve holistic developmental and active learning capacity of all children below 6 years of age by promoting free, universal, inclusive, equitable, joyful and contextualised opportunities for laying foundation and attaining full potential.
It envisages improving pathways for a successful and smooth transition from care and education provided at home to centre based ECCE and thereafter to school-age provision by facilitating an enabling environment through appropriate systems, processes and provision across the country.

In furtherance of the vision of the policy, the government shall be guided by the following objectives:

i. Facilitate comprehensive childcare supports, infrastructure and service aimed at holistic well-being of children and responsive to their developmental needs along the continuum of care from conception to age six.

ii. Universalise and reinforce ECCE and ensure adaptive strategies for inclusion of all children with specific attention to vulnerable children.

iii. Engage capable human resources and build their capacity to enhance and develop quality service for children and their families.

iv. Set out the quality standards and curriculum framework for ECCE provisions and ensure their application and practice through advocacy and enforcement through appropriate institutional arrangements.

v. Raise awareness and create common understanding about the significance of ECCE and promote strong partnerships with communities and families in order to improve the quality of life of young children through institutional and programmatic means and appropriate use of technology as required.
vi. Recognise diversity of contexts, develop and promote culturally appropriate strategies and materials and work within the framework of decentralised governance using participatory and locally responsive approaches.

5. **Key Areas of the Policy**

The Policy focuses on the following key areas to achieve the objectives:

a. Access with equity and inclusion in programs and intervention across service providers

b. Improving quality (minimum specifications, quality standards, regulation, curriculum, play and learning material, programme assessment and child assessment)

c. Strengthening Capacity (institutions, personnel, families and communities)

d. Monitoring and supervision (MIS, State ECCE Council etc.)

e. Research and Documentation

f. Advocacy and awareness generation

g. Convergence and Coordination among policies and programs

h. Institutional and Implementation Arrangements (ECCE Cell, State ECCE Council, Plans of Action)

i. Partnerships

j. Increased investment towards ECCE
5.1 Universal Access with Equity and Inclusion

The Government shall take the following measure to ensure access to ECCE service:

5.1.1 The Government shall provide universal and access to ECCE for all children through a decentralised and contextualised approach.

5.1.2 Access to ECCE will be mainly through ICDS and in convergence with other relevant sectors/ programs in public channel as well as through other service provider’s viz. the private non-governmental. Special plans will be developed to reach the most marginalised and vulnerable groups and hitherto unreached.

5.1.3 The Government shall provide universal access to services for each sub-stage defined in Section 3 that will include health, nutrition, age appropriate care, stimulation and early learning in a protective and enabling environment. Such ECCE centres would be functional as per population norms as prescribed and preferably within 500 meters.

5.1.4 The concept of access to neighbourhood ECCE centre, including provision for admission of children belonging to weaker section and disadvantages group, would be encouraged in private and non-governmental service provision channel also.

5.1.5 No child would be subjected to admission test, written or oral for granting admission to an ECCE centre.
5.1.6 The AWC would be repositioned as a “vibrant child friendly ECD Centre” with adequate infrastructure, financial and human resources for ensuring a continuum of ECCE in a life-cycle approach and attaining child development outcomes.

5.1.7 AWC-cum-crèches with provision of full range of services, including care, planned early stimulation component, health, nutrition and interactive environment for children below 3 years will be developed, piloted and scaled up, if necessary, in response to community needs.

5.1.8 Implementation of Crèches under schemes such as Rajiv Gandhi National Crèches Schemes for the Children of Working Mothers as well as those under statutory laws by respective ministries and sectors (e.g. crèches under MGNREGA Act, Building and Other Construction Workers Act) would also be realigned and improved in accordance with the provisions of this Policy. Other models of crèches responding to the diversity of needs would be supported to work in adherence to the quality standards for ECCE with flexibility to meet the needs of the target population.

5.1.9 To ensure inclusion of all children, measures will be undertaken for early detection and interventions with appropriate adaptations and referrals where necessary, for children at risk of development delays and disabilities. Appropriate linkages with concerned programs/ sectors would be established to facilitate participation of children with special needs in the ECCE programs.

5.1.10 Family/ Community and NGO-based ECCE service delivery model would also be experimented and promoted.
5.1.11 An urban strategy will be developed/ adopted to address the specific unmet needs of children in urban slums and to expand access to all urban settlements/ slums etc. To facilitate this, rules pertaining to area/ town planning may be amended in the 12th Five Year Plan so as to provide space/ provision for neighbourhood ECCE/ Child Development Centres.

5.1.12 Universal access to integrated child development including ECCE for all young children remains the primary responsibility of the government through ICDS. The government may additionally explore supporting the not-for profit non-government and for-profit service providers by supplementing their services as may be deemed necessary and feasible.

5.1.13 Linkages with primary school system will be streamlined to address the issue of continuum and smooth transition from ECCE to primary schooling through school readiness package. For this purpose, in the state of Punjab pre-schooling will be carried with the combined and active involvement of AWWs and teachers, where the time between the two will be divided and continuum maintained in the schooling of the child.

5.2 Ensuring Quality

The Government shall promote developmentally appropriate practices of ECCE through a multi-pronged approach of laying down norms and quality standards; developing curriculum framework; provision of appropriate and adequate play material; conducting programme assessment and child assessment.
5.2.1 To standardise the quality of ECCE available to children, basic Quality Standards and Specifications will be laid down for ECCE which will be enforced across public, private and non-governmental service providers.

The following base standards would be non-negotiable for promoting quality ECCE and shall be made mandatory for all service providers rendering any kind of ECCE service:

- An ECCE programme of 3-4 hours duration
- 1 classroom measuring at least 35 square meters for a group of 30 children and availability of adequate (at least 30 square meters) outdoor space for a group of 30 children
- Adequately trained staff
- Age and developmentally appropriate, child centric curriculum transacted in the mother tongue/ Punjabi language
- Adequate developmentally appropriate toys and learning materials
- A safe building which is within easy approach. It should be clean and should have surrounding green area
- Adequate and safe drinking water facilities
- Adequate and separate child-friendly toilets and hand-wash facilities for girls and boys
- Separate space allocated for cooking nutritionally balanced meals and nap time for children
- Immediate health service in terms of First Aid/ Medical Kit available at the centre
• The adult/caregiver: child ratio of 1:20 for 3-6 years old children and 1:10 for under 3s should be available at the ECCE Centre. Children should not be unattended at any given point of time

5.2.2 A Regulatory Framework for ECCE to ensure basic quality inputs and outcomes, across all service providers undertaking such services or part thereof, will be developed by the State ECCE Council within one year of its establishment, and shall be implemented by state, with appropriate customisation, within three years of the notification of this policy. Such implementation maybe in phased manner moving progressively from registration to accreditation and ultimately to regulation of all ECCE service provisions.

The quality standards would relate inter alia to building and infrastructure; pupil-teacher interaction; learning experiences planned for children; health, nutrition and protection measures; qualification and professional development of staff; parent and community involvement and organisation and management of the ECCE provision.

5.2.3 Age and developmentally appropriate State ECCE Curriculum Framework will be developed within six months of the notification of this Policy. The State ECCE Curriculum Framework will address the interrelated domains of development i.e. physical and motor; language; cognitive; socio-personal; emotional and creative and aesthetic appreciation, through an integrated, play based, experimental and child friendly curriculum for early education and all round development. It would also lay down the implementation details such as principles of programme planning, role of parent and caregiver/ECCE teachers essential play materials and
assessment procedure etc. An enabling and loving environment devoid of corporal punishment will be ensued.

5.2.4 The mother tongue/Punjabi of the child will be the primary language of interaction in the ECCE programs. However, given the young child’s ability at this age to learn many languages, exposure to other languages in the region and English, as required in oral form will be encouraged in a meaningful manner. A multi-lingual strategy will be adopted respecting the children’s language and at the same time using the plasticity of the early years to expose the child to many languages.

5.2.5 The Government shall ensure provision of safe friendly and developmentally appropriate play and learning materials and appropriate play spaces by appropriate instruments and instructions. The Government will promote use of traditional songs, stories, lullabies, folk tales, local toys and games as play and learning material in ECCE settings.

5.2.6 Programme evaluation of all ECCE service provisions will be undertaken by State ECCE Council, adopting consistent assessment criteria and methodologies as per quality norms relating inter alia to building and infrastructure; pupil-teacher interaction; learning experiences planned for children; health, nutrition and protection measures; qualification and professional development of staff; parent and community involvement and organization and management of the ECCE provision including fee related matters.

5.2.7 Formative and continuous child assessment at the ECCE centre in order to ensure that the ECCE program is responsive to the developmental needs of the child.
5.2.8 Modern technology including ICT potential will be optimally and appropriately harnessed to promote developmental and learning needs of children and also for monitoring, evaluation, capacity building and training.

5.3 **Strengthening Capacity**

5.3.1 In view of the huge gap in the availability of trained human resources, the Punjab Government has established in collaboration with Central Government a training institute for early childhood development like National Institute for Public Cooperation and child Development (NIPCCD) at Sector 79 Mohali, and other training institutes like its 7 Anganwadi Workers Training Centers (AWTCs), 1 Middle Level Training Centre (MLTCs) and establishing new ones, wherever necessary, within a stipulated timeframe. Similarly, other institutes like State Council for Educational Research and Training (SCERTs), State Institute for Education Research and Training (SIERTs), District Institute of Education and Training (DIETs), State Institute for Rural Development (SIRDs) and Extension Training Centers etc. would be associated to enhance the available trained manpower. The government will develop quality standards and a regulatory framework for accreditation and recognition of all training institutes.

5.3.2 The sector of ECCE will be professionalized at all levels with qualifications, development pathways, clear role definitions and capacity building specified for various ECCE personal. Capacities of ECCE workers will be strengthened to handle multiage and multilingual context. A comprehensive training and skill development strategy and plan for different levels of ECCE professionals will be pursued by respective service providers for professionalization in the sector.
5.3.3 NIPCCD will be the main Child Development Resource Center to provide continuous support to ECCE personnel (such as helpline; training; counseling centers; capacity development centers; assessment centers and advocacy hubs). In addition, state of Punjab would open own Resource Center at the state and district level.

5.3.4 The policy recognizes that the young children are best cared for in their family environment and thus strengthening family capabilities to care for and protect the child will receive the highest priority. Parents and family members would be informed and educated about good child care practices related to infant and young child feeding practices growth monitoring, stimulation play and early education. Involvement of parents and other community member in the effective functioning of ECCE programs will be encouraged and ensured.

6. Monitoring and Supportive Supervision

6.1 Monitoring and supervision of ECCE programs will be strengthened, based on a systematic Monitoring Framework with disaggregated, tangible and easy-to-measure input, output and outcome indicators specified for ECCE quality. Appropriate authorities and the State ECCE Council along with State Commission for Protection of Child Rights may make necessary arrangements for such monitoring and supervision. Various means of verification such as Management Information System, independent surveys etc. would be adopted.

6.2 A sound system for date collection/generation and information management will be established across the state which will allow for regular collection, compilation and analysis of the data on ECCE. Such data would be
generated on processes, inputs, outputs and outcome indicators through standard, regulation framework and appropriate surveys on outcome indicators. Program monitoring and Management Information System would feed on such data.

6.3 Technology will also be used to enable use of comprehensive mother and child cards covering the full spectrum of service under ECCE for regular monitoring and for accountability to all children. Synergy will be established with ICDS/ NRHM/ SSA data to identify and fill the gaps. Special strategies need to be devised for using the information system to the poorest of the poor.

7. **Research, Evaluation and Documentation**

7.1 Links between Policy Research and Practice will be strengthened. Funds will be allocated for substantive research in the area of early childhood, including longitudinal studies tracking from the earliest years.

7.2 Concurrent and operational research will be promoted to generate indigenous knowledge and to endure a more evidence based approach towards planning, implementation and monitoring of ECCE programs and interventions. Impact evaluation will be made integral to all interventions and action research will be promoted for generating innovative models.

8. **Advocacy**

8.1 A major deterrent to ensuring the right kind of ECCE is the lack of understanding of developmentally appropriate ECCE among the parents and other stakeholders and the widespread belief that child is the responsibility of only the mother. Added to this is the lack of understanding of age-
appropriate needs, developmentally–appropriate interventions and implication of neglect.

8.2 In the order to address the above extensive use of media and interpersonal communication strategies will be made, including folk, print and electronic media, to reach out to parent, caregiver, professionals and the larger community particularly the Panchayti Raj Institutions (PRIs) and the Urban Local Bodies (ULBs). Parents and community outreach programs will be strengthened to enable them to get involved, advocate, and plan, monitor ECCE programs.

9. Convergence and Coordination

9.1 Children’s needs are multi-sectoral in nature and require policies and programs across diverse sectors including education, health, nutrition, water and sanitation, labor and finance. The independently stated policies such as National Policy on Education (1986); National Nutrition Policy (1993); National Health Policy (2002); National Policy for Empowerment of woman (2001); revised National Policy for children (2013); National Policy on AYUSH (2002) etc., programs and other such related instruments, having bearing on ECCE, will be realigned and oriented with the current Policy.

Regulatory, operational and financial convergence between these related policies, schemes and programs will be encouraged and achieved over a stipulated period for optimal utilization of resources.

9.2 Coordination and convergence will be achieved at different levels between policies, programs and schemes of various sectors through
appropriate institutional mechanisms as well as between multiple stakeholders with the active participation of local communities.

9.3 Given that currently a significant number of 5 to 6 year olds are in primary schools in many states, and the Right To Education Act (2010) has the mandate for provision of free and compulsory elementary education from 6-14 years convergence with Ministry of Human Resource Development and State Departments of Education will be of key importance, particularly for the adoption of child centric and play based approaches and extend the school readiness interventions for children of 5 plus years of age. Mechanisms will be instituted to facilitate this convergence so as to ensure continuity and inter linkage of centre based ECCE and school-age provision with specific reference to Section 11 of the Right to Education Act (2010). In the state of Punjab, it will be ensured through the combined efforts of WCD and HRD Departments.

10. Institutional and Implementation Arrangements

10.1 The Nodal Ministry for overseeing the ECCE programs and services will be the Ministry of Women and Child Development (MWCD). All State Governments/ UT Administrations would be advised to make ECCE a subject under Business Allocation Rules of Department of Women and Child Development, as has been made in the Government of India under the Ministry of Women and Child Development.

10.2 The major interventions to implement the main provisions of this Policy will be initiated within one year of the notification of this Policy.
10.3 An ECCE Cell/ Division will be established within Department of Social Security and Women and Child Development for overseeing the implementation of the Plans of Action and act as interface, both at National and State Levels, for the multi-sectoral and inter-agency coordination. The Cell will include technical experts to ensure that quality norms and benchmarks are followed across state.

10.4 The State ECCE Council should have been established within eighteen months of notification of this National ECCE Policy (which was notified in 2013. The State ECCE Council will be the apex body with appropriate professional expertise, autonomy and funded by the MWCD, Government of India, to guide and oversee the implementation of the State ECCE Policy. It would contribute to strengthen the foundation of ECCE Programs in Punjab by establishing a comprehensive ECCE system and developing an integrated framework facilitating and supporting multimodal and multi-component interventions such as modalities of training, developing curriculum framework, setting quality standards and related activities; promoting action research among others. The Council will have representatives from all related Departments/ Ministries, Academic Resource Institutions, NGOs, Civil Society Organizations, professionals and experts, practitioners, academicians, etc.

10.5 The Policy will operate within Punjab’s framework of decentralisation and will therefore include provision for committees at the Community, Block, District and State levels. These committees will be in appropriate harmonisation with ICDS monitoring and mission committees which will
have provision for involvement of community members, mother’s group, local self- government institutions (PRIs, ULBs).

10.6 In recognition of the social and geographical diversity of the State, the policy will allow for flexibility to ensure that services respond to local needs and with locally available resources. The district level administrative units and the Panchyats will be strengthened to provide for more decentralised planning and implementation of ECCE programs. Community based organisations such as Village Education Committee, Mother’s (Parent’s) Committees, Village Resource Groups, and PRIs will be directly involved and their capacities strengthened to participate in and oversee the management of ECCE centres across different service provisions and ensure accountability for quality functioning of services.

10.7 The programme of action for implementation and complementing the State ECCE Policy, State Early Childhood Education Curriculum and Quality Standards for ECCE will be reflected in the State’s Plan of Action in SSA, ICDS, Reproductive Child Health (RCH) of National Rural Health Mission (NRHM), Crèche Programme and Annual Implementation Plans of any other similarly situated programme of national/ state/ local bodies including PRIs across the interlinked areas of health, nutrition, pre-school education and water and sanitation.

10.8 The Government shall create an enabling environment for providing integrated services as per the various facets laid down in the Policy.

10.9 In addition to the Regulatory Framework proposed in Section 5.2.2, the Government shall bring appropriate legislation for promoting integrated and comprehensive child development detailing age appropriate intervention to
address various facets of care, education, survival, protection and development of all children under six years of age assuring the right of the child in early childhood to Integrated Child Development.

11. Partnership

11.1 Resource Groups/ Voluntary Action Groups of expert and professional and higher learning institutions will be identified at regional, state, district and sub-district levels and invited to support government efforts in monitoring, supervision and capacity building for ECCE in a gradual and effective manner.

11.2 To achieve the objective of the policy and support its own efforts, the Government may enter into partnership for specific time bound initiative with multiple stakeholders including community, non-governmental service providers and the private sector service providers while ensuring adherence to specific guidelines and guidelines.

12. Increased Investment towards Early Childhood Care and Education

12.1 Evidence indicates highest rate of return on investments made to improve child well-being in the early years of childhood.

12.2 The Government commits to increase the aggregate spending on quality ECCE interventions.

12.3 Early Childhood (from conception to 6 years) and ECCE budgeting would serve as an important dimension to assess investment in early years. The exercise of disaggregated child budgeting for early childhood may be carried out regularly so as to take stock of investments for children and to
identify gaps in resource investment and utilisation. This would also assess child development outcomes.

13. Review

The implementation of the policy will be reviewed every five years. Periodic appraisals will also be made to assess progress of implementation and make mid-course corrections, if and when required.