Submission to the Department of Social Development on the Children's Act 2007

by the ECD sub-group of the

Campaign on the Right to Education for Children with Disabilities

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This submission is endorsed by the following organizations:

- ✓ Autism Western Cape
- ✓ Centre for Disability Law and Policy, University of the Western Cape
- ✓ Centre for Early Childhood Development
- ✓ Children's Disability Centre
- ✓ Disability Action Research Team (DART)
- ✓ Eli Home
- ✓ Inclusive Education Western Cape
- ✓ National Early Childhood Development Alliance
- ✓ On Spectrum: Educational Consultants in Autism
- ✓ Peter Pan Down Syndrome Centre
- ✓ Pietermaritzburg Cerebral Palsy Association
- ✓ Western Cape Association for Persons with Disabilities

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Introduction

Recent research has found that globally more than 200 million children younger than 5 years from low and middle income countries, are not reaching their developmental potential as a result of poverty, nutritional deficiencies and inadequate learning opportunities.¹ Many children experience risks to their development in addition to poverty and malnutrition, which include physical and developmental disabilities.² Indeed, Walker et al found that 23% of children ages 2-9 had, or were at risk for disabilities. Studies have shown that learning and social integration of children with disabilities are limited by social stigma and parental overprotection.³ Childhood disability has been identified as a marker for compromised development, as well as reduced access to school or health services, and increase risk of caregiver stress and depression.⁴ Moreover, few children with disabilities are receiving adequate services.

International research has found that early childhood is the most effective and cost-efficient time to ensure that all children develop their full potential.⁵ The importance of ECD cannot be over-estimated as the prenatal and postnatal periods are the most critical time in a child's development; they lay the foundation for physical, emotional and intellectual well-being: *'Dietary deficiencies, inadequate feeding practices, chronic infections and low levels of stimulation during this period jeopardise a child's chance to reach his or her full potential and increase the risk that poor health and poverty will follow that child into adulthood.*"

Interventions to enhance mother-child interactions have been found to lead to cognitive and socio-emotional development as well as enhanced attachment.⁷ Interventions can promote better function in children with disabilities, but few have been assessed. Identifying barriers to accessing services is an important priority for children with disabilities. Community-based approaches are an important strategy in this regard.⁸ In addition, parenting interventions and centre-based programmes can improve children's cognitive and social-emotional development and school readiness.⁹

Currently within the South African children's disability sector, serious problems are being experienced around access to funding for partial care and early

¹ Walker, S.; Wachs, T.; Grantham-McGregor, S.; Black, M.; Nelson, C.; Huffman, S. and others (2011). Inequality in early childhood: risk and protective factors for early child development. <u>The Lancet</u> Vol. 378 No. 9799 pp 1325-1338

² Engle, P.; Fernald, L.; Alderman, H.; Behrman, J.; O'Gara, C.; Yousafzai, A. and others (2011). Strategies for reducing inequalities and improving developmental outcomes for young children in low-income and middle-income countries. <u>The Lancet</u> Vol. 378 No. 9799 pp 1339-1353

³ Walker et al

⁴ Walker et al

⁵Engle et al

⁶ Lake, A. (2011). Comment: early childhood development - global action is overdue. <u>The Lancet</u> **Vol. 378** No. 9799 pp 1277-1278.

⁷ Walker et al

⁸ Walker et al

⁹ Engle et al

childhood development (ECD) programmes and services. These include inefficient and bureaucratic application processes (with frequent reports of officials losing application forms and requesting duplicates), long delays and lack of explanation for declining of applications. There is a critical need to streamline application processes, and to improve efficiency within the Department of Social Development (DSD) grant allocation system.

Given the critical role of the Department of Health in promoting maternal and child health and well-being, as well as the role of the Department of Education in ensuring access to schooling, an *integrated approach* to ECD for children with disabilities is essential. All departments need to work in tandem with each other's policies in order to ensure that comprehensive services are provided. For example, the Children's Act defines early childhood development as "the process of... development of children from birth to school-going age", but it is not clear who takes responsibility for children with disabilities *who are over school-going age but are not at school.* Gaps in service provision can only be addressed through inter-sectoral collaboration at all levels.

International research indicates that there are few models of ECD provision for children with disabilities which are potentially scalable. If the right of children with disabilities to inclusive ECD is to be realized, it is critical that resources be invested in the development of examples of good practice that can provide important lessons regarding how the Children's Act can be implemented for children with disabilities.

The following submission is made by the ECD sub-group of the Campaign on the Right to Education for Children with Disabilities. This sub-group comprises of members of civil society organizations working with children with disabilities. The work of this sub-group is based on the recognition that:

- ✓ learning and development start at birth the early years are the most critical time in the child's development.
- ✓ every child has the right to develop to his or her full potential and to contribute fully to society.
- ✓ laying a solid foundation in the early years is essential for successful inclusion as well as progress in education later on.
- ✓ inclusion is a right; children with disabilities need to be catered for within general ECD provision.

The sub-group is working towards promoting

- (1) Inclusive ECD services: These comprise ECD services that target children with disabilities as well as an enabling environment in which disabled children can access ECD services,
- (2) Appropriate training in the ECD sector, such that ECD practitioners are trained to cater for diversity within programmes and services,
- (3) Early identification and intervention for children with disabilities in ECD, and
- (4) Providing support to parents in ECD.

Section number	Section Title	Proposed amendments (in bold)	Reason			
	Partial care Chapter 5					
77	Strategy concerning partial care	(1) The Minister, after consultation with civil society and the Minister of Women, Children and People with Disabilities (2) The MEC for social development must – (b) provide for a provincial strategy to ensure an appropriate spread of inclusive partial care facilities in the province	Parent organizations and disability-related NGOs have an important role to play and need to be consulted in development of the strategy Giving 'due consideration' does not give sufficient detail of how services will be provided for children with disabilities. There needs to be a well thought-through plan and strategy for children with disabilities. (To address assessment, support etc). In order to be in line with the UN Convention on the Rights of Persons with Disabilities, The Act should promote the participation and inclusion of children with disabilities within ordinary (mainstream) ECD Services and Programmes, including Partial Care Facilities.			
		(4) The strategy must be disseminated to all relevant stakeholders in accessible formats	All stakeholders need to know what is being planned and how it is to be implemented.			
78	Provision for partial care	(1) The MEC for social development must	The funding / provision of partial care needs to be obligatory and not an option.			
79	National norms and standards for partial care	(1) The Minister, after consultation with civil society and the Minister of Women, Children and People with Disabilities (2) (I) make provision for children with disabilities who need moderate and low levels of support (3) A partial care facility for children with disabilities or chronic illnesses who need a high level of support must	Parent organizations and disability-related NGOs have an important role to play and need to be consulted in development of the norms and standards. As it stands, Clause (3) suggests that partial care of children with disabilities is separate from partial care for other children. A differentiation should be made between children with disabilities who require a high level of support and those who require moderate to low levels of support. Children who require low and moderate levels of support must be catered for within ordinary Partial Care Facilities.			
82	Consideration of application	(5) the provincial head of social development must assist the owner or manager of a partial care facility financially through conditional registration as required	Where managers of partial care facilities request to be assisted to access funding in order to comply with national norms and standards, as well as with completion of forms or compliance with the requirements for registration, the State must provide this assistance.			

Section number	Section Title	Proposed amendments (in bold)	Reason
Partial care	: Regulations		
12	Types of partial care	The types of partial care listed in the regulations should follow the same format as that used in Form 11. (See comment below on Form 11.)	The incongruence between the types of partial care facilities listed in Section 12 and in Form 11 is confusing.
19	Employment of staff at partial care facilities	(1) (g) the ability to implement an inclusive ECD programme (h) the ability to identify and address barriers to learning experienced by the children with disabilities	In order to facilitate the successful inclusion of children with disabilities, staff need to have an understanding of the rights of children with disabilities and of how to implement an inclusive ECD programme. Staff will also need to be able to identify barriers to learning and development experienced by children with disabilities in order to provide or access the support needed by the child.
		(2) (b) proof of his or her skills and/or experience	Staff may have developed the required skills through experience and not through formal qualifications. For example, a parent of a disabled child may be experienced in assisting the child, but not have formal qualification.

Annexure B Part 1: Norms and standards for partial care			
2	(e) Each partial care centre should have a policy for	Because of the possible risks involved in the delegation	
	administration of medication	of responsibility to a partial care facility of	
		administering medication, it is essential that a clear	
		and well-thought through policy exists. This is vital in	
		order to safeguard children's health. It is important	
		that parents are informed of such a policy and that staff	
		adhere to this policy.	

Form 11	"Educare centre" and "crèche" should be replaced with "ECD centres" All partial care centres are to cater for children with disability who require moderate to low levels of support	The different terminology is confusing and the recommendation is made in the interests of consistency and clarity.
	"A place providing partial care for children with disabilities"	A "place of care" gives the impression that children only need care thereby ignoring the fact that children needing high levels of support can also learn and develop and benefit from stimulation / education programmes.
Form 12	Remove the "educare centre" and "crèche" categories in the table and replace them with "ECD centre"	The different terminology is confusing and the recommendation is made in the interests of consistency and clarity

Section number	Section Title	Proposed amendments (in bold)	Reason
Chapter 6	ECD		
91	Early childhood development	(3) This could include both centre-based and non-centre based programmes.	Parent education programmes, Toy Libraries and other outreach programmes provide important learning opportunities and parental support for many children who do not have regular access to ECD centres. The value of non-centre based services needs to be acknowledged in the Act.
92	Strategy concerning early childhood development	(1) The Minister, after consultation with civil society and the Minister of Women, Children and People with Disabilities aimed at securing a properly resourced, inclusiveearly childhood development system (2) The MEC for social development must	Parent organizations and disability-related NGOs have an important role to play and need to be consulted in development of the strategy. In order to be in line with the UN Convention on the Rights of Persons with Disabilities, the Act should promote the participation and inclusion of children with disabilities within

		 (a) maintain a record of all early childhood development programmes in the province, with specific mention of inclusive programmes (b) provide for a provincial strategy aimed at securing a properly resourced, co-ordinated, managed, monitored and supported inclusive early childhood development system 	ordinary (mainstream) ECD services and programmes. Giving 'due consideration' does not give sufficient detail of how services will be provided for children with disabilities. There needs to be a well thought-through plan and strategy for children with disabilities. (To address assessment, support etc). Monitoring is important in order to ensure and the spread of appropriate and inclusive ECD programmes. It is essential that such processes take an action-oriented approach and support timeous implementation, with clear time frames and budgets for service delivery.
		(4) The strategy must be disseminated to all relevant stakeholders in accessible formats	All stakeholders need to know what is being planned and how it is to be implemented.
93	Provision of early childhood development programmes	(1) The MEC for social development mustprovide and fund early childhood development programmes Clause 4 (b) to be replaced by: (4) The funding of early childhood development programmes must be prioritized - (b) for (i) inclusive ECD programmes (ii) programmes and services providing disability-specific support	The funding / provision of ECD needs to be obligatory and not an option.
94	National norms and standards for early childhood development programmes	(1) The Minister, after consultation with civil society and the Minister of Women, Children and People with Disabilities	Parent organizations and disability-related NGOs have an important role to play and need to be consulted in development of the strategy.
102	Assignment of functions to municipality	(1) The provincial head of social development must assign to the municipal manager if they are satisfied that the municipality complies with the requirements and has the necessary early childhood development expertise.	Municipalities <i>must</i> have responsibility for ECD, and should be obliged to fund ECD services. International research shows that investment in providing early learning opportunities for young children provides long-term economic and social benefits for the country. If the delegation of responsibility for ECD services and

	programmes is made to municipal level, it is critical to
	ensure sustained competency to implement effectively.
(8) The provincial head of social development must	Indicators on inclusion should be used as the basis on
monitor and evaluate the performance of the functions	which to evaluate the extent to which children with
assigned in terms of this section.	disabilities are being included in ECD services.

27		(a) (iii)a minimum of three years experience implementing an early childhood development programme in line with national norms and standards	Adding in an "ECD programme in line with national norms and standards" will mean that the applicant for registration of an early childhood development programme will need to have experience in an inclusive ECD setting and will therefore be more aware and skilled to facilitate the inclusion of children with disabilities.
28	Assessment and compulsory monitoring of early childhood development programmes	(2)The assessment and monitoring must be executed in consultation with a person with experience of inclusion of children with disabilities in early childhood development (3) The assessment and monitoring must be executed by a social service professional with experience in early childhood development, in consultation with a person with experience in inclusion	It is essential that the person responsible for assessment and monitoring ECD programmes has knowledge and expertise re. the inclusion of children with disabilities in order to fulfill this function adequately in an inclusive ECD system.
29	Assignment of functions to municipalities	(3) An agreement between a provincial head of social development and a municipality and signed by both parties and include a monitoring and evaluation plan with regards to early childhood development programmes and services (4) (e) Each municipality must be obliged to spend a certain percentage of their budget on ECD	The provincial head of social development and municipality need to both take responsibility for the monitoring and evaluation of ECD programmes and services. It should be obligatory for municipalities to take some of the responsibility for ECD and that they allocate a part of their budget to ECD

Annexu	ure B Part IV Norms and	standards for early childhood development pro	grammes
1	The provision of appropriate developmental opportunities	(e) be organized in a way that each day children are offered a variety of stimulating and creative activities	Opportunities for development need to be maximized within the ECD setting and therefore activities need to be planned to stimulate learning and creativity of children with disabilities.
2	Programmes helping children to realize their full potential	(c) self discovery, self awareness and self confidence (g) amongst children, enhancing good social skills	As a result of stigma and social isolation, children with disabilities need to be affirmed and encouraged, so that their self-esteem is built up. ECD programmes also provide a huge opportunity for diverse children to learn to socialize with one another.
5		Delete 5 (b) and replace with the following: Practitioners must as far as possible utilize the home language (including Sign Language) of the child as the medium of communication and instruction in the programme	Using the child's home language will help to ensure that each child benefits optimally from the ECD programme and that barriers to learning and development are minimized.

Section	Section Title	Proposed amendments (in bold)	Reason		
number					
Chapt 8 Pr	evention and Early In	tervention			
144	Purposes of prevention	(2) Prevention and early intervention programmes	Ignorance and stigma in relation to disability leaves many		
	and early intervention	may include -	children with disabilities and their families isolated and		
	programmes	(g) Raising awareness of disability and	unsupported in their communities. It is essential that early		
		removing stigma in communities	intervention and prevention programmes address this barrier		
		(h) Promoting the full participation and	to the full and effective participation and inclusion of children		
		inclusion of children with disabilities in their	with disabilities in their communities.		
		communities			
145	Strategy for securing	(1) The Minister, after consultation with civil	Parent organizations and disability-related NGOs have an		
	prevention and early	society and the Minister of Women, Children and	important role to play and need to be consulted in development		
	intervention	People with Disabilities	of the strategy.		
	programmes	(4) The strategy for prevention and intervention			
		must be disseminated to interested persons in	People need to know what is being planned and how it is to be		
		accessible format	implemented.		
146	Provision of prevention	(4) The funding of prevention and early	Families, including primary caregivers, parents and siblings etc,		
	and early intervention	intervention programmes must be prioritized-	are often struggling to handle the challenges/barriers that they		
	programmes	(b) to make prevention and early intervention	come up against in caring for their children with disabilities		
		programmes available to children with disabilities	(e.g. stigma in their local communities and isolation, burnout if		
		and their families.	they are caring for children with high level support needs).		