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**Early Childhood Care and Education**

**Challenges and Possibilities**

**Topic: ECCE Framework & Pedagogy**

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# Abstract

Children are seen as competent social actors in new social studies of childhood and

proponents of which seek for children’s participation in all matters that are of interest to children, and simultaneously and thereafter influence the decision making process that affect them in both explicit and implicit terms. Additionally, the UNCRC in articles 12 and 13 legally provisions for the participation of children to have a say on the issues of their concerns and their views should be taken into consideration. The community based child clubs seem to have emerged to meet this end. Early Childhood represents the most significant and demanding stage in the developmental continuous of an human being. It is the period of remarkable growth with brain development at its peak. The Children are main and are highly influenced by the environment and the people who surrounded them. The programme at the early childhood stage helps to ensure opportunities for holistic learning, growth and a natural. Joyful and stimulating environment, with emphasis on necessary in puts for optimal growth and development.

The ECCE programme needs to be determined by children’s developmental and contextual needs, providing for more need based inputs and an enabling environment given this need for an individualized approach, it was believed that a common

‘curriculum’ would not be appropriate for all. The purpose of this framework is to promote quality and excellence in early childhood care and education by providing guidelines for practices that would promote optimum learning and development of all this age group children.

# Introduction

Early Childhood represents the most significant and demanding stage in the developmental continuous of an human being. It is the period of remarkable growth with brain development at its peak. The Children are main and are highly influenced by the environment and the people who surrounded them. The programme at the early childhood stage helps to ensure opportunities for holistic learning, growth and a natural. Joyful and stimulating environment, with emphasis on necessary in puts for optimal growth and development. The ECCE programme needs to be determined by children’s developmental and contextual needs, providing for more need based inputs and an enabling environment given this need for an individualised approach, it was believed that a common ‘curriculum’ would not be appropriate for all.

To, ensure optimal development for all children, there is a need to create a placed curriculum framework, encompassing developmentally appropriate knowledge, skills healthy and eco friendly environment and other determinates of health with flexibility for contextualization and diverse needs of 0-6 yrs aged children. There are so many ECCE programmes which are running in India, as well as in Bihar which cater to the different needs by which these children develop physically, mentally, cognitively and pedagogically.

The purpose of this framework is to promote quality and excellence in early childhood care and education by providing guidelines for practices that would promote optimum learning and development of all this age group children. ECCE Programme is expected to develop its own framework to meet the needs of its children, their families, the specific salting, the linguistic culture and the local community. This ECCE programme framework is a dynamic document and would be continually revived and evolved in the light of emerging needs.

 **Background / History of ECCE :-**

The concept of ECCE started in early 1800’s. In 1801 Johann Pestalozzi established what is considered to be the first school to teach pre-school age children. The idea came to America during industrial revolution with infant schools set up in churches, factories and private homes to care for the young while parents were working.

In 1837, Children’s Garden (Kindergarter) started in Germany by Friedrich Frobel.Many of Frobel's concepts are used in many of today's ECE’s and kinder garton.During 1854, the nursery school for children of poor women was opened in cooperation with children’s Hospital of New York City.

France was another early starter having integrated pre-school into its education system as early as 1886.

Maria montessori opens the children’s House in Rome in 1907.

The 1990 opened a new page in the history of the development of ECCE mainly by the rapid and successive ratification of the 1989” United Nations Convention on the

Rights of the Child” (CRC).

ECCE was further by the millennium Development goals (MD GD) adopted by the UN Millennium Summition 2000.

**Development of ECCE in Indian context**

India has come out with a comprehensive policy on ECCE in 2013. The Government of India approved the National Early Childhood care and Education Policy.

ECCE is provided to the children in India through MWCS’s centrally sponsored & State administered integrated child Development Services (ICDS) programme.

The 12th Five Year Plan acknowledges the importance of ECE.

Also section 11 of the RTE act 2009 makes provision for being engaged with preschool education. Current scenario of ECCE in India & also for Bihar Subrahmenyam Committee Report ( UBZ F'K{KK UHFR 2016) is valuable for pre school education.

## Concept Behind of ECCE

The earliest formal documentation of pre-school childhood educative, as an organization initiative, dates back to the latter half of the nineteenth century. When Gijubhai Badheka & Tarabai Modak, among others, became the pioneers of this movement influenced by Madame Montessori’s They established preschool education centers in Gujarat. In 1946 Madame Montessori met Mahatma Gandhi, Who asked her to “Indianinze’ her method to make preschool education available to a large majority of children. That was the beginning of “pre basic education’ in the rural parts of the country largely through voluntary effort. Till India’s independence in 1974, voluntary agencies 8 private institutions primarily fulfilled the need for ECCE, particularly in the form of preschool education.

However the concept of Early Childhood Care & Education has been widely accepted. Western thinkers like Rousseau, Froebel, Dewey & Montessori have been pioneers in the movement of early childhood educative Dewey emphasized on the wonderful learning opportunities everyday experiences provided & believed that the child’ own instincts, activities & interests should be the starting point of education. Indian thinkers have also been guided by their observations concerning young children 8 their findings about the children interest in activities wing. Different materials. They were of the view that education must be imparted in the child’s mother tongs & should be connected with the child’s social & Cultural environment the community should be actively involved in the learning process.

Based on the insight & philosophies of these practitioners& thinkers, early, childhood care & education programmes should be based on in understanding of the patterns of development & learning that define the essential nature of childhood.

The aim of Early childhood care & Education is to facilitate optimum development of the child full potential & lay the foundation for all round development & lifelong learning.

## Objective of ECCE

* Ensure each child is valued, respected, feels safe, secure & develops a positive self concept.
* Enable a sound foundation for physical & motor development of each child as per each child’s potential.
* Imbibe good nutrition routines, health habits, hygiene practices &self help skills.
* Enable children for effective communication & foster both receptive & expressive language.
* Promote development & integration of the senses.
* Stimulate intellectual curiosity & develop conceptual understanding of the world around by providing opportunities to explore, investigate & experiment.
* Enhance development of pro-social skills, social competence & emotional well being.
* Develop sense of aesthetic appreciation & stimulate creative learning processes.
* Imbibe culturally & developmentally appropriate behavior & core human values of respect & love for fellow human beings.
* Enable a smooth transition from home to ECCE centre to formal schooling.
* Enhance scope for overall personality development
* The Objective of ECCE is to ensure that children are provided with “ a natural joyful and stimulating environment, with emphasis on necessary inputs for optimal growth and development.”

**(NAC 2011)** • To provide all the necessary care and education to young children that will help their development through physical, cognitive, language, social and emotional growth and change, with few attention to children of disadvantage group, children with specific need and children of ethnic minorities.

* To create a congenial and child friendly atmosphere at home, community, and places of learning so that children benefit fully from care and learning activities.
* Prepare child for formal schooling.
* Reduces costage and stagnation at primary School.

## Early Childhood Care & Education Curriculum Frame Work

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| --- | --- | --- | --- | --- | --- |
| **Age Group**    | **Determinants**    | **Activities for Children**    | **Outcomes**    | **Requisite conditions for development of children**   | **Indicators**    |
| **Prenatal to**  | Maternal health,  | Learn about the world  | Healthy,  | Protection from physical  | Mother not anemic or  |
| **one month**  | nutrition adequacy and  | through all their senses  | responsive  | danger  | underweight  |
|   | quality of care of  | Track people and  | newborn  | Adequate nutrition  | Child weigrit more  |
|   | newborn  | objects with eyes  |   | (through exclusive  | than 2500 grams  |
|   | Safe delivery, family  | Respond to faces and  |   | breastfeeding is best)  | Child moves head side  |
|   | and community support  | bright colours  |   | Adequate health care  | to side on being  |
|   | for the mother and  | Begin to smile  |   | (immunization, oral  | stimulated  |
|   | baby  |   |   | rehydration therapy as  |   |
|   | Environmental  |   |   | required, hygiene)  |   |
|   | hygiene, safe water and  |   |   | An adult who can  |   |
|       | sanitation      |       |       | understand and respond to their signals Things to look at, touch, hear, smell, taste   |       |

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| **One month**  | Nutrition adequacy,  |  Begin to develop a sense  | Freedom from  | Opportunities to explore  | Full immunization by  |
| **to three**  | including exclusive  |  of self  | intermittent  | the world, play with a  | end of year one  |
| **years**  | breast-feeding  | Repeat actions with  | diseases (diarrhea  | variety of objects  | Completion of all  |
|   | Responsive  |  interesting results  | & acute  | Appropriate language  | prophylaxis (e.g.  |
|   | complementary  | Laugh, gargle, imitate  | respiratory  | stimulation  | vitamin A) by end of  |
|   | feeding, quality of  |  sounds  | infection)  | Focus on Health, nutrition  | 3 years  |
|   | mother/caregiver-child  | Explore hands and feet  | Nutritional  | and early psycho social  | Toilet trained  |
|   | interaction  | Put objects in mouth  | security  | stimulation through free  | Ability to  |
|   | Immunization,  | Grasp objects without  | Curiosity.  | play and a lot of adult  | communicate clearly  |
|   | management of  |  using thumb  | sociability  | child interaction.  | and confidently  |
|   | diarrhea and other  | Remember simple events  | Confidence —  | Egs.(infant games.  | Sociability and ability  |
|   | illnesses  | Identify themselves,  | self-help and  | traditional songs &  | to stay away from  |
|   | Health and hygiene  |  body parts, familiar  | sensory motor  | syllables, access to variety  | family for a few  |
|   | practices  |  voices  | skills  | of play materials,  | hours  |
|   | Sensory motor and  | Say first meaningful  |   | individualized adult  | Appropriate height  |
|   | language stimulation  |  Words  |   | attention and interaction,  | and weight for age  |
|   | and opportunities for  |  May seem shy or upset  |   | opportunities to explore,  | Age-appropriate gross  |
|   | play and exploration  |  with strangers  |   | early introduction to  | motor and auditory-  |
|   | Cultural attitudes and  | Imitate adult actions  |   | stories, infant books,  | visual skills  |
|   | stereotypes  | Enjoy stories and  |   | drawings etc.) in safe,  |   |
|   |   |  experimenting with  |   | spacious and clean  |   |
|   |   |  objects  |   | environment  |   |
|   |   | Walk steadily, climb  |   | Play and interact with  |   |
|   |   |  stairs, run  |   | children frequently to  |   |
|   |   | Develop friendships  |   | stimulate their cognitive,  |   |
|   |   | Enjoy learning new  |   | language. social and  |   |
|   |   |  skills  |   | motor development.  |   |

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|   |   |  Learn language rapidly  |   | Calling child by name to  |   |
|   |   | Gain control of hands  |   | develop self-identity.  |   |
|   |   |  and fingers Are easily  |   | Respond to the child's  |   |
|   |   |  frustrated  |   | nutritional requirements.  |   |
|   |   |  Act more independent,  |   | Introduction of  |   |
|                    |                    |  but are still dependent                   |                    | supplementary foods A safe environment to explore Developing self- confidence through providing enough opportunities to explore, touch, taste, smell and respond to the environment. Regular and constant positive interaction with children to promote development of language, imagination, manipulation, concepts with activities like clapping, pee, -a-boo, push and pull toys, rolling hands, reading picture bet; singing lullabies and rhymes etc. Opportunities to hear stories, be read to Establishing bonding and warm relationship with children and building trust  |                    |

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|          |  |  |  | by giving lots of love, care and affection al- praising child's achievements Health care must also include deworming if required A chance to develop some independence Provide opportunities to establish contact and engage with other children and adults to promote a sense of self and social development Naming body parts and other common objects in and around child's environment. Provide opportunity to make choices and engage in different tasks Giving opportunities to learn, think and understand from concrete to abstract. Opportunities to listen and articulate short stories and rhymes , indulge in imaginative play and simple problem solving activities  |  |

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| **Three to**  |  Quality early  |  Have a longer attention  |  Interest in  | Opportunities to develop fine  |  Active participation  |
| **six years**  |  childhood care and  |  span  |  learning &  | motor skills  |  in early childhood  |
|   |  education.  | Talk a lot, ask many  |  school  | Opportunities to children to  |  care and education  |
|   | Basic healthcare  |  questions  |  readiness  | dress themselves, use toilets,  |  activities.  |
|   |  services including  | Want real adult things  |  skills  | wash hands, brush teeth, comb  | Ability to narrate  |
|   |  disability screening  |  Reveal feeling in  |  (language.  | hair etc.  |  experience  |
|   | Nutrition adequacy  |  dramatic play  |  numeracy &  | Naming body parts and other  |  confidently  |
|   |  and incidence of  | Like to play with  |  psychosocial  | common objects in and around  | Demonstration of  |
|   |  intermittent diseases  |  friends, do not like to-  |  skills)  | child's environment  |  curiosity  |
|   |  Literacy level of  |  lose  | Activeness,  | Giving opportunities to learn,  |  Age-appropriate self-  |
|   |  parents, educational  | Share and take turns  |  self-  | think and understand from  |  help & social skills  |
|   |  environment at home  |  sometimes  |  confidence,  | concrete to abstract.  | Age-appropriate  |
|   |   |  Naturally curious, and  |  awareness of  | Encouragement of language  |  height & weight  |
|   |   |  have an incredible  |  environment  | through listening to music,  | Regular preschool  |
|   |   |  capacity and desire to  | Freedom  | talking, reading, singing  |  attendance  |
|   |   |  learn.  |  from  | Opportunities to,11iten to  |   |
|   |   |  Explore and experiment  |  intermittent  | stories, learn rhymes, indulge  |   |
|   |   |  through their senses as  |  diseases,  | in imaginative play etc.  |   |
|   |   |  they discover the world  |  nutritional  | Emergent literacy activities  |   |
|   |   |  around them  |  security  | like phonological awareness.  |   |
|   |   | Test physical skills and  | Management  | Experimentation with pre-  |   |
|   |   |  courage with caution  |  of any  | writing and pre-reading skills  |   |
|   |   | Become independent  |  identified  | Opportunities for self-  |   |
|   |   |  and gain more self  |  disability  | expression (drawing, painting,  |   |
|   |   |  control  |   | work with clay or mud),  |   |
|   |   | Children's whose growth  |   | encouraging creativity  |   |
|   |   |  is faltering, at any age  |   | Encouragement to develop  |   |

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|   |  | Child does not respond to stimulation and attention  |  | self-control, cooperation, persistence in completing projects Early identification of impairments/disabilities and initiating medical intervention and parent counselling and parent training to provide - necessary stimulation is necessary for supporting children with disabilities and developmental delay Early identification of impairments/disabilities and Initiating medical intervention and parent counselling. Reading Readiness: e.g. picture —sound matching, shapes, phonetics; increasing vocabulary verbal expression etc. Writing Readiness: e.g. eye hand coordination, interest in writing, left to right directionality Math: Develop skills in sorting and classification according to one or two attributes, seriation, pattern identification/ pattern making , reasoning, problem solving etc.  |  |

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|       |  |  |  | Physical and Motor development : Build body awareness, strength and coordination through locomotors activities like running, walking etc. stability activities like jumping, beam balance walking etc. Creativity and aesthetic appreciation: Use imagination and creativity to design and perform music and dance. Social Emotional- Positive self identity, confidence and independence, manage own feelings and needs. Caregivers who know when to seek help and how to provide a caring and loving environment. Extra time from caregivers, playing and talking, and massaging the child's body. Encouragement to play and interact with other children.  |  |

***CONCLUSION***

Early childhood development is crucial to how a person develops later on in life. This development is dependent on and responsive to experience allowing children to grow far more quickly in domains in which a rich experiential base and guided exposure to complex thinking are available.

Early childhood care and education is more than

preparation for primary school. It has the possibility to nature caring, capable and responsible future citizens. While no single curriculum or pedagogical approach can be identified as best ,children who attend well planned ,high quality early childhood programs in which curriculum aims are specified and integrated across domains tend to learn more and are better prepared to master the complex demands of formal school.

In this way ECCE is one of the best investments a country

can make to promote human resource development, gender equality and social cohesion and to reduce the costs for later remedial programme.

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