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► Investments in childcare for gender equality in Asia and the Pacific



- ▶ **Investments in childcare for gender equality in Asia and the Pacific**

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Preface

Caring for children is a vital responsibility of every society. As enshrined in the United Nations Convention on the Rights of the Child, each child has the right to thrive, learn and develop. More often than not, caring for children falls on the shoulders of women, with limited recognition or reward for an activity predominantly perceived as “a woman’s job”.

The current organization of care, which tends to rely on women as unpaid caregivers, is not conducive for women's empowerment, women’s economic justice, gender equality or sustainable development. Various studies show that unpaid care work, such as childcare, poses a major challenge for women. According to the International Labour Organization (ILO 2019), low investments in care policies have resulted in penalties for caregivers, especially mothers, in terms of employment participation, earnings and professional mobility, and have also contributed to deep-rooted forms of inequality in the labour market and society. In Asia and the Pacific, the complex challenges of childcare are acute. Women work the longest hours in the world when their paid and unpaid work are combined; it is also the only region with a declining regional female labour force participation rate.

Promoting affordable, accessible, quality childcare services and facilities, supported by childcare workers enjoying decent work, is key to building the cognitive, interpersonal and developmental skills of children, while allowing parents, particularly women, to pursue other economic opportunities. It will also expand decent employment opportunities for women and men, contributing to changing gender stereotypes related to childcare. Across Asia and the Pacific, the provision of childcare remains patchy, with access, affordability and quality being key concerns, especially for low-income households. Ensuring decent work for childcare workers is a particular challenge.

Investing in childcare contributes to job creation as well as multiple development outcomes for both children and women. It also supports the Sustainable Development Goals (SDGs) in the Asia-Pacific region, particularly SDG 5 on gender equality.

This report aims to provide policymakers, development partners, researchers and civil society organizations with an in-depth analysis of the policy and institutional frameworks for childcare for children aged 0–6 years old. It also includes case studies that reflect the voices of parents, childcare providers and childcare workers. These voices offer invaluable insights into the need for childcare services and broader cultural perceptions of care work in the Asia-Pacific region.

This report is the result of collaborative research undertaken jointly by the Asian Development Bank (ADB), the International Labour Organization (ILO), the United Nations Development Programme (UNDP), and the United Nations Research Institute for Social Development (UNRISD), with a view to presenting evidence-based policy recommendations.

Moving forward, we stand committed to working with governments and other stakeholders to enhance and accelerate the provision of affordable, accessible and quality childcare for the advancement of children’s welfare, gender equality and decent work opportunities for all.



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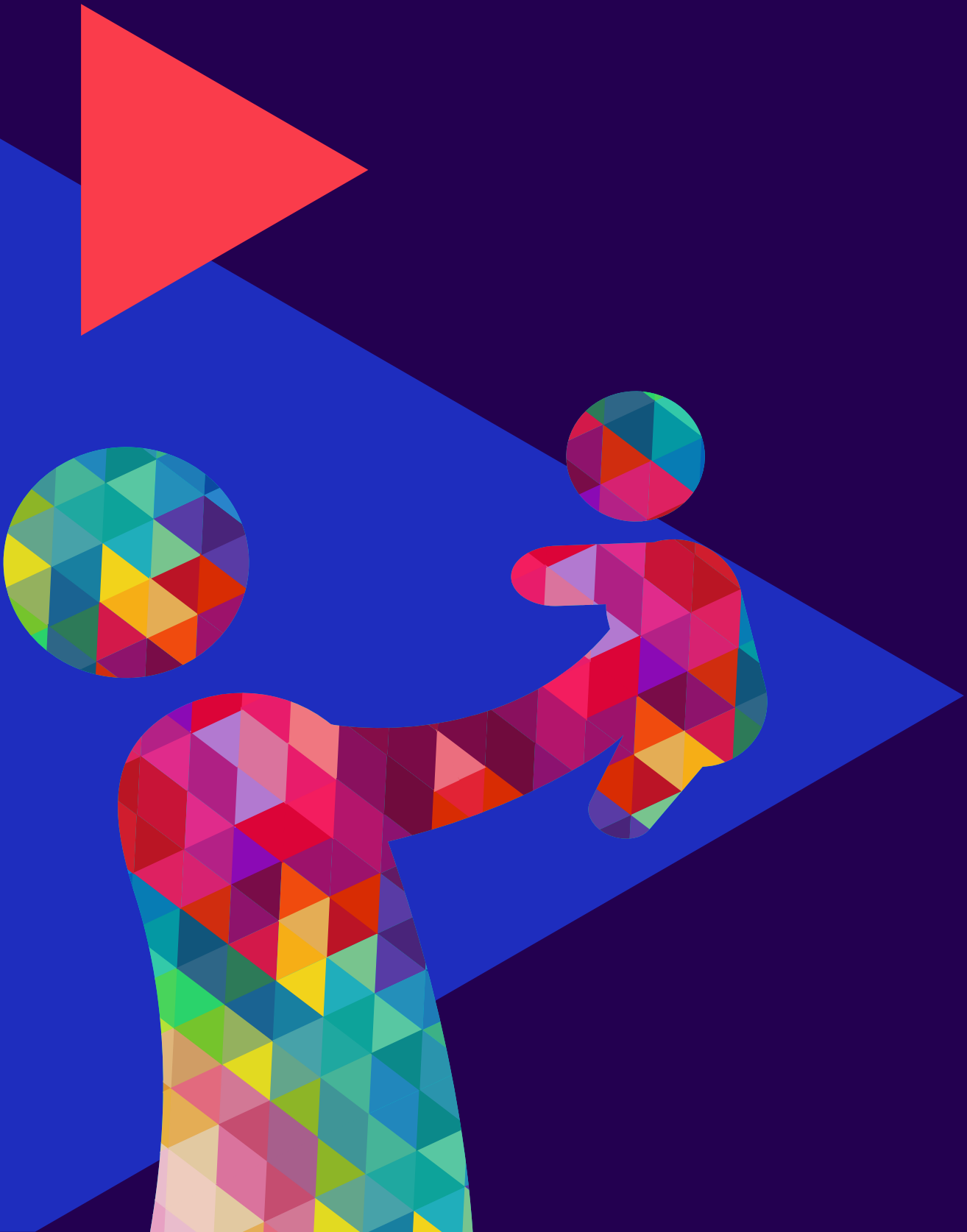
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Acronyms and abbreviations

5R	recognize, reduce and redistribute care, and represent and reward care workers
AAQDW	accessibility, affordability, quality and decent work
ADB	Asian Development Bank
ASEAN	Association of Southeast Asian Nations
CDA	Child Development Account
COFACE	Compagnie Française d'Assurance pour le Commerce Extérieur
CCS	Child Care Subsidy
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
ECCD	early childhood care and development
ECCE	early childhood care and education
ECDA	Early Childhood Development Agency
EFA	Education for All
EU	European Union
GDP	gross domestic product
ILO	International Labour Organization
ICDS	Integrated Child Development Services Scheme
IDS	Institute of Development Studies
IFC	International Finance Cooperation
Lao PDR	Lao People's Democratic Republic
LGU	local government unit
LNOB	leave no one behind
NGO	non-governmental organization
NQS	National Quality Standards
OECD	Organisation for Economic Co-operation and Development
PRC4ECCE	Pacific Regional Council for Early Childhood Care and Education

SABER	Systems Approach for Better Education Results
SEWA	Self Employed Women’s Association
SDG	Sustainable Development Goal
SPARK	Singapore Preschool Accreditation Framework
TPA	<i>Taman Penitipan Anak</i> (Indonesia)
TAS	<i>Taman Anak Sejahtera</i> (Indonesia)
UN	United Nations
UNDP	United Nations Development Programme
UNICEF	United Nations Children’s Fund
UNRISD	United Nations Research Institute for Social Development
WASH	water, sanitation and hygiene
WIEGO	Women in Informal Employment Globalizing and Organizing
WHO	World Health Organization

Executive summary



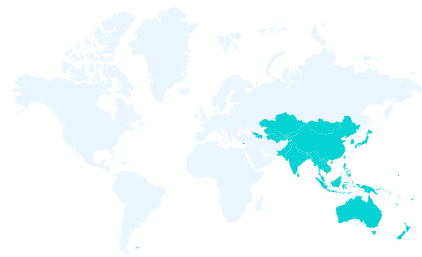
Executive summary

► About the study

This is a study on the public provision of childcare across 48 economies in Asia and the Pacific through the lens of accessibility, affordability, quality, and decent work for childcare workers. Based on its findings, the study offers recommendations for increased investments in the childcare sector to **enable better socio-economic outcomes for women and children, job generation, and decent work for childcare workers, as well as to support a transformative recovery from the COVID-19 pandemic that advances gender equality and sustainable development.**

Across Asia and the Pacific, the labour of caring for children between 0 and 6 years old falls disproportionately on women in their capacity as mothers (ADB and UN Women 2018). This gendered division of childcare affects women's ability to participate in social, economic and political domains of public life, impeding progress towards gender equality and especially women's economic empowerment through labour force participation.¹

While the family, and particularly mothers, remain the primary actors in the provision of early childcare, each economy's childcare sector comprises a mix of services provided by the State, the private sector, and community-based and religious organizations or the social and solidarity economy. The labour force in the childcare sector is also dominated by women, especially those affected by multiple and intersecting forms of discrimination and socio-economic disadvantage. Jobs in this sector are often marked by poor and precarious working conditions, including low pay, low prospects for career progression, and a lack of social and economic protections (McDonald et al. 2018).



This study examines the public provision of childcare for children between 0 and 6 years old across 48 economies in Asia and the Pacific

¹ While children's well-being and development is also a crucial outcome of investments in the childcare sector, the focus of this study is caregivers' gender equality outcomes and decent work conditions for childcare workers, as discussed in section 1.

Thus, investments in the childcare sector have emerged as a key policy priority for governments not only to ensure holistic child development, but also to support women’s economic participation – both in terms of freeing up women’s time for economic engagement, as well as to generate jobs in the care economy² and enhance the working conditions of workers in the highly feminized childcare sector (ILO 2018).

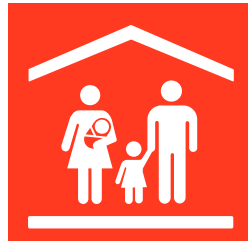
Against this backdrop, **investments in the childcare sector offer an opportunity to simultaneously progress towards several objectives of the 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs)**. Investments in the public provision of childcare can advance SDG 5 on gender equality – particularly SDG target 5.4 on recognizing and valuing women’s unpaid care work – by (i) freeing up mothers’ time to facilitate women’s greater social, political and, especially, economic participation, and (ii) generating employment opportunities for women in the childcare sector.

Emphasizing decent work conditions in the sector will also enable policymakers to realize SDG 8 on decent work and economic growth, specifically SDG target 8.5 which seeks full and productive employment and decent work for all women and men, and includes an emphasis on *“equal pay for work of equal value”*. In addition, early childhood care and development is a critical starting point to proceed towards the aims of SDG 3 on good health and well-being for all people, of all ages. The childcare sector is equally central to SDG 4 on quality education, especially SDG target 4.2 that aims to *“ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.”*

To assess the nature of the childcare and the early childhood education sector catering to children between 0 and 6 years old, this study maps out key actors, national policy landscapes and regulatory frameworks, before focusing on the experiences and needs of, and the challenges faced by, both the users of childcare services, and childcare workers. In this way, it identifies key strengths, opportunities, gaps and challenges in the sector.



TARGET 5.4



VALUE UNPAID CARE AND PROMOTE SHARED DOMESTIC RESPONSIBILITIES

TARGET 8.5



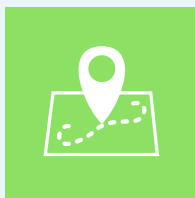
FULL EMPLOYMENT AND DECENT WORK WITH EQUAL PAY

² Throughout the study, the ‘care economy’ refers to the provision of goods and services that enable and support the physical, emotional and social well-being of individuals and communities. It includes both paid and unpaid work that is essential for the reproduction and maintenance of human life, such as healthcare, education, childcare, eldercare, domestic work and community services.

The assessment of the childcare sector in Asia and the Pacific is conducted against four key principles – accessibility, affordability, quality, and decent work conditions for childcare workers (AAQDW), identified from the literature (ADB and UN Women 2018; COFACE 2018; ILO 2018; Women’s Budget Group 2020; World Bank 2022a).

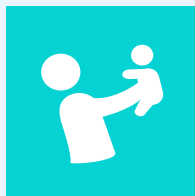
FIGURE A

Scope, focus and approach of the study



WHERE

- ▶ Across 48 economies in Asia and the Pacific
- ▶ Includes detailed case studies on Georgia, Indonesia, Lao People’s Democratic Republic, Mongolia, Nepal, the Philippines, and Sri Lanka



WHO

- ▶ Prioritizes the perspectives and needs of:
 - ✔ Childcare users (especially mothers, but also fathers and other family members)
 - ✔ Childcare workers (including educational staff, support staff, supervisors, and managers of centres, etc.)



WHAT

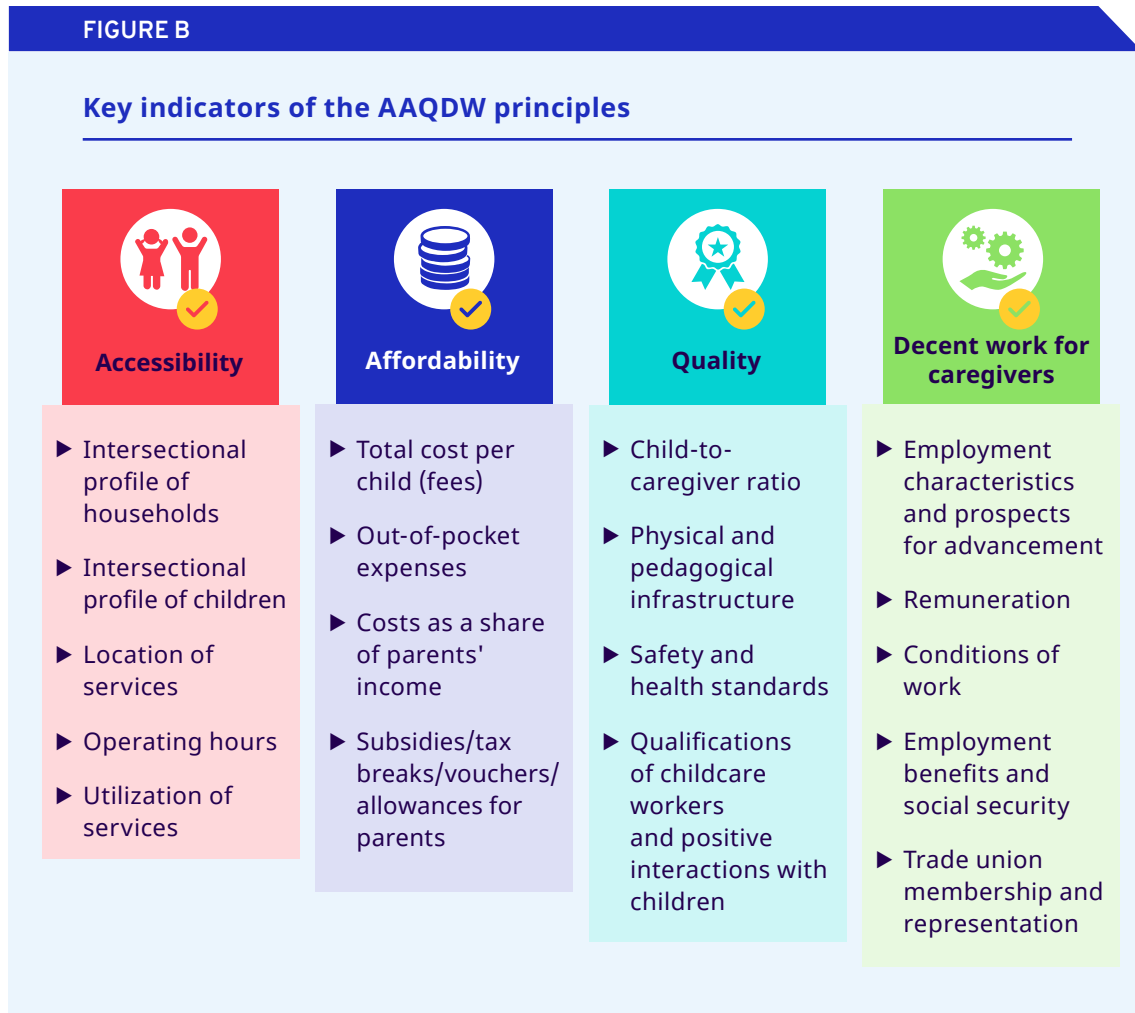
- ▶ Focuses on public (state-provided) childcare for children between the ages of 0 and 6 years old
- ▶ Where state provision is absent or insufficient, the study looks at other forms of childcare provision (e.g. employer-run, privately-run, and NGO-run, etc.)



HOW

- ▶ Conducts a gendered political economy analysis of the childcare sector
- ▶ Evaluates the childcare sector on the basis of 4 key principles (AAQDW):
 - ✔ Accessibility
 - ✔ Affordability
 - ✔ Quality
 - ✔ Decent work

Key indicators³ under each of these principles were applied to each economy's context to evaluate the outcomes of, and gaps in, current investments in the childcare sector.



► Key findings

This study's main findings across the parameters of AAQDW are summarized below, with a focus on key gaps and challenges. These findings inform the study's policy recommendations for investments in the childcare sector, highlighted below.

³ Details of each indicator and how it is operationalized are provided in section 2.2.

FIGURE C

Key findings of the study



Accessibility

- ▶ **There is a lack of the statutory right to childcare** and, consequently, an **absence of childcare systems**.
- ▶ **Children aged 0–2 are the most under-served**, with mothers forced to exit the workforce to care for this age group. Low-income rural households are worst affected.
- ▶ **Children with disabilities** have particularly compromised access to childcare.
- ▶ **Socio-economic inequalities and the rural-urban divide** are key determinants of childcare accessibility. Caste and language form another axis of exclusion.
- ▶ A **lack of transport** to childcare centres and the **lack of flexibility in hours** of service are key factors that hinder access and increase the drudgery associated with using childcare services.



Affordability

- ▶ Even where subsidies exist, **high out-of-pocket costs** remain (e.g. for transport, books and materials, meals, and enrolment fees), which are being **driven up further** by the rising cost of living. This poses a significant challenge to parents seeking childcare and often deters mothers in particular from entering the workforce.
- ▶ Although resources exist for both childcare providers and users, access is hampered by **challenges to navigating the highly fragmented and multi-layered childcare funding landscape**, compounded by a lack of **awareness** about these provisions.



Quality

- ▶ Even where standards do exist, there are **gaps in terms of monitoring and enforcing these standards**.
- ▶ There is a **mismatch between qualification requirements and role-specific, practice-based learning and training** in competencies crucial for childcare.
- ▶ Parents place a significant **emphasis on carers' 'intangible' qualities**, which determines **parental trust** and the likelihood of **children's enrolment**.

FIGURE C

Key findings of the study (continued)



- The childcare sector remains **highly feminized**.
- In non-OECD countries, **wages are well below average and often below the poverty level**.
- Childcare workers have low levels of job security, employment benefits, and social protection. It is crucial to **recognize care workers' own household care responsibilities** (especially given the sector's feminization) to ensure decent work.
- The sector is marked by **low overall levels of collectivization**, bargaining power and voice.



Accessibility

Access to childcare services varies substantially across economies and subregions, and is mediated by a number of factors. These include the location and demographic profile of households (understood intersectionally on the basis of income, class, caste, race, ethnicity, the mother's education, and geographical location), the age, sex and disability status of the child, and various supply side factors, including the location of childcare centres, their hours of operation, their ability to cater to special needs, and their ability to cater to younger age groups.

A key finding of this study is that many disparities in access are created on account of the **socio-economic status of households** and the **rural-urban divide**. **Low-income, rural households are the worst affected**. Enrolment in rural areas is also hindered by parents' lack of awareness, both on the importance of childcare, as well as the availability of options and how to access them.

The **rural-urban divide in the availability of early childhood care and development (ECCD) services** is evident not only in low- and middle-income countries, but also in developed, advanced economies. Recent research notes the existence of 'childcare deserts', defined as areas where childcare is most scarce. For instance, areas in outer regional Australia have very high number of childcare deserts, where between 61.3 per cent to 85.5 per cent of children do not have access to childcare (Hurley et al. 2022).

In contrast, the challenge in urban centres in Japan and Georgia, for example, concerns securing a place in highly over-subscribed, densely populated cities, where the supply of childcare is unable to keep up with demand.

Caste and language form another axis of exclusion. This can and has been addressed in some cases, such as in Nepal, where the persistence of caste-based exclusion has been partially abated through the provision of scholarships for *Dalit* children at childcare centres, thereby effecting a positive change on access and enrolment.

Another key finding of the study is that children between the ages of 0 and 2 are particularly underserved, with very few centres able to cater to infants' and toddlers' specific needs. While some countries have universal systems for 3–5-year-olds, indicating that costs are borne by the State, **none of the economies studied have a universal or free childcare system for 0–2-year-olds.** This forces mothers out of the job market for a minimum period of two years, often at a particularly crucial (and early) stage of their career progression.

Additionally, primary research indicates that **children with disabilities have particularly compromised access to childcare.** The lack of facilities catering to children with disabilities, and of infrastructure and trained staff to support these children, are the main causes for low access and enrolment. Where specialized centres catering to students with disabilities do exist, the location of, and transport to, these facilities pose an additional challenge, especially for children with mobility-related disabilities.

More broadly, **transport to and from childcare centres, as well as their hours of operation, remain a major challenge for parents.** This is particularly acute in rural contexts where parents and families need to travel longer distances to access childcare, as well as in urban contexts due to the lack of safe, suitable public transport for young children. Even where childcare centres exist, the drudgery associated with transporting children to and from these centres remains considerable, and often falls to mothers.

Finally, respondents across all national contexts express a strong **preference for childcare centres with flexible timings.** They raise concerns about the limited availability of centres with flexible timings, especially in the face of contemporary working hours which stretch beyond the 9 a.m.–5 p.m. window. Childcare workers similarly express a preference for flexible working arrangements with adequate compensation for overtime, noting that they often have to engage in uncompensated overtime waiting for parents or guardians to pick up their children, usually beyond the formal operating hours of childcare centres.



Affordability

The costs associated with availing childcare services are a key determinant of uptake and enrolment. This study finds that the high costs

of childcare are a contributing factor to inequalities of access and childcare use across income groups. Childcare costs borne by families can also disincentivize and weaken employment for parents, especially mothers. There are a number of financial and non-financial incentives and forms of support that governments offer to both childcare users, as well as to service providers to make services affordable. These include providing a certain number of hours of use for free, a certain percentage subsidy on fees, wholly subsidized fees, and free universal access, among other examples. Preferential tax policies to facilitate the provision of childcare services by private providers and employers, as well as childcare allowances or vouchers, are other financing mechanisms prevalent within the childcare sector. For example, the Income Tax Act in Malaysia offers parents an annual personal tax deduction for childcare fees paid to registered centres (World Bank 2022a).

While it varies substantially across economies, overall, **public expenditure on childcare in Asia and the Pacific could be improved.**⁴ Even where some forms of public provisioning exist – either in terms of providing support to parents or directly to childcare centres – challenges persist. Key among these is the **highly fragmented nature of the funding landscape** across all economies in the region. Funding is often provided across a range of programmes and schemes, and is monitored and implemented by different government agencies across the local, provincial and national levels. According to this study's respondents, both childcare users and workers, this makes navigating the landscape and accessing funds particularly challenging for parents and childcare centres. The lack of central coordinating body in each economy makes it administratively challenging to drive a unified approach to funding childcare from a holistic perspective, and to facilitate access to, and keep track of, different pools of funds for different functions.

Moreover, some areas of childcare often fall through the cracks and remain unfunded, such as transport, clothing, routine operating costs for centres like electricity and water, among others. The absence of a holistic, integrated approach to childcare has been exacerbated by the COVID-19 pandemic, where resources have been redirected to emergency response and are yet to return to pre-pandemic levels.

Additionally, in order for childcare service providers to access public funds, there are often **costly or onerous requirements for accreditation.** This study's respondents find that these requirements do not necessarily match on-the-ground needs or requirements to provide quality care (see the next section on the mismatch between standards and real needs).

⁴ See section 5.1 for details on state expenditure on children between 0 and 6 years old across economies as a percentage of their total budget, and as a percentage of the education budget.

Parents across economies incur high costs for childcare, often even when some subsidy or fee-waivers exist, as they have to bear a range of out-of-pocket expenses on clothing, nutrition, transport, learning materials and hygiene products, among others.



Quality

This study finds that the **perceived quality of childcare is a key factor in determining parents' willingness to enrol children in childcare centres**, making attentiveness to questions of quality crucial for increasing the uptake of childcare and freeing up mothers' time. Notably, respondent interviews indicate that the qualities parents value most in childcare workers have less to do with their formal qualifications and more to do with 'intangibles' – such as being loving, caring, patient, dedicated, trustworthy and gentle (see this study's national report on the Philippines). Therefore, while childcare workers' level of qualification is of significance for childcare quality, a seldom discussed element which disproportionately affects parent's perceptions of quality and their willingness to enrol their children is this broader set of normative associations with a 'good' care worker.

Across Asia and the Pacific, there are varying levels of standards and frameworks in place to regulate the quality of childcare. These fall under two broad categories: (i) infrastructure, including the provision of basic physical and pedagogical infrastructure, standards for safety and nutrition, pedagogical frameworks and curricula, and caregiver-to-child ratios, and (ii) minimum qualifications, certification and training requirements for childcare workers. For instance, the Child Day Care Centre Act of 2021 in Bangladesh will regulate all childcare providers along various parameters for quality, and will also solicit feedback from parents every six months. Another promising practice comes from Singapore, where the Singapore Preschool Accreditation Framework (SPARK) monitors quality and ensures a favourable childcare worker-to-child ratio of 1:5 for children between 2 and 18 months old.

However, across Asia and the Pacific, key gaps remain in terms of upholding minimum infrastructure and care delivery standards. Much of this is due to **inadequate systems for monitoring and enforcing standards where they do exist**. While several countries have frameworks in place, especially in terms of physical and pedagogical infrastructure, childcare centres are not able to meet these standards consistently, largely due to budgetary constraints (see section 6.1 for details).

While most economies in the region have minimum educational requirements for teachers and support staff at childcare centres, as well as some training requirements – especially for those in educational/pedagogic roles – these **standards are often not adhered to**. This is due to a lack of qualified staff or the high costs associated with employing qualified workers, coupled with poor monitoring and enforcement.

Importantly, not only are these standards often unmet, there is also a **mismatch between what the standards or guidelines demand, and what is understood by those within the childcare sector as important qualifications** required to actually ensure quality childcare. For instance, where regulations demand that teachers have at least a bachelor's degree, attention is rarely paid to whether the degree is in any way substantively related to childcare or equips graduates with the technical and soft competencies required to undertake childcare roles. Even where childcare workers have degrees that are specifically related to education, they are not often expressly trained to meet the needs of young children within the 0–6-year-old age range. Childcare workers themselves express concerns over the inadequacies of these requirements and point to the absence of opportunities to access specialized training that would enhance the quality of their childcare service delivery, while better equipping them for career advancement.



Decent work

Childcare for children between the ages of 0 and 6 years old is a **highly feminized sector across Asia and the Pacific**. In all seven economies where primary research was conducted for this study, most childcare workers are women, with few male employees in care centres, on occasion in supervisory or managerial roles. Based on interview responses, the feminization of the sector is largely based on dominant social norms around caring, and especially childcare, as being women's roles. In Indonesia, for instance, norms based on *kodrat* (or a biological state of being) dictate that, because women bear children, deliver them and breastfeed them, it is only natural that the responsibility for early childhood care also rests with women.

In most of Asia and the Pacific, with the exception of Australia, Japan and the Republic of Korea, **childcare workers across levels are paid below standards for their level of qualification and, on occasion, are paid below national minimum wage guarantees or even below the poverty line**. Low wages associated with childcare are both a result of, and reinforce, the devaluation of care. This leaves care workers with a low social status, leading to disengagement with their work and affecting the quality of care. For instance, care workers in India are not even paid wages; instead, they receive an 'honorarium' because they are considered volunteers as part of the Government's National Rural Health Mission and Integrated Childhood Development Services schemes. As volunteers, they do not benefit from the pay scales and social security benefits available to other cadres of public sector employees.

Beyond low wages and low social status, major challenges confronting the childcare sector include a **lack of labour protections, employment benefits, employment security and social security**.

Employment structures in the childcare sector in Southeast Asia, for example, often involve part-time and even voluntary work for considerable periods before workers are able to secure permanent paid positions, leaving a large section of the childcare workforce both informal and without protection. In Lao People's Democratic Republic (Lao PDR), apprenticeships are required for three months in the form of unpaid internships. After this, 95 per cent of a worker's salary is paid over one year, after which apprentices are evaluated as full-time employees and receive 100 per cent of their salary. However, apprenticeships are not properly enforced in all cases, especially among contracted and volunteer teachers. Many volunteer teachers have internship periods of longer than one year, with few chances of securing permanent employment. Many resign due to the long waiting periods before they are made permanent employees. Finally, **precarious working conditions – in terms of safety, job security, decent working time and overtime** – exacerbate the difficulties faced by workers in the childcare sector.

Another key finding from the primary data collected on childcare workers' conditions of work is that there are concerns about **accommodating childcare workers' own household and care responsibilities**. Respondents who took part in this study report that a key motivation for caregivers to take up roles in the childcare sector – despite the low wages, precarious conditions and low social value accorded to these roles – is that it allows them cheap access to childcare themselves. Given the highly feminized nature of the childcare sector, as well as of home-based caring roles, it is important to address workers' care responsibilities as part of decent working conditions in the childcare sector.

Finally, in terms of organization, representation and bargaining power, the picture varies across economies. Socialist states such as Lao People's Democratic Republic, Viet Nam and India have a culture of union formation, although this does not always translate into effective collective bargaining. However, the **relative strength and effectiveness of trade unions in representing childcare sector workers and making gains towards their rights remains weak**. In the Philippines, for instance, childcare workers who do not have security of tenure are not under an employee-employer relationship, and cannot officially join unions. This means that they cannot participate in collective negotiation agreements (CNA) or collective bargaining agreements (CBA) with their employers.

Recommendations

Drawing on its findings, this study offers the following guidance for public investments in childcare in Asia and the Pacific, across the principles of AAQDW (see section 8 for details).

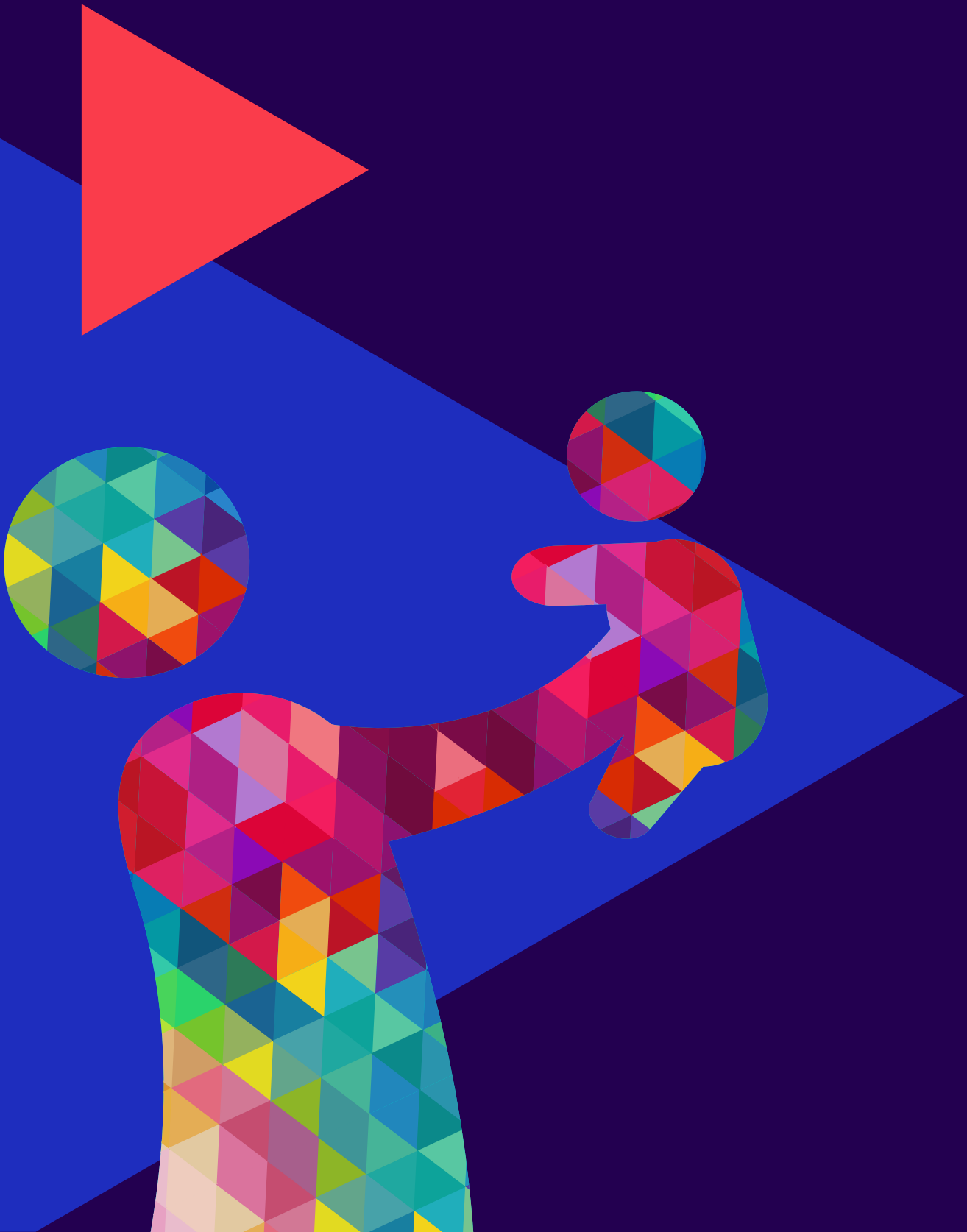
FIGURE D

Key recommendations of this study

 <p>Accessibility</p>	<ul style="list-style-type: none"> ► Diversify childcare modalities. ► Eliminate disparities in access. ► Strengthen evidence-based investments in childcare through mapping and monitoring.
 <p>Affordability</p>	<ul style="list-style-type: none"> ► Undertake regular analysis and budget audits of costs for families and childcare providers. ► Minimize low-income parents' out-of-pocket expenses. ► Build system coherence for childcare sector funding, monitoring, evaluation and support.
 <p>Quality</p>	<ul style="list-style-type: none"> ► Establish, implement and measure the quality of childcare services. ► Modify parents' perceptions of quality through the effective implementation of quality standards. ► Provide childcare services that integrate the needs of rural, indigenous and tribal communities. ► Monitor childcare periodically and improve coordination.
 <p>Decent work for caregivers</p>	<ul style="list-style-type: none"> ► Recognize all childcare workers as workers, and ensure decent work through improved legal frameworks and implementation. ► Ensure inclusive skills development, accreditation and the upskilling of workers. ► Establish national standards and operating procedures for decent working conditions and remuneration through social dialogue. ► Extend social protection to cover all childcare workers. ► Ensure childcare workers' right to organization, representation and voice.

Section 1

Introduction



▶ 1

Introduction

The care of young children, especially those between the ages of 0 and 6 years old, involves a complex mix of skills and tasks to attend to their emotional, mental, intellectual and social development. Across Asia and the Pacific, the labour of caring for children in this age group falls disproportionately on women in their capacity as mothers (ADB and UN Women 2018). This gendered division of childcare has significant implications for gender equality, affecting women's ability to participate in social, economic and political domains of public life. In particular, women's disproportionate burden of childcare results in a series of impediments and constraints that restrict women's economic engagement and empowerment (Chopra et al. 2020).



Across Asia and the Pacific, the labour of caring for young children falls disproportionately on women in their capacity as mothers

While childcare is simply one of many unpaid care activities that hinder women's meaningful participation in public life – including, for instance, elder care and housework, among others – its implications for women's economic participation are particularly acute. This is because childbirth often forces women out of the labour force at a formative and crucial time in their careers. Childcare's links to women's reproductive function also make norms around the division of childcare labour especially difficult to shift (Pearson 2004).

While the family, and especially mothers, remain the primary actors in the provision of early childcare, each economy's childcare sector comprises a mix of services provided by the State, the private sector, and community-based or religious organizations. The childcare sector's labour force is dominated by women, and is often marked by poor and precarious working conditions, including low pay, limited prospects for career progression, and a lack of social and economic protections (McDonald et al. 2018).

Thus, investments in the childcare sector have emerged as a key policy priority for governments, not only to ensure holistic child development, but also to support women's economic participation – both in terms of freeing up women's time for economic engagement, as well as enhancing the working conditions of workers in the highly feminized childcare sector (ILO 2018).

This study examines the public provision of childcare across 48 economies of Asia and the Pacific.⁵ It assesses the nature of the childcare sector in each economy – looking at who the main actors and stakeholders are, the nature of national policies and guidelines regulating the sector, the needs, expectations and experiences of service users, the type and extent of public financing and budgeting for childcare services, the quality of the services provided, and the status and working conditions of childcare workers.

The assessment of the childcare sector in Asia and the Pacific is conducted against four key principles that impact the provision of services – accessibility, affordability, quality, and decent work for childcare workers. The study identifies gaps between the supply of and demand for childcare services, and highlights key challenges in meeting global standards and guidelines linked to each of these four principles. Based on its findings, the study offers recommendations with a view to increasing investments in the childcare sector, in order to enable better socio-economic outcomes for women, decent work for childcare workers, and support a transformative recovery from the COVID-19 pandemic that advances gender equality and sustainable development.

► 1.1. Why invest in the childcare sector

Investments in childcare offer an opportunity to meet several development objectives simultaneously. First and foremost is the goal of gender equality, both within the home and in the labour market, to counter pervasive gender inequality, particularly in terms of care work. Most care work, including domestic work and the care of dependants, is carried out by women the world over (ILO 2018). In Asia and the Pacific, women spend 4.1 times more time than men on unpaid care activities, on average (ILO 2018). This varies from 1.7 times more time in New Zealand to 11 times more in Pakistan (ADB and UN Women 2018, 48).

⁵ The subregional mapping of economies included in this study follow ADB regions: **Central and West Asia** (Armenia; Azerbaijan; Georgia; Kazakhstan; the Kyrgyz Republic; Pakistan; Tajikistan; Turkmenistan; and Uzbekistan), **East Asia** (China; Hong Kong, China; Japan; Mongolia; the Republic of Korea; and Taipei, China), **the Pacific** (Australia; the Cook Islands; the Federated States of Micronesia; Fiji; Kiribati; the Marshall Islands; Nauru; New Zealand; Niue; Palau; Papua New Guinea; Samoa; the Solomon Islands; Tonga; Tuvalu; and Vanuatu), **South Asia** (Bangladesh; Bhutan; India; the Maldives; Nepal; and Sri Lanka) and **Southeast Asia** (Brunei Darussalam; Cambodia; Indonesia; Lao People's Democratic Republic; Malaysia; Myanmar; the Philippines; Singapore; Thailand; Timor-Leste; and Viet Nam). Due to data limitations, this report does not discuss Afghanistan.

The disproportionate burden of childcare borne by women has implications for their labour force participation. Mothers of children under 6 years old have dramatically lower rates of labour force participation than women in single-person or couple-only households (Azcona et al. 2020). There is a particularly acute gap between male and female labour force participation as the number of children in a household increases in Central and Southern Asia, as well as in South-East Asia (Azcona et al. 2020, 9). Mothers with children under 6 years old work shorter hours in paid work, compared to women without children and to men, and they are more likely to be engaged in part-time work, informal employment and low-paid jobs, affecting the quality of employment opportunities they avail (ILO 2018).

The gendered impact of childcare responsibilities on women's economic prospects is further circumscribed by what the literature calls the "motherhood employment penalty", the "motherhood wage penalty" and the "motherhood leadership penalty" (ILO 2019). The COVID-19 pandemic has exacerbated these economic inequalities, with over 2 million mothers leaving the labour force in 2020 globally (ILO and UN Women 2022). Increased care responsibilities due to the closure of childcare facilities and mass job loss in Asia and the Pacific during the crisis (ILO 2020) have further jeopardized women's economic participation in the region. This makes childcare a key sector for government investment and support as States strategize towards sustainable COVID-19 recovery.

Asia and the Pacific is the only region in the world where women's labour force participation is decreasing, falling from 49.9 per cent in 2005 to 44.1 per cent in 2019 (ILO 2020). The gap in labour force participation between women and men is widest in South Asia, at 54 percentage points, narrower in East Asia at 16 per cent, and relatively low in the Pacific at 9 per cent (ILO 2020, 7). Factors such as the economic condition of households, the availability of alternative care arrangements, the household structure, and alternative decent work options for paid work for both men and women mediate the bi-directional relationship between women in low-income households and childcare (Chopra et al. 2020).



Asia and the Pacific is the only region in the world where women's labour force participation is decreasing

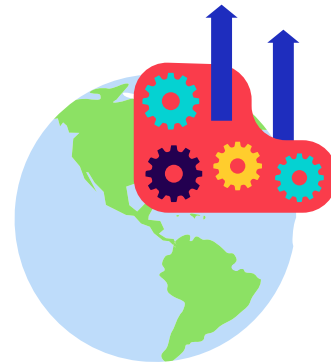
Studies from India show that even when women are engaged in work outside the home, their job choices reflect multiple constraints placed on their time by marital and reproductive obligations.

The ILO (2022) estimates that investing in universal childcare and long-term care services could generate up to 280 million jobs by 2030 around the world, and a further 19 million jobs by 2035. Thus, investing in the childcare sector in order to free up mothers' time and labour to participate in the paid workforce presents an important economic incentive to States, which would facilitate a significant expansion of the productive workforce in Asia and the Pacific.

Research also highlights the inter-generational transfer of childcare from mothers to either grandmothers or to older siblings, usually girls (Chopra et al. 2020). Adolescent girls often drop out of school to help their mothers with unpaid care work. Studies note that this reduces girls' likelihood of returning to school (Devercelli and Beaton-Day 2020). This sets up a vicious cycle of low education, early marriage and pregnancy,

and poorer health, nutritional and livelihood outcomes for families. Addressing childcare coverage can, therefore, enhance the probability of older siblings, especially adolescent girls, remaining in school longer (Devercelli and Beaton-Day 2020).

In addition, the paid childcare sector is an important entry point for women to paid work. Women are overrepresented in several paid care professions – such as healthcare, education, early childhood care, personal care, long-term care and domestic work – ranging from 50 to 79 per cent in different countries (ILO 2018). It is estimated that investments in care sectors have the potential to generate 117 million jobs in 45 countries, representing a 33 per cent increase from the current status quo (Ilkharacan and Kim 2019). However, the feminization – and consequent undervaluing – of the care sector means that it is riddled with conditions of precarious contracts, low wages, job insecurity, poor working conditions, and no or limited labour and social protection. Investments in the childcare sector cannot achieve the goal of gender equality without addressing the needs of childcare workers, most of whom are women.



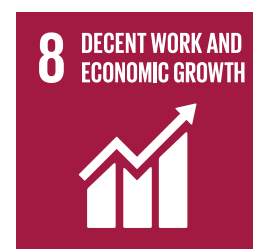
280 million

jobs could be created
globally by 2030 by
investing in universal
childcare and long-term
care services

A key outcome of investments in the childcare sector is progress towards the 2030 Agenda for Sustainable Development and its Sustainable Development Goals (SDGs). Investing in the non-familial and institutional provision of childcare would advance SDG 5 on gender equality, particularly SDG target 5.4 on recognizing and valuing women’s unpaid care work. Early childhood care and development (ECCD) is a critical starting point for proceeding towards the aims of SDG 3 on good health and well-being for all at all ages. The childcare sector is also central to SDG 4 on quality education, especially SDG target 4.2 that aims to *“ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education.”*

Finally, paying attention to childcare workers’ working conditions and emphasizing the Decent Work Agenda (Ghai 2006) will enable policymakers to realize SDG 8 on decent work and economic growth, specifically SDG target 8.5 which seeks full and productive employment and decent work for all women and men, and includes an emphasis on *“equal pay for work of equal value”*. Enhancing children’s life outcomes through early childhood care and development is equally necessary from an economic efficiency and a rights-based perspective (World Bank 2013b). While children’s well-being and development is a crucial outcome of investments in the childcare sector, the focus of this study is on caregivers’ gender equality outcomes and decent work conditions for childcare workers. It provides a complementary perspective to existing literature that makes the case for childcare investments from the perspective of children’s well-being.

Good quality, affordable and accessible childcare services provided through a sector that upholds decent work conditions can protect against child poverty, strengthen equal opportunities, boost family income through parents’ greater labour force participation, and promote child development and well-being (OECD 2020a), while enhancing women’s economic opportunities, and paving the way towards sustainable development and gender equality. Beyond the incentives for public or state investment in the childcare sector discussed above, the business case for employers to invest in the childcare sector has been argued from the perspective of overcoming the negative effects of underinvestment.



These include higher absenteeism, higher turnover, the lower retention of female employees after marriage and childbirth, lower employee productivity, and difficulty in recruiting talent with the right skills (IFC 2017). This study emphasizes the critical role of the State in the provision of childcare and the regulation of the childcare sector as a major lever to address gender, income, class, geographic and other intersectional inequalities that prevent families from accessing and benefitting from good quality childcare services. The COVID-19 pandemic has exacerbated pre-existing inequalities and highlighted the need to focus on care's central place in human life. Efforts by international organizations and governments to 'build back better' and 'leave no one behind' (ESCAP 2021a; Nazneen and Araujo 2020) must invariably factor in the care needs of intersectional populations.

This study offers key recommendations to support policymakers in their efforts towards building inclusive, sustainable and resilient economies and societies.

► 1.2. Scope and structure of the study

The childcare sector is variously called the early childhood development sector (ECD), the early childhood care and development sector (ECCD), and the early childhood care and education (ECCE) sector. Previous efforts to scope the landscape of early childhood care policies note the multi-sectoral nature of childcare provision, spanning the areas of healthcare, hygiene, nutrition, education, poverty alleviation for children, and social and child protection (World Bank 2013d). In countries that are members of the Organisation for Economic Co-operation and Development (OECD), Jenson (2012) observes a shift from social ministries to education ministries as the emphasis on learning and educational outcomes has been strengthened. Nevertheless, state efforts in this regard continue to centre on children's needs and rights.

This study defines the childcare sector as consisting of centre-based care services, provided either by state-run or state-funded centres, employer-run centres, private market-based centres, and centres run by non-governmental organizations (NGOs) or faith-based organizations.⁶ It includes full-day care programmes, as well as before or after-school care programmes, while attempting to separate out programmes that may be purely focused on education (kindergartens, nurseries or preschools) which operate for too short a duration to allow family carers to engage meaningfully in paid work or other economic activities.

⁶ The study delimits and excludes in-house nannies and/or domestic workers hired for childcare within households from the current scope of the childcare sector, while acknowledging this to be a large avenue of childcare provision often adopted by middle- and upper-income families.

However, it is important to acknowledge the difficulties of making a clear distinction between childcare and education. This is partly due to the social investment perspective adopted since the early 2000s (Jenson 2012), as well as the heavy reliance on familial care in many low-and middle-income countries. This has resulted in government investment in centre-based care aimed almost exclusively at educational outcomes, as discussed below in the specific national contexts of the economies examined.

The research design for this study focuses on how care provision for children between 0 and 6 years old is organized and implemented looking at four key principles – accessibility, affordability, quality, and decent work. Within the 0–6 age group, the study pays special attention to the state of provisions for children under 3 years old. For the purposes of consistency, the study refers to the childcare sector or to early childhood care and development services to distinguish from the more education-focused school system. However, where necessary, pre-primary or preschools are used as the terminology for services aimed at children above 3 years old.

This study combines primary research in seven countries⁷ with secondary desk-based research on the remaining economies in the Asia and the Pacific region. Primary research was carried out by locally appointed national consultants who conducted a review of policy documents, alongside in-depth interviews with policymakers, users and childcare services providers. Secondary research was conducted by an international team of researchers covering aspects of affordability, accessibility, quality and decent work. Promising practices in the economies reviewed, as well as examples of global best practices, are showcased throughout the report as relevant.

The report begins by laying out the research design and main conceptual framework, the research methodology and tools for primary and secondary research, the rationale for case study selection, and the study limitations in section 2. Section 3 maps out the landscape of the contemporary childcare sector across Asia and the Pacific, highlighting key stakeholders and policy actors.



This study's policy recommendations aim to support policymakers to realize the multifaceted benefits of investment in the childcare sector

⁷Seven national case studies have been developed on the following countries: Georgia, Indonesia, Lao People's Democratic Republic, Mongolia, Nepal, the Philippines, and Sri Lanka.

Sections 4 to 7 describe the study's findings across economies against each principle of accessibility, affordability, quality, and decent work for childcare workers, respectively. Section 8 presents policy recommendations based on the study's findings. Section 9 summarizes the findings of the seven national case studies.⁸ Throughout the sections, boxes highlight examples of alternative or innovative financing models that have been developed or experimented with by some countries and NGOs.

The study's policy recommendations aim to support policymakers to realize the multifaceted benefits of investment in the childcare sector. These benefits include:

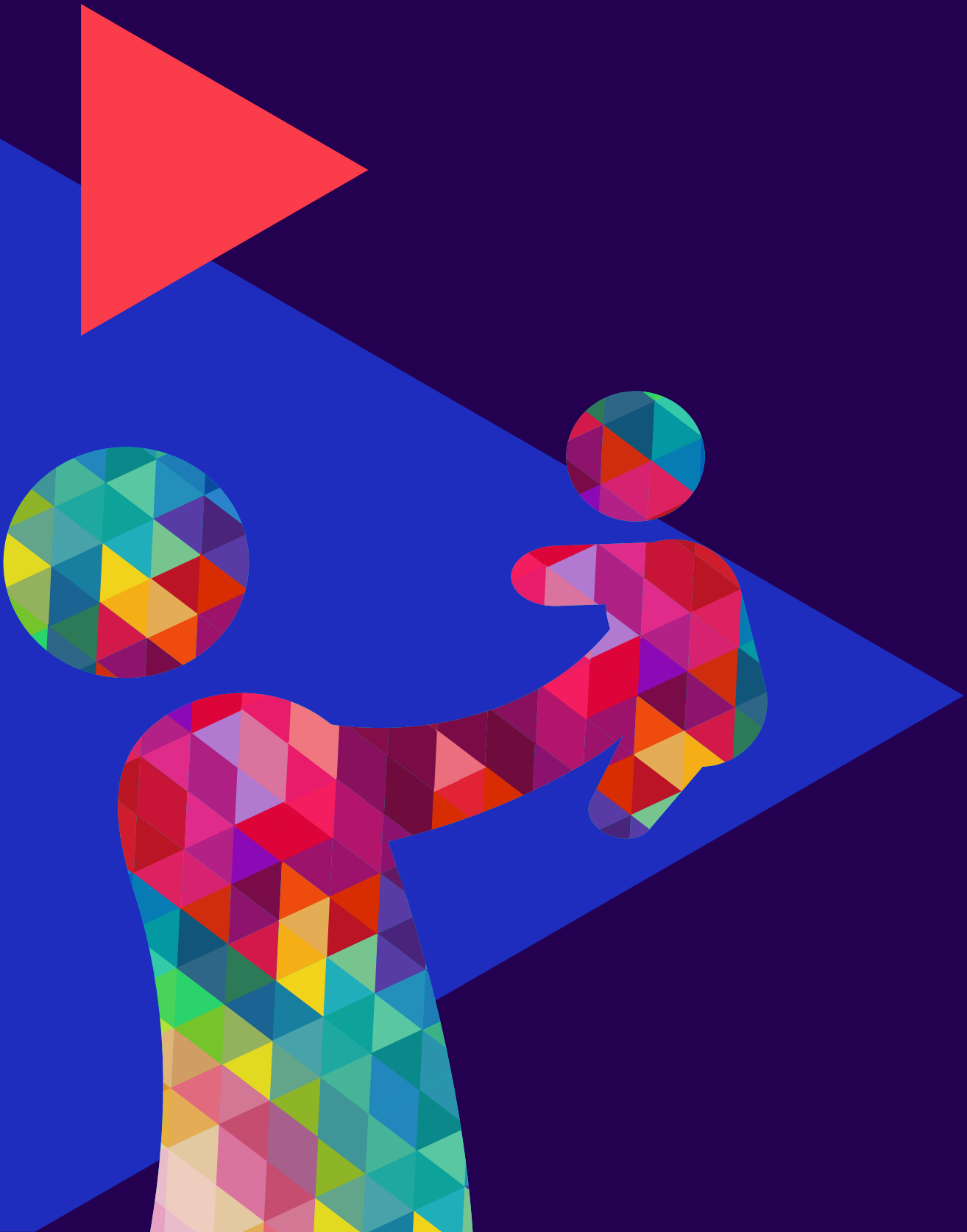
- ▶ freeing up the time that mothers and other unpaid care providers spend on childcare;
- ▶ generating employment and ensuring decent jobs for women and men by recognizing early childhood care as a skilled and valued profession;
- ▶ promoting gender equality and achieving sustainable development; and
- ▶ developing children's essential cognitive and social capacities, and supporting child welfare (Devercelli and Beaton-Day 2020, 12), even though outcomes for children are not a key focus of this study.

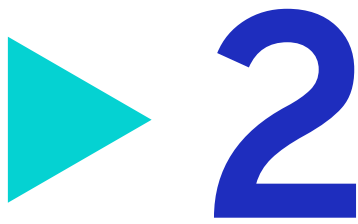
The recommendations are not intended as a mandatory set of directives. Instead, they are a toolkit of several options across each of the four pillars of childcare provision – accessibility, affordability, quality, and decent work – which can be adapted appropriately to national contexts.

⁸ In-depth reports on each national case study are/will be available as separate standalone technical publications.

Section 2

Research design





Research design

The **main research question** guiding this study asks: what investments in the childcare sector in Asia and the Pacific can ensure better social and economic outcomes for women, improved decent work opportunities for male and female childcare workers, and support transformative COVID-19 economic recovery, leading to gender equality and sustainable development?

While reviewing the childcare sector in each economy, the focus of this study is on publicly-funded childcare provisions. Some of the detailed **questions informing the research** are as follows:

- ▶ What does the organization of the childcare sector in the region look like? How is the organization of the childcare sector spread across institutional actors, such as the State, markets, communities and households?
- ▶ Who are the key State actors responsible for the design and delivery of childcare services? What is the institutional context for policy formulation and service delivery?
- ▶ What are the national policies related to childcare and childcare workers?
- ▶ What are the socio-cultural norms and gender roles guiding the provision and uptake of childcare across the region?
- ▶ Who performs childcare and where? Who benefits and who is left out?
- ▶ Who pays for childcare in terms of public funding, tax breaks, subsidies, employer provisions, etc.?
- ▶ How is the childcare sector positioned in regard to the four key principles of accessibility, affordability, quality, and decent work for childcare workers?
- ▶ What 'works' in terms of investments in the childcare sector, and what more needs to be done?

► 2.1. Conceptual framework

Based on extant literature, the conceptual framework underpinning this study is summarized in figure 1. The childcare sector is constituted of four key institutional actors – the State, markets, households, and communities, each comprising one angle of the ‘care diamond’ (Razavi 2007). State care includes government-run day care centres, government-funded centres, conditional or unconditional cash transfers, tax subsidies, and incentives. Household care includes mother-only care, familial care, and paid carers at home. Market care includes employer-run day care, and private day care (individual, cooperative and social enterprise or company-based). Community care includes NGO-run or neighbourhood day care.

The analytical approach to this study takes the form of a gendered political economy analysis of key actors, their interests, institutional mechanisms, cultural norms, and the mechanics of service delivery in terms of who pays for childcare, who performs care, where care is performed, and who benefits from care policies and services in the childcare sector across the Asia and Pacific region. This has implications for the accessibility, affordability, and quality of childcare services, as well as decent working conditions within the sector. A gendered analysis examines the impact of policies on both men and women, but pays special attention to the differentiated needs of women – as mothers and paid or unpaid care workers.

Unpaid caregivers included mothers, grandmothers, older siblings and other family members (including diverse families who do not align with the heterosexual norm) whose participation in the public sphere is constrained by their care responsibilities – including opportunities for education, learning or labour force participation. Paid childcare workers include domestic workers hired to care for children within the home, as well as paid care workers working in institutional care settings. The extent of decent work conditions, social security protections, labour protections, and the professional training and skills they receive are important areas that determine the quality of childcare which the ultimate beneficiary – the child – receives. The focus of this study is on publicly-supported and institutional childcare, especially as it caters to low-income households, and the status of workers within this sector. As a result, domestic workers who provide childcare services within the home are excluded from the scope of this study, as noted above.

This study’s assessment of childcare policies and services is conducted against four key principles of accessibility, affordability, quality, and decent work conditions for childcare workers (AAQDW) identified from the literature (ADB and UN Women 2018; COFACE 2018; ILO 2018; Women’s Budget Group 2020; World Bank 2022).

FIGURE 1

Conceptual framework informing this research



The main criteria embedded within each of these principles are discussed below. A review of progress towards gender equality and women’s empowerment by countries in Asia and the Pacific on the occasion of the 25th anniversary of the Beijing Platform for Action highlights the continuing challenges of limited government coordination and collaboration, weak or insufficient implementation of relevant laws and initiatives, discriminatory social norms, and persistent gaps in gender data (ESCAP and UN Women 2020).

The four principles of AAQDW gain greater salience in the context of the region, given the wide breadth and diversity of countries, cultures, socio-economic levels of development, women’s labour force participation, and geographical characteristics. This is discussed at length in the subsequent sections.

Additionally, the 5R framework⁹ (see table 1) or the ILO’s ‘high road to care and the Decent Work Agenda’¹⁰ (ILO 2018) provide a normative basis for this study’s assessment and policy recommendations. These normative and empirical measures from the literature are used to operationalize the principles of AAQDW.

► **Table 1. 5R framework of the high road to care by the ILO**

Policy recommendations	Policy measures
<p>Recognize</p> <p>Recognize the importance of the care economy and the need for data and investment</p>	<ul style="list-style-type: none"> ► Measure all forms of care work and take unpaid care work into account in decision-making ► Invest in quality care services, care policies and care-relevant infrastructure
<p>Reduce</p> <p>Reduce the burden of unpaid care work, and protect women’s employment in times of crisis</p> <p>Redistribute</p> <p>Ensure the more egalitarian distribution of unpaid care work</p>	<ul style="list-style-type: none"> ► Promote active labour market policies that support the attachment, reintegration and progress of unpaid carers into the labour force ► Enact and implement family-friendly working arrangements for all workers ► Implement gender-responsive and publicly-funded leave policies for all women and men, with special incentives to promote male responsibility for unpaid care work ► Guarantee the right of universal access to quality care services

⁹ The 5R framework (ILO, 2018) builds on the 3R approach (Elson 2008) to propose a high road to care through transformative care policies that “contribute to the recognition of the value of unpaid care work, the reduction of the drudgery of certain forms of care work and the redistribution of care responsibilities between women and men and between households and the State. The policies also need to reward care workers adequately and promote their representation, as well as that of care recipients and unpaid carers.”

¹⁰ More information is available on the ILO’s website, <https://www.ilo.org/global/topics/decent-work/lang--en/index.htm>.

Policy recommendations	Policy measures
<p>Reduce Redistribute (continued)</p>	<ul style="list-style-type: none"> ▶ Ensure care-friendly and gender-responsive social protection systems, including social protection floors ▶ Promote information and education for more gender-equal households, workplaces and societies
<p>Reward Honour care work by extending more and decent work for care workers</p>	<ul style="list-style-type: none"> ▶ Regulate and implement decent terms and conditions of employment, and achieve equal pay for work of equal value for all care workers ▶ Ensure a safe, attractive and stimulating work environment for both women and men care workers ▶ Enact laws and implement measures to protect migrant care workers
<p>Representation Promote paid care workers' representation, social dialogue and collective bargaining</p>	<ul style="list-style-type: none"> ▶ Ensure women's/care workers full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life ▶ Promote freedom of association for care workers and employers ▶ Promote social dialogue and strengthen the right to collective bargaining in care sectors ▶ Promote alliance-building between trade unions that represent care workers and civil society organizations (CSOs) that represent care users and unpaid care providers

Source: ILO 2018.

▶ 2.2. Operationalizing the principles of AAQDW



Accessibility

To demarcate accessibility from affordability and quality criteria, this study defines access to childcare services as a household's ability to easily locate information about childcare services, reach suitable childcare centres, and use childcare services that match their specific and differentiated needs. It focuses attention on the needs of the most vulnerable, following the principle at the heart of the 2030 Agenda and its SDGs – to leave no one behind (LNOB).

The following indicators are included for the assessment of the accessibility of childcare services:

1. **Profile of households:** The extent to which households – cutting across the lines of income, class, caste, gender, race, ethnicity and geographical location – can access suitable services.
2. **Profile of children:** The extent to which children’s differentiated needs – cutting across sex, age, disability and special needs – are met.
3. **Location of the services:** The distance or proximity to home or the workplace which determines the extent of time and expense borne by families to avail services.
4. **Operating hours:** The number of hours and timings that services are available for, including regular or non-standard (such as at night or on weekends) hours of operation to support full-time working parents.
5. **Utilization of the services:** This is arrived at through various metrics, including the number of children between 0 and 6 years old (especially those under 3 years old) in need of childcare services, the number of places available, the number of children enrolled in such services by age group, and the enrolment-to-demand ratio.



Affordability

The availability of affordable care services, including child and elderly care, is a defining factor for addressing women’s disproportionate care load, especially women in low-income households and rural areas who cannot afford high costs (ADB and UN Women 2018). Childcare costs can represent a major component of many households’ monthly expenses. One study in the United States of America notes that the enrolment rates of children from the bottom half of the income distribution is persistently 10–20 percentage points lower than for children in the highest quarter (Duncan and Magnuson 2013). This can act as a major discouragement for parents from opting for centre-based childcare services. In turn, this impedes the labour supply of a household’s second income earner, usually the mother, influencing decisions to enter or re-enter the labour market and the number of hours worked (COFACE 2018). Among some OECD countries, like Japan and the United Kingdom, the high costs of childcare can account for up to half of a woman’s average full-time earnings for a nuclear family with two children (OECD 2020b). While some countries offer targeted support to low-income families, in the form of childcare subsidies or tax breaks, coverage is often inadequate. The ILO’s Workers with Family Responsibilities Recommendation, 1981 (No. 165) also underlines the importance of affordability, calling for *“appropriate childcare and family services and facilities, free of charge or at a reasonable charge in accordance with the workers’ ability to pay.”*

Based on financial measures suggested by an expert panel on early care and education (Friese et al. 2017), this study includes the following indicators for the assessment of affordability:

1. **Total costs per child:** This refers to costs for centre-based care, be it publicly-funded, private, community or NGO-run.
2. **Parent's out-of-pocket expenses:** Even where childcare services are subsidized or fully funded, parents may incur expenses on food, books, toys or other activity materials.
3. **Costs as a share of parents' income:** This criterion aims to assess the proportion of household income that childcare costs represent.
4. **Subsidies, tax breaks, vouchers or allowances for parents:** This measures not only the amount of subsidies, but also aims to assess the models of financing and modes of payment available in different economies.



Quality

Quality is a crucial component of childcare services. However, it is very difficult to define, measure and set norms for. Perceptions of quality vary based on the needs and expectations of users and care recipients. Health, safety, nutrition, educational learning, qualifications, experience and the relevant skills of childcare workers, as well as the overall positive development of the child, are all important parameters on which the quality of services is judged. Responsive caregiving and early learning are integral components of good quality care for young children. While users from different income levels may have varying perceptions and demands for minimum quality standards, it is important that all early childhood care and development services, formal or informal, meet certain established quality criteria.

The compatibility of the early childhood care and development services with national and international academic standards, the ratio of teachers or caregivers to children, and childcare workers' level of education, training and working circumstances all contribute to good quality. For example, a high care worker-to-child ratio ensures that each child gets suitable attention and that staff are not overburdened. This allows childcare workers to be responsive and sensitive to the needs of young children, engage with them in a language-rich environment, and organize activities that promote children's development and encourage pro-social behaviours (COFACE 2018). Thus, the needs, skills, knowledge and working conditions of care workers in professional childcare settings forms a crucial component of effective, high quality childcare. In addition, the extent to which the special needs of particularly vulnerable or marginalized children, including children with disabilities, are addressed can also be indicators of quality.

Low quality services not only have a detrimental effect on children and their development, but also significantly discourage the enrolment and usage of early childhood care and development services by parents (Mateo Díaz and Rodríguez-Chamussy 2016). Factors that can affect the quality of such services not being up to an adequate standard include low levels of funding, the inadequate training of care workers, a lack of supervision, low remuneration and poor working conditions, the limited retention of staff, and insufficient physical and pedagogical infrastructure (Richter and Samuels 2018). Therefore, it is a complex task to measure the quality of childcare services, and there is no single indicator that adequately captures the multiple dimensions of quality provision. The ILO’s policy guidelines on the promotion of decent work for early childhood education personnel outlines key elements of a framework for quality service provision (ILO 2014a). Additionally, the World Bank’s Systems Approach for Better Education Results (SABER) early childhood development tool captures some elements of quality childcare, as outlined in table 2.

► **Table 2. Elements for good quality childcare**

Structural variables	<ul style="list-style-type: none"> ► Child-to-caregiver ratios ► Group size ► Physical environment ► Availability of equipment and pedagogical materials
Caregiver variables	<ul style="list-style-type: none"> ► Initial education ► Early childhood training ► Mentoring and supervision ► Wages and working conditions
Programme variables	<ul style="list-style-type: none"> ► Programme intensity ► Parental involvement ► The language of instruction ► Curriculum ► Daily routine ► Health and nutrition inputs
Process variables	<ul style="list-style-type: none"> ► Observable or positive caregiver-child interactions ► Child-child interactions

Source: World Bank 2013b.

Based on the review of literature, this study operationalizes the assessment of quality by including the following indicators. Caregiver variables are notably missing, as these are more systematically included under decent work.

1. **Child-to-caregiver ratio:** This refers to the number of children per childcare worker, and also includes cover for staff turnover.
2. **Physical infrastructure:** This refers to the amount of space, the layout, access to green spaces and open play areas, rooms, cots and other materials needed to care for young children.
3. **Safety and health standards:** This primarily addresses the nutritional needs of children as defined by national guidelines, as well as precautionary measures in line with health and safety guidelines to protect children from hazards and diseases.
4. **Pedagogical infrastructure and age-appropriate learning inputs:** This includes access to materials, resources and trained staff to provide appropriate educational and learning experiences.
5. **Positive interactions between caregivers and children:** This addresses the intangible and qualitative aspects of care, based on skills that can be cultivated rather than innate abilities, including ‘communication and empathy (responsiveness) with children, parents and the community’. It also incorporates elements of childcare workers’ levels of qualification and relevant skills.



Decent work conditions

The childcare sector in Asia and the Pacific is dominated by women workers, making it a key sector for the employment of women in the region, as discussed in section 7.1. The United Nations (UN) Secretary-General's ‘Our Common Agenda’, calls for “*Large-scale investment in the care economy*” and the UN Global Accelerator on Jobs and Social Protection for Just Transition provides an opportunity to promote accessible, affordable, quality childcare that generates decent work.

Table 1, above, identifies the elements that make up the ILO’s 5R framework for a high road to decent care work, grounded on gender equality. It underscores the importance of creating a virtuous circle of transformative care policies by (i) embedding policies and legislation that recognize the value of care work, (ii) promoting the sharing of unpaid care responsibilities by providing other forms of work-family support, such as paternity and parental leave that enable workers to balance paid work and care more easily, and (iii) attempting to redistribute unpaid care to paid care sectors while paying attention to the rewards, representation and decent working conditions of care workers.

Underpinning the ILO's 5R framework are the ILO's international labour standards and guidelines relevant to the care economy, which provide globally agreed minimal standards for decent work.

Additional commitments include the United Nations Educational, Scientific and Cultural Organization's (UNESCO) Tashkent Declaration and Commitments to Action for Transforming Early Childhood Care and Education 2022. This refers to the importance of *"enhancing the attractiveness of the ECCE profession"* and providing *"opportunities for career advancement."* The United Nations Commission on the Status of Women, in its Agreed Conclusions in 2017, found that investments in the health and social sectors could enhance women's economic empowerment because of the predominance of women employed in these sectors (UN Women 2017, 4). With this, the Commission also agreed to promote decent paid care and domestic work for women and men in the public and private sectors.

Childcare workers being underpaid, overworked and experiencing poor working conditions are all linked to poor quality care, which is harmful to both care receivers and childcare workers. Ghai (2006) outlines objectives and strategies for incorporating the four components of decent work: rights at work, employment and work, social protection, and social dialogue. These cover myriad aspects, such as employment status, hours of work, types of contracts, average wages, the gender pay gap, social security benefits, migration policies, trade union membership, the educational and skills attainment of workers, and care dependency ratios. This study uses the following indicators to examine the standards and quality of decent work conditions of childcare workers:

1. **Employment characteristics and career advancement prospects:** This includes information on whether childcare workers are recognized as workers, workers' qualifications, professional skills, monitoring and supervision, and quotas.
2. **Remuneration:** This focuses on the wages that childcare workers receive, in addition to other emoluments like allowances and benefits.
3. **Conditions of work:** This refers to aspects of safety, stability, decent timings, work-life balance, equal treatment at work, and the provision of care for care workers, among others.
4. **Labour protection and social security:** This includes benefits like maternity benefits, paternity benefits, care leave, support for workers' own care responsibilities, health and other necessary social protection coverage, such as health insurance, and old-age pension benefits, among others.
5. **Trade union membership and representation:** This is measured by trade union membership, the representation of the rights and issues concerning childcare workers, and improvement in the benefits they receive, their wages, or their working conditions as a result of collective bargaining and workers' voice.

► 2.3. Methodology and research steps

The subregional classifications of the 48 economies examined in this study are outlined in footnote 5 in section 1. A detailed secondary, desk-based review of the composition of the childcare sector across these economies was carried out using the gendered political economy analysis framework as a tool to assess key policy actors, national policies and legislative frameworks, formal and informal institutional contexts, socio-cultural norms, and questions around the AAQDW principles in state-run or state-funded childcare centres. The main thrust of the research was on collecting data on the conditions of state-sponsored childcare services, in order to identify issues and challenges that can inform policy recommendations for the expansion of public investments in childcare. In economies where state provisioning is negligible or absent, private, employer-run or community-run centres were reviewed.

Following the regional synthesis, in-depth case studies from seven countries were developed to gather deeper insights into the organization and functioning of the childcare sector of these countries. The countries selected for national case studies are Georgia, Indonesia, Lao People's Democratic Republic (Lao PDR), Mongolia, Nepal, the Philippines, and Sri Lanka.

The research team conducted a review of extant literature on childcare services across Asia and the Pacific, as well as in OECD countries and other world regions, such as Latin America. Based on the literature review, the conceptual framework discussed above and the operational factors of the four key principles of AAQDW were identified and developed. The team then designed and developed research tools for primary data collection in the case study countries. These include a sampling strategy, stakeholder interview topic guides, and guidelines for national policy document reviews. Three training workshops were conducted with the national consultants to familiarize them with the research objectives and tools, and discuss interim progress and preliminary findings.

The national consultants in each of the seven case study countries conducted primary research to assess the childcare sector for children between 0 and 6 years old. The sample consisted broadly of interviews with three categories of respondents: policymakers at the national or sub-national level (including officials from ministries of labour, social protection and welfare, finance, education and child development, and women's affairs, as well as trade union and employers' representatives where possible), users (mothers, fathers and other family members), and childcare service workers (centre managers, supervisors and childcare workers).¹¹

¹¹ Respondents were selected based on a range of intersectional considerations, including gender, income bracket, household composition (e.g. single parent household, multi-generational household), etc. for users, and considerations such as age, gender, seniority and role for childcare providers.

The final sample¹² in each country was determined by the national consultants in consultation with the international research team, bearing in mind factors such as the geographical spread of centres, users' income levels, and COVID-19 pandemic-related restrictions. A total of 35–40 interviews were conducted per country across these groups of respondents, alongside personal visits to centres. These involved participant observation of centres when COVID-19 restrictions permitted. In the event of the absence of state-sponsored services, national consultants reviewed employer-, NGO- or community-run centres, in addition to privately-run childcare centres. Five topic guides¹³ developed by the research team were customized and translated into local languages for use by the national consultants.

Qualitative, thematic analysis of interview data and reviews of policy documents were conducted by national consultants against the AAQDW framework. Preliminary and final results were shared by each national consultant, with a minimum of two rounds of feedback from the international research team to ensure quality assurance and consistency. Summary reports synthesizing the key findings in each case study country are included in section 9. Detailed national reports have been developed separately for publication as independent technical products.

In addition to the seven case study countries, the research team conducted a secondary review of all remaining economies in the region. These findings, combined with a synthesis of the case studies, are presented in the subsequent sections of this report.

► 2.4. Study limitations

The research was carried out over a period of six months between October 2021 and March 2022. However, due to the wide diversity between and within economies in the region, and the difficulties of drawing robust conclusions from existing secondary data, balancing macro level perspectives with micro, context-specific findings and details was challenging. The generalization of certain findings and themes is necessarily qualitative and not easily quantifiable. Additionally, neat comparisons (especially of a quantitative nature) are not possible due to significant data gaps, and the lack of uniformity in both data availability, as well as in policy and related frameworks across the economies examined.

¹² It must be noted that this was not representative sampling to reflect each and every category and type of stakeholder, but rather a sampling to identify a breadth of issues, concerns and experiences.

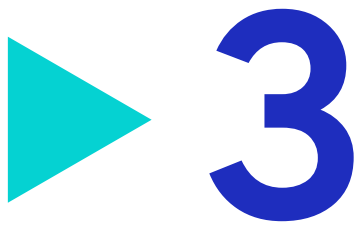
¹³ Separate interview topic guides were also developed for policymakers, users, childcare centre managers or supervisors, and childcare workers to aid the process of reviewing national policy documents.

Second, the study is cognizant of wide data gaps in countries without a robust childcare sector, or without a well-developed and documented policy or research ecosystem. Third, despite best efforts to access information on budgeting and financial resource outlays to the childcare sector, it proved difficult in many countries to get the appropriate information from ministries of finance and other relevant institutions. Finally, the research was carried out under COVID-19 pandemic conditions in many of the national case study countries. As a result, national consultants were often constrained in their ability to physically visit centres or arrange in-person interviews and meetings with key stakeholders. Many childcare centres had been closed due to COVID-19 and, in several contexts, these had not yet restarted operations. Given the gap of close to two years, even where data collection was adapted to online interviews, some national consultants found it challenging to access users and document current user experiences. In addition, conditions in some economies have changed considerably since the pandemic. Due to the limited research timeline, this study is unable to capture all of these shifts and other recent developments or emerging evidence in the region.

Section 3

Childcare sector across Asia and the Pacific: Key policy actors and national policies





Childcare sector across Asia and the Pacific: Key policy actors and national policies

The childcare sector is composed of a number of different actors across state and non-state service providers. Table 3 summarizes the various types of childcare service providers and the nature of provisions that make up a country's childcare sector. The proportion of state and non-state providers depends upon the nature of national legislation, public spending on care, and other commitments towards child well-being and educational goals. State provision is the main focus of this study, as noted above. Other stakeholders within the childcare sector often consist of employer-run, privately-run, NGO-run or community-run centres, family-based care within the household, and faith-based organizations that provide childcare services.¹⁴ Many national policies draw from international legal frameworks and human rights conventions on childcare provision (see figure 2).

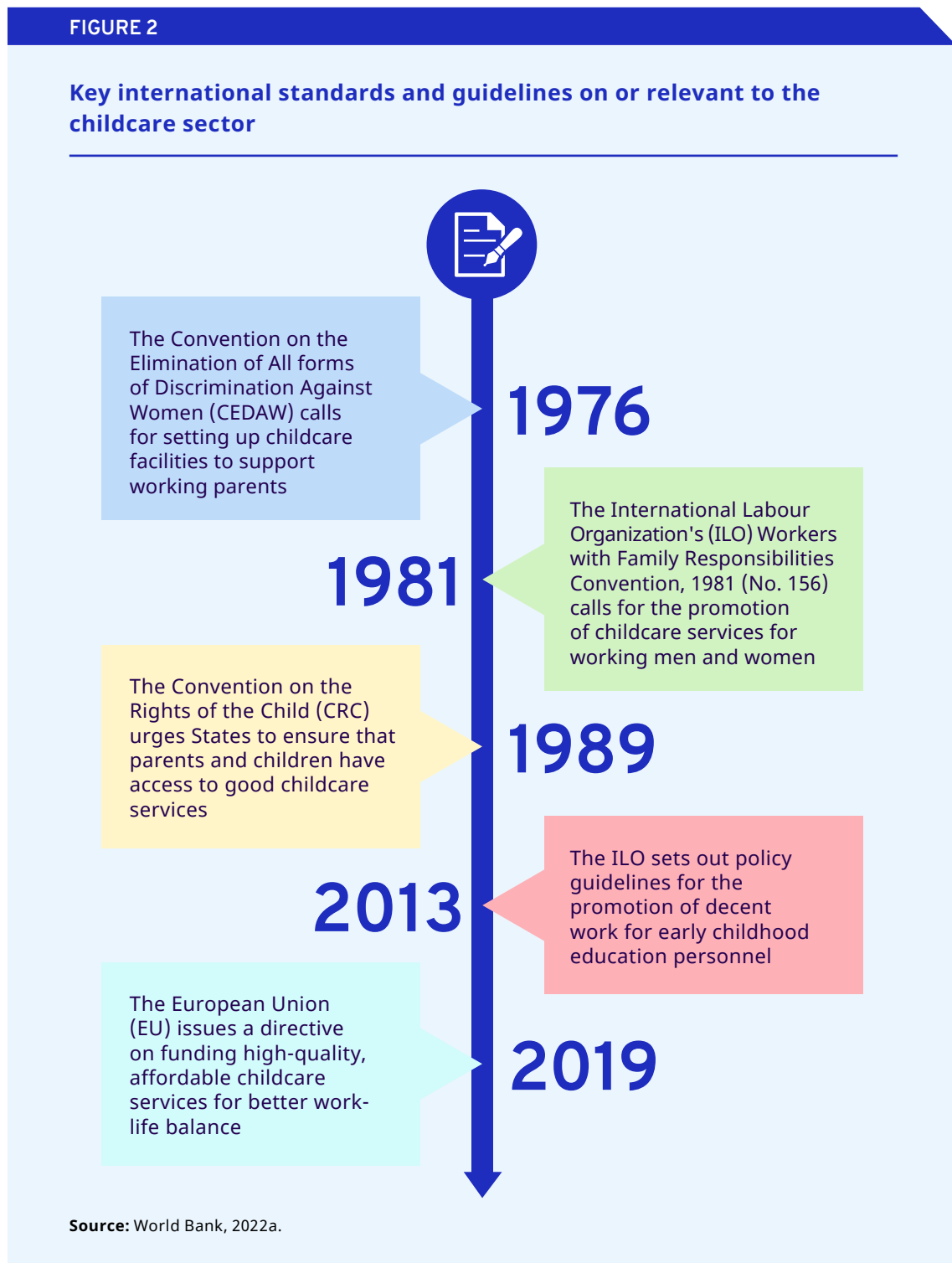
This section discusses these international guiding standards, before looking at the key policy actors and national policy legislation on early childhood care and development for each of the economies in Asia and the Pacific. The section is structured to present the data by subregions, in order to identify patterns or trends relevant to certain geographies that could support or hinder the provision of early childhood care services.

¹⁴ For example, the International Finance Corporation (IFC), We-Empower Asia, and Women in Informal Employment: Globalizing and Organizing (WIEGO) are working closely with private sector employers, women's entrepreneurship networks, and communities of informal workers, respectively, to improve the availability of good quality childcare services in order to support women (and men) workers.

► **Table 3. Different types of service provision in the childcare sector across Asia and the Pacific**

Type of childcare provision	Description
State-run and state-subsidized childcare centres	These are centres run by governments at the national, district or local levels. They may be universal with free provision, targeted or means-tested for low-income families, or charge user fees. They could also include centres run by NGOs but whose running expenses are fully or partly subsidized by the State. This could include childcare centres set up and funded under state schemes, but not run by the state or public employees.
Private-for-profit formal centres	These centres are privately managed by a single company or chain, which may offer high-cost to low-cost services. They are often attached to a primary school or standalone, are often registered, and may include cooperative enterprises.
Private-for-profit informal centres	These are privately run by individuals on rented premises and are usually unregistered.
NGO-run centres	These are centres run in local communities, for migrant workers, industrial zones workers, agricultural or construction workers by local not-for-profit organizations working in these communities. This includes childcare centres run by trade unions or other civil society or civic organizations.
Faith-based organization providers	These centres may be either affiliated or unaffiliated with a faith-based organization and may or may not be housed on their premises. They may often include religious instruction, or organized prayer or worship services.
Family day care	These are centres where a child is educated in a small group in a family style atmosphere at an educator's home, where the child sees the same educator or educators each day.
Parent cooperatives and/or community-run centres	These are either more formalized or informal groups of parents who come together to support each other by appointing one community member to care for a small group of children, often through joint management and decision-making.
Employer-run and employer-supported centres	These are often fully subsidized centres run on the premises of employers by a private agency or individuals appointed by the employer. These include private or publicly-run centres where employer's may subsidize user fees or reserve places for their employees' children. They also include centres in special economic zones set up in partnership with other companies, or centres set up within the premises of or next to office complexes. There are also individual factory-based childcare centres, often set up due to state mandates.
Nannies, au pairs and/or live-in domestic workers	This involves childcare provided within the child's own home by a live-in or part-time person employed for this purpose.

Figure 2 presents an overview of some key international standards, frameworks and guidelines which inform national level policies and programmes governing the childcare sector.

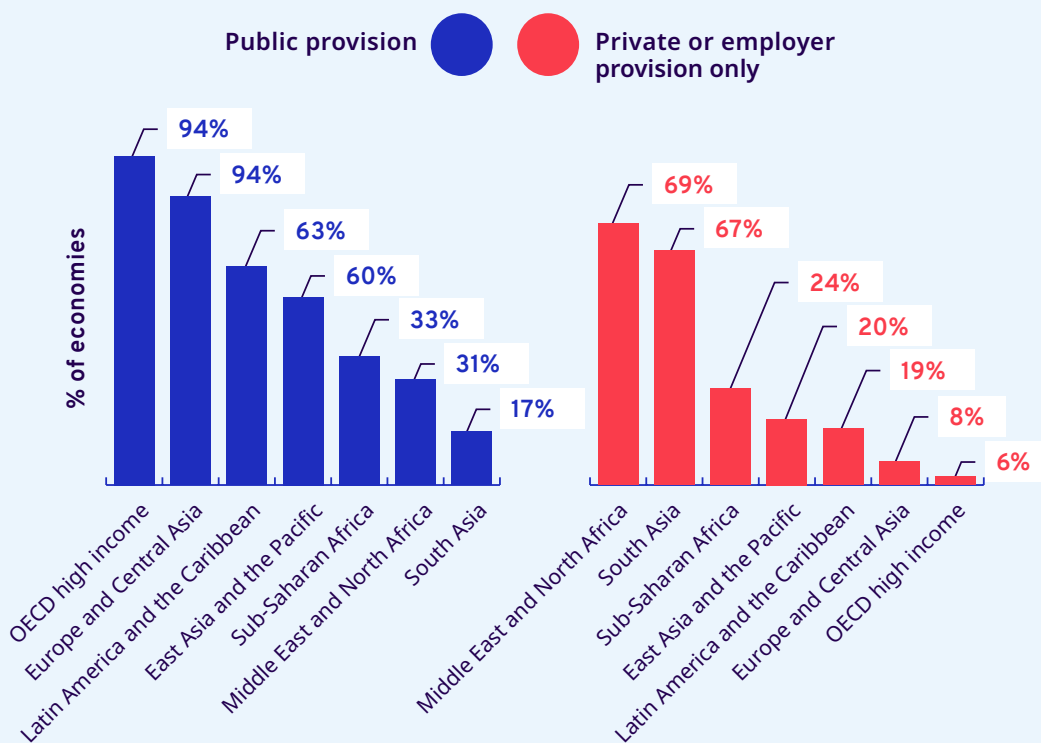


It is worth noting that there is no Asia-Pacific level directive on funding high quality, affordable childcare services for better work-life balance as there is in the European Union (EU) as of 2019. This is a crucial next step to advance childcare provision in Asia and the Pacific.

Figure 3 provides a global picture of legislation regulating the provision of childcare services through state-funded or state-run centres and through private or employer-run centres separately. As the figure shows, there is more public provisioning of childcare services in OECD economies. The regions of the Middle East and North Africa, and South Asia, have fewer economies with laws mandating the public provisioning of childcare. Conversely, these regions have a greater number of laws mandating provision by employers or regulating private childcare services. As specified in section 2 on the research methodology, this study focuses on public sector investments in the childcare sector and refers to private, employer-provided, and NGO-run early childhood care and development services only as relevant, especially in the absence of state provision.

FIGURE 3

Economies with legislation on public, private, or employer-run childcare provision



Source: World Bank, 2022a, p. 59.

A notable finding related to the key actors involved in policymaking, regulation and the implementation of childcare across Asia and the Pacific is the highly fragmented nature of the childcare policy landscape at the intra-national level. This highlights the importance of building greater system coherence through a more integrated and holistic approach to childcare policymaking and implementation in the region, as discussed in section 9.

A recent ILO publication calculates the childcare policy gap as the difference between the age at which childcare leave entitlements end (calculated as the sum of paid maternity, paternity and parental leave) and the age at which a child can avail childcare or educational services as mandated by national legislation (Addati, Cattaneo and Pozzan 2022). Annex 2 lists this “childcare policy gap” for economies in Asia and the Pacific, while Annex 3 provides details on maternity and paternity leave policies in the region. These tables indicate that Japan, the Republic of Korea, Mongolia, Azerbaijan and New Zealand have the lowest childcare policy gap (2.5 years or less), while Tonga, Papua New Guinea, Tajikistan and Indonesia have the largest gap (6 years or more). While this hints at some economies having an existing conducive policy climate for childcare provision, by definition it does not provide insight into the actual accessibility and uptake of services. For example, persons with childcare leave entitlements are usually employed in the formal economy, with permanent and fixed-term contracts, while workers with casual contracts or informal jobs – even within countries with strong legislation – might be excluded from access to childcare services.

The following sections take a closer look at the main legislation and state actors involved in policy provisions for the childcare sector, by subregions in Asia and the Pacific.

► 3.1. Central and West Asia

Childcare is a multisectoral matter in countries in Central and West Asia, as different line ministries either have clearly distinct responsibilities or overlapping roles. Table 4 provides an overview of government ministries in each country involved in policy formulation, service implementation, budgeting and financing, or the monitoring and evaluation of the childcare sector. For example, in Armenia, the Government has clearly delineated responsibilities for individual line ministries. The Ministry of Education, Science, Culture and Sport leads the design and development of early childhood care and development policy, while the Ministry of Health is responsible for children’s healthcare and nutrition in addition to determining and monitoring quantitative food standards. The Ministry of Agriculture is responsible for children’s nutritional intake and food safety, and the Ministry of Labour and Social Affairs is responsible for social protection.

Unlike Armenia, coordinated efforts on a childcare policy are not underway in Azerbaijan, where no mechanism is in place for collaboration among stakeholders. Georgia has seen a trend of increasing privatization and the increasing empowerment of local municipal authorities through the devolution of power. In the Kyrgyz Republic, state-run kindergartens for children between 3 and 6 years old remain, which have been operational since the Soviet era. Enrolments in community-based kindergartens increased in 2010 in the country. These are a structural unit of local government bodies, usually intended for children between 3 and 7 years old, where children are cared for in both full and half-day sessions (World Bank 2013a). To encourage organized learning and school readiness, a recent inter-ministerial initiative has piloted Child Development Centres in eight libraries across the country (UN Women 2019, 2).

In Tajikistan, key ministries involved in early childhood care and development – including the Ministry of Education and the Ministry of Health – operate largely independently. One exception is training for preschool teachers, to which stakeholders from all key ministries offer inputs. However, there is no established institutional anchor to coordinate early childhood care and development across sectors (World Bank 2013b). There is no separate governance system that specifically focuses on children’s rights in Turkmenistan. The country’s Ministry of Social Protection has specific responsibilities for the social welfare of the most vulnerable groups of children. Early childhood development is also a priority of the Ministry of Health and the medical industry, due to its involvement in infancy and early childhood health. There is no overarching policy statement on early childhood care and development in Uzbekistan. Preschool education is envisioned for children between 2 and 7 years old, leaving the care of 0–2-year-olds unaddressed (UNICEF 2017c; World Bank 2018b). The case is similar in Pakistan, where the key thrust is on primary and secondary education policy, but without any concerted early childhood care and development policy or regulation of the childcare sector.

► **Table 4. Landscape of the childcare sector in economies in Central and West Asia**

Economy	Key ministries	National policies
Armenia ^(a)	Ministry of Education, Science, Culture and Sport Ministry of Health Ministry of Agriculture Ministry of Labour and Social Affairs (MoLSA)	Law on Preschool Education, 2005 Law on Mainstream Education Strategic Action Plan on the Protection of the Rights of the Child 2017–21 Decree No. 588 of 21 June 2001 for the development of a National Programme on the Protection of Children’s Rights 2004–2015

Economy	Key ministries	National policies
Azerbaijan^(b)	<p>Ministry of Education</p> <p>Ministry of Health</p> <p>Ministry of Labour and Social Protection of Populations</p>	<p>Law of the Republic of Azerbaijan on Preschool Education, 2017</p> <p>State Standard and Programme of Preschool Education, 2010</p> <p>Order of the Minister of Education of the Republic of Azerbaijan on the Approval of Rules for School Preparation, 2010</p> <p>Education Law of the Republic of Azerbaijan, 2009</p>
Georgia^(c)	<p>Ministry of Education and Science</p> <p>Ministry of Labour, Health and Social Affairs</p> <p>Ministry of Economy and Sustainable Development</p> <p>Local municipalities</p>	<p>Law on Early and Preschool Education, 2016</p> <p>New Code of Child Rights, 2020</p> <p>Organic Law of Georgia Local Self-Government Code, 2014</p>
Kazakhstan^(d)	<p>Presidential Office</p> <p>Ministry of Education of the Republic of Kazakhstan</p>	<p>Constitution of the Republic of Kazakhstan, 1995</p> <p>National Law on Education, 2007</p> <p>Educated Nation Programme 2021–2025</p>
Kyrgyz Republic^(e)	<p>Department for Child Protection within the Ministry of Social Development</p> <p>Department of Maternity and Childhood within the Ministry of Health</p> <p>Kyrgyz Academy of Education under the Ministry of Education and Science</p> <p>Department of School, Preschool and Extracurricular Education within the Ministry of Education and Science</p>	<p>State Standard on Preschool Education and Care for a Child, 2007</p> <p>Code of the Kyrgyz Republic on Children, 2006</p> <p>Law on Preschool Education, 2009</p> <p>Observation of Healthy Children in Primary Health Care (Regulation No. 589), 2010</p>
Pakistan^(f)	<p>Provincial ministries/ Departments of Education in the provinces of Sindh, Punjab, Khyber Pakhtunkhwa, and Balochistan</p> <p>Ministry of Federal Education and Professional Training (coordinates national policies since the devolution of education to the provinces)</p> <p>Provincial Women Development Departments and Health Departments</p>	<p>National Education Policy 1998–2010 (this references policies related to early childhood development; however, no specific national ECCD policy exists)</p> <p>National Education Policy, revised in 2009</p> <p>Punjab Early Childhood Education Policy, 2017</p> <p>Sindh Early Childhood Education, (draft), 2014</p> <p>Sindh Education Sector Plans, 2014–2018</p> <p>National Plan of Action for Education for All, 2001–2015</p>

Economy	Key ministries	National policies
Tajikistan^(g)	Ministry of Education and Science Ministry of Health and Social Protection Ministry of Finance Oblast Education Department under the Ministry of Education and Science Republican Training and Methodological Centre and Academy of Education State Agency for Supervision in the Sphere of Education	State Standard for Preschool Education, 2014 Early Child Learning and Development Standards, 2010 Law on the Responsibility of Parents for Child Education and Upbringing, 2011 Design Norms, 1988, and Hygienic Requirements for Preschool Institutions Provision of Preschool Educational Institutions, 2015, and Hygienic Requirements of Preschool Institutions
Turkmenistan^(h)	Ministry of Health and the medical industry Ministry of Education Ministry of Social Protection National Institute of Education under the Ministry of Education	New Law on Education, 2009 Law on State Guarantees of the Rights of the Child, 2002 National Plan of Action for Children, 2018–2022 Presidential Resolution on Improvement of the Education System, 2007
Uzbekistan⁽ⁱ⁾	Ministry of Public Education (MoPE) Ministry of Higher and Secondary Special Education	National Programme for Personnel Training, 1997 Law on Child’s Rights Guarantees, 2008 Law on Education, No. 464-I Programme for Further Improvement of the Preschool Education System, 2017–2021 (announced in 2016)

Sources: (a) **Armenia:** Ayliffe et al. 2019; (b) **Azerbaijan:** World Bank 2018a; (c) **Georgia:** Findings from the national case study, see section 9; (d) **Kazakhstan:** Litjens et al. 2017; (e) **Kyrgyz Republic:** World Bank 2013a; (f) **Pakistan:** Pakistan, Ministry of Education and Professional Training 2015; (g) **Tajikistan:** World Bank 2019a; (h) **Turkmenistan:** UNESCO 2011; UNICEF 2019b; (i) **Uzbekistan:** Uzbekistan, Government of the Republic of Uzbekistan 2013; UNICEF 2017c.

► 3.2. South Asia

The geographical location, size, population and demographic trends of the six South Asian countries reviewed (see table 5) are very different. This subregion is generally characterized by very low and declining rates of women’s labour force participation, coupled with high burdens of unpaid care work for women, as discussed above. Recent reforms in the childcare sector have been taking place in many countries. Bangladesh announced a Day Care Centre Act in 2021 (see box 7) to regulate government-run and non-government-run early childcare centres.

Additionally, Section 94 of the Bangladesh Labour Act of 2006 mandates the provision of on-site childcare facilities for children between 0 and 6 years old for any establishment that employs more than 40 women. In India, women working in the organized/formal sector can similarly access day care facilities for their children, which their employers are obliged to provide. The Maternity Benefit Amendment Act of 2017 introduced employer-provided childcare benefits in organizations with 50 or more employees, irrespective of their gender. In 2019 and 2020, this maternity benefit law – alongside 28 labour laws – were integrated into four Labour Codes.

Both India's Occupational Safety, Health and Working Condition Code, 2020, and its Code on Social Security, 2020, make provision for crèche facilities to be availed by employees or workers employed by any contractor. Indian states are preparing draft rules which are due to be implemented at an appropriate time.¹⁵ Unorganized sector workers used to be able to avail crèche facilities aimed at low-income working women under the National Crèche Scheme. Sri Lanka has a well-developed ecosystem of policy actors across a number of government ministries, as well as well-developed guidelines for preschool education and day care centres through the National Policy for Preschool Education, developed by the National Education Commission. In practice however, in several countries in South Asia, state-run services remain targeted to low-income families, coverage is inadequate and services are generally poorly run, resulting in the childcare sector being fragmented with a number of private players, as discussed below.

Only a few childcare centres existed in Bhutan as of 2008, and 165 were operational in 2016, run by NGOs and corporations (Nazer 2016). Responsibility for early childhood care and development for 0–2-year-olds lies with the Ministry of Health, and for 3–5-year-olds with the Ministry of Education. Implementing partners include NGOs and international organizations, such as Save the Children, the United Nations Children's Fund (UNICEF), the Loden Foundation and the Tarayana Foundation.

The focus in Bhutan has shifted from babysitting to education, with the Ministry of Education playing a key role (Dhital 2016). Neither the Maldives nor Nepal has a dedicated early childhood care and development policy in place. In Nepal, different ministries are responsible for different components of child well-being, such as health, social protection, education and support for working parents.

¹⁵ More information is available on the Economic Times' website, <https://economictimes.indiatimes.com/news/india/almost-all-states-prepared-draft-rules-on-labour-codes-implementation-at-an-appropriate-time-bhupender-yadav/articleshow/92892472.cms?from=mdr>.

► **Table 5. Landscape of the childcare sector in economies in South Asia**

Economy	Key ministries	National policies
Bangladesh^(a)	<p>Ministry of Women and Children Affairs</p> <p>Ministry of Primary and Mass Education (which leads on pre-primary education)</p> <p>Ministry of Health and Family Welfare</p> <p>Ministry of Social Welfare</p>	<p>Early Childhood Care and Development National Policy, approved in 2013</p> <p>Comprehensive Policy on Early Childhood Care and Development</p> <p>Early Childhood Care and Development Policy Operation and Implementation Plan, 2016 (draft)</p> <p>National Children Policy, 2011</p> <p>National Plan of Action EFA (NPA II) 2003–2015</p> <p>National Education Policy, 2010</p> <p>Operational Framework for Pre-primary Education</p> <p>Early Learning Development Standards (validation underway)</p>
Bhutan^(b)	<p>Ministry of Education</p>	<p>Bhutan Early Learning and Development Standards</p> <p>National Policy on Early Childhood Care and Development</p> <p>Bhutan Education Blueprint</p> <p>Education Sector Strategy: Realizing Vision 2020 Policy and Strategy</p> <p>11th Five Year Plan 2013–2018, Programme Profile (Vol. 2)</p>
India^(c)	<p>Ministry of Women and Child Development</p> <p>Ministry of Health</p> <p>Ministry of Labour and Employment</p>	<p>Integrated Child Development Scheme (ICDS) since 1975</p> <p>National Early Childhood Care Education and Development Policy, 2013</p> <p>National Crèche Scheme for the Children of Working Mothers</p> <p>Factories Act, 1948</p> <p>Maternity Benefit Act, 1961, and Paternity Bill, 2017</p> <p>Mahatma Gandhi National Rural Employment Guarantee Scheme</p> <p>Guidelines on Accredited Social Health Activists, National Health Mission</p> <p>Crèche facilities under the Occupational Safety, Health and Working Condition Code, 2020, and the Code on Social Security, 2020</p>

Economy	Key ministries	National policies
<p>India^(c) (continued)</p>		<p>National Minimum Guidelines for setting up and running crèche facilities under the Maternity Benefit Act</p> <p><i>Pradhan Mantri Matru Vandana Yojana</i></p> <p><i>Surakshit Matritva Aashwasan Yojana</i></p>
<p>The Maldives^(d)</p>	<p>Ministry of Education</p> <p>Ministry of Health</p> <p>Ministry of Gender, Family and Social Services</p>	<p>No standalone national policy on early childhood care and development</p> <p>National Child Health Strategy – Every Newborn Action Plan. 2016–2020</p> <p>Maldives National Reproductive, Maternal, Newborn, Child and Adolescent Health Strategy and Action Plan 2020–2025 (in which early childhood care and development is integrated)</p> <p>First 1,000 Days of Life Social and Behavioural Change Campaign Strategy, 2019–2021</p> <p>Maldives Education Sector Plan, 2019–2023</p> <p>Maldives Preschool Administration Act, 2012, which was integrated into the Maldives Education Act, 2020</p>
<p>Nepal^(e)</p>	<p>National Planning Commission (NPC)</p> <p>Ministry of Education, Science and Technology</p> <p>Child Health Division under the Ministry of Health and Population</p> <p>Ministry of Finance</p> <p>Ministry of Labour, Employment and Social Security</p>	<p>Strategy Paper for Early Childhood Care and Development, 2004–05</p> <p>National Employment Policy</p> <p>Social Protection Act, 2017</p> <p>Basic and Primary Education Master Plan, 1997–2002</p> <p>Ten Year National Programme for Action for Children and Development, 1992</p> <p>Education for All (EFA), 2004–2009</p> <p>Core Document for Education for All, 2004–2009</p> <p>Education for All National Plan of Action, 2000–2015</p> <p>School Sector Reform Plan (SSRP), 2009–2016</p> <p>School Sector Development Programme (SSDP), 2016–2023</p> <p>Compulsory and Free Education Act, 2075 (2018), and the Children’s Act, 2075 (2018) which mention legal provisions related to early childhood development)</p> <p>National Strategy for Early Childhood Development 2077–2088 (2020–2030)</p>

Economy	Key ministries	National policies
Sri Lanka^(f)	State Ministry of Women, Child Affairs and Social Empowerment Ministry of Public Administration Provincial councils and local governments Ministry of Education Family Health Bureau of the Ministry of Health Ministry of Community Empowerment, Estate Infrastructure and Development National Child Protection Authority, the Department of Probation and Childcare, and the Children's Secretariat	National Policy on Preschool Education, 2019 National Day Care Centre Guidelines, 2017 Guidelines and Standards for Child Care Institutions, 2013 National Early Childhood Care and Development Policy, 2018 National Policy on Early Childhood Care and Education under the National Education Policy Framework, 2020–2030, developed by the National Education Commission (cabinet decision pending)

Sources: (a) **Bangladesh:** ARNEC n.d.; (b) **Bhutan:** UNICEF 2017a; (c) **India:** ILO, unpublished; (d) **the Maldives:** UNICEF and ARNEC, n.d.; (e) **Nepal:** Findings of the national case study on Nepal; (f) **Sri Lanka:** Findings of the national case study on Sri Lanka.

► 3.3. Southeast Asia

Countries in Southeast Asia are at different levels and stages of development, with varied income levels and progress on gender equality metrics (ESCAP 2021b).

Table 6 provides insight into the varying levels of attention to and action on early childhood care and development in the subregion. Thailand, for example, has made strides in recent years in providing high quality early childhood care and development services. As table 6 shows, a multisectoral and coordinated effort has been made in Thailand to provide universal coverage for children from 3 years old onwards. The National Early Childhood Development Committee, which brings together several relevant ministries and agencies, drives the agenda for holistic childcare investments for children aged 0–6 years old (Santander 2019). The creation of an Early Childhood Agency as a key regulatory authority for children under 7 years old in Singapore, similarly represents a step forward to create the necessary cross-sectoral efforts and coordination across a number of implementing line agencies (see box 1 for details).



Box 1. Promising practice on Singapore's Early Childhood Development Agency (ECDA)

The ECDA's key responsibilities for children under the age of 7 include:

1. Overseeing measures to improve the quality standards of early childhood programmes, including regulation, quality assurance and the provision of early childhood development resources.
2. Facilitating the training and continuing professional development of early childhood professionals.
3. Devising a master plan for infrastructure and staffing resources to support the early childhood sector.
4. Providing subsidies and grants to keep preschool programmes affordable, especially for low- and middle-income families.
5. Conducting public education and outreach to raise parents' awareness of, and support for, their children's development.
6. Uplifting the image and professionalism of the early childhood sector through strategic partnerships and programmes.

Source: Singapore, Early Childhood Development Agency 2019.

While the Philippines has put in place national legislation and local government unit funding for the childcare sector, the national case study on the Philippines (see section 9) shows that gaps remain in implementation. The focus in Timor-Leste, Brunei Darussalam, Lao People's Democratic Republic and Viet Nam is largely on education, and these countries have yet to develop detailed national early childhood care and development policies. As a result, the childcare sector in these countries remains underdeveloped and fragmented, with a number of private and unregulated service workers.

Launched in 2021, the Comprehensive Care Framework of the Association of Southeast Asian Nations (ASEAN) "*serves to guide ASEAN's development of the care economy in response to complex crises and challenges*", and includes childcare.¹⁶ While this initiative is not binding, it includes childcare and could enhance the promotion of investments in care policies and care services across ASEAN Member States.¹⁷

¹⁶ More information is available on ASEAN's website, <https://asean.org/wp-content/uploads/2021/10/8.-Final-ASEAN-Comprehensive-Framework-on-Care-Economy.-20-Oct-2021.pdf>.

¹⁷ ASEAN's Member States are Brunei Darussalam, Cambodia, Indonesia, Lao People's Democratic Republic, Malaysia, Myanmar, the Philippines, Singapore, Thailand and Viet Nam.

► **Table 6. Landscape of the childcare sector in economies in Southeast Asia**

Economy	Key ministries	National policies
Brunei Darussalam	Ministry of Education	No early childhood care and development policy exists for children under 5 years old
Cambodia^(a)	Ministry of Education, Youth and Sport oversees the National Committee for Early Childhood Care and Development which consists of 14 cross-cutting ministries Ministry of Health largely focuses on children aged 0–2, while the Ministry of Education, Youth and Sport focuses on children from aged 3–8	National Policy on Early Childhood Care and Development (endorsed by the Council of Ministers on 19 February 2010) Sub-Decree on Management of Community Preschool (approved by the Prime Minister on 29 December 2017) National Action Plan on Early Childhood Care and Development, 2014–2018
Indonesia^(b)	Integrated collaboration between: Ministry of Education, Culture, Research and Technology (on education) Ministry of Religious Affairs Ministry of Health (on child health) Ministry of Women Empowerment and Child Protection (on women’s and children’s well-being and protection) Ministry of Social Affairs (on social protection) BAPPENAS (National Planning Agency) Ministry of Home Affairs (on local government regulation and implementation) Ministry of Finance (on financing)	Law No. 20/2003 on the Indonesian National Education System Presidential Regulation No. 60/2013 on Holistic Integrated Early Childhood Development Ministry of Social Affairs Regulation No.2, 2012, on Childcare Centre Registration
Lao People’s Democratic Republic^(c)	Department of Early Childhood Education under Ministry of Education and Sports Education Quality Assurance Centre Ministry of Health Ministry of Labour and Social Welfare	Law on Education Law on Gender Equality Civil Law, 2017 Law on Family Registration Social Security Law, revised 2018 National Plan of Action on Mothers and Children, 2021–2025

Economy	Key ministries	National policies
Myanmar^(d)	Ministry of Education (MOE) Ministry of Social Welfare, Relief and Resettlement	Myanmar Multisectoral Early Childhood Care and Development Policy Education Policy Brief National Social Protection Strategic Plan Health Policy Brief
Malaysia^(e)	Services for children aged 0–3: Department of Social Welfare, Ministry of Women, Family and Community Development Services for children aged 4–6: Ministry of Education, Ministry of Rural and Regional Development, Department of National Unity and Integration	Childcare Act, 1984, amendment 2007 (Act 308 and Act A1285) National Education Act, 1996 (Act 550) Special Education Act, 1997, the Child Act, 2001 (Act 611) National Protection Policy for Children, 2009 National Nutrition Policy, 2003 Early Childhood Care and Development Policy, 2008 Child Act (Amendment), 2016
Philippines^(f)	Early Childhood Care and Development Council under the Office of the President (oversees the implementation of the national early childhood development system) Department of Education Department of Social Welfare and Development Department of Health Philippine National Nutrition Council	Kindergarten Education Law Act (No.10157) Early Years Act, 2013 (No.10410) Early Childhood Care and Development Republic Act, 2000 (No. 8980) (repealed in 2013) The establishment of early childhood care and development centres is also certified under Republic Act 6972, <i>Barangay</i> -Level Total Development and Protection of Children Act
Singapore^(g)	Ministry of Education Ministry of Social and Family Development Early Child Development Agency Ministry of Health	Early Childhood Development Centres Act Children and Young Persons Act 4th and 5th Committee on the Rights of the Child Periodic Reports (Singapore submissions)
Thailand^(h)	Ministry of Education Ministry of Public Health Ministry of Interior Ministry of Labour and Social Welfare	National Early Childhood Development Plan

Economy	Key ministries	National policies
Thailand^(h) (continued)	National Early Childhood Development Committee and National Institute for Early Childhood Care and Education Universities and NGOs are also involved in the implementation of early childhood care and education programmes	
Timor-Leste⁽ⁱ⁾	Ministry of Education and Culture Ministry of State Coordination and Social Affairs	Preschool or Early Childhood Education Policy for children aged 3–5 Draft Early Childhood Care and Development Policy (supported by UNICEF, but has yet to be endorsed and approved)
Viet Nam^(j)	Ministry of Labour, Invalids and Social Affairs Ministry of Education and Training Ministry of Health Committee for Population, Family and Children (responsible for overall child-focused policy) Viet Nam Women’s Union (responsible for parent education)	Law on Protection, Care and Education for Children 2004 (Article 5) Education Law, 2005

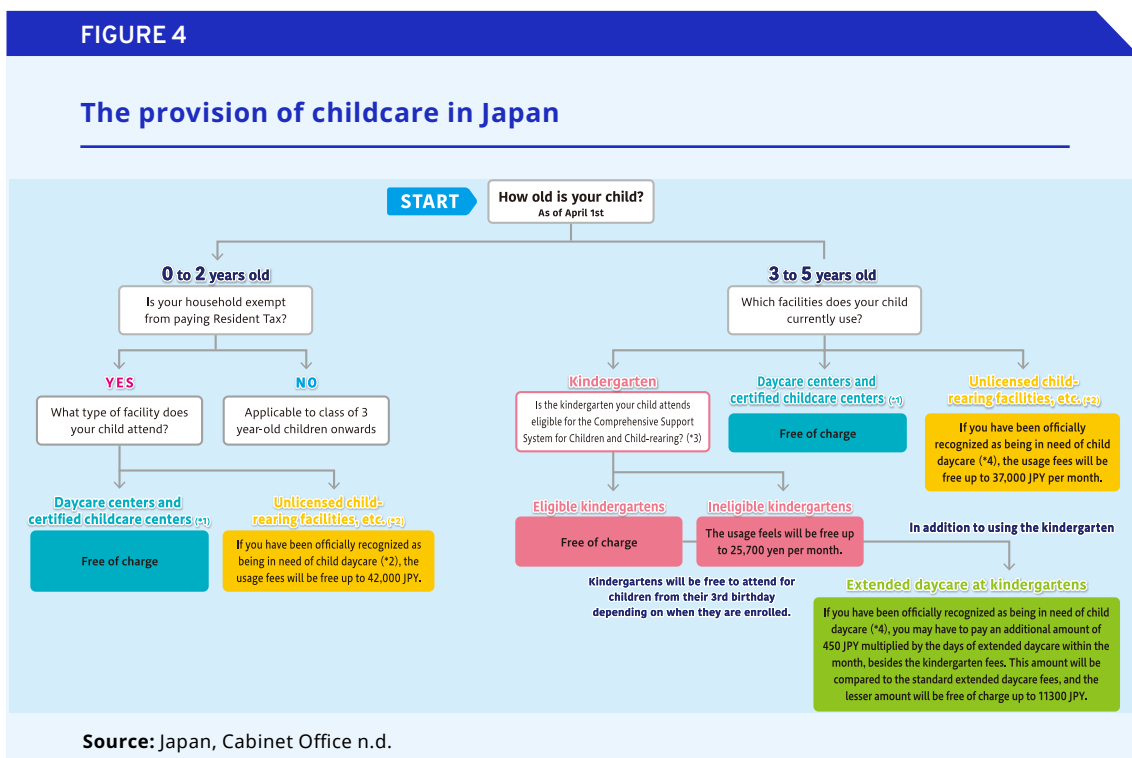
Sources: (a) **Cambodia:** ARNEC n.d.; (b) **Indonesia:** Findings from the national case study on Indonesia; (c) **Lao People’s Democratic Republic:** Findings from the national case study on Lao People’s Democratic Republic; (d) **Myanmar:** ARNEC n.d.; (e) **Malaysia:** ARNEC n.d.; (f) **The Philippines:** ARNEC n.d.; findings of the national case study on the Philippines; (g) **Singapore:** ARNEC n.d.; (h) **Thailand:** Santander 2019; (i) **Timor-Leste:** ARNEC n.d.; (j) **Viet Nam:** ARNEC n.d.

► 3.4. East Asia

East Asia includes some advanced, industrialized and high-income economies, including Japan and the Republic of Korea, which are OECD members. Access to greater fiscal resources, advanced early childhood care and education research, as well as an enabling policy environment of strong public investment in social care services have resulted in well-developed childcare systems in the subregion. Table 7 provides an overview of the key policy actors and policies impacting the childcare sector in economies in East Asia. For example, the Republic of Korea’s Ministry of Education, and its Ministry of Health and Welfare are supported by the by the Korean Educational Development Unit, the Korean Institute of Health and Social Affairs and the Korean Women’s Development Institute to conduct research on advancing childcare policy and quality service provision (OECD 2004).

The recently launched Nuri Initiative represents the core of early childhood education policies for children between 3 and 5 years old, including a common curriculum, a common government-provided subsidy, and a common in-service teacher training programme (NCEE 2018). The Ministry of Gender Equality and Family runs childcare centres that offer care for infants between 3 months and 3 years old on a full- or half-day basis.¹⁸

Publicly-funded childcare facilities in Japan cater to children between 0 and 5 years old. For children between 3 and 5 years old, fully-subsidized universal access to childcare is guaranteed, including for children with disabilities. A full subsidy for children between 0 and 2 years old is available to households that meet certain criteria, with automatic full subsidies for children with disabilities in this age group. Public expenditure in Japan at the pre-primary level, and especially on the 0–2-year-old age group is below the OECD average (OECD 2017). To become a childcare worker, an individual must obtain a national qualification, called ‘childcare teacher qualification’. In 2015, the country established a Children and Child-rearing Headquarters under the Cabinet Office with a view to integrating and streamlining efforts related to the childcare sector. The figure below shows how childcare is provided in Japan.



¹⁸ More information is available on the Ministry of Gender Equality and Family’s website, http://www.mogef.go.kr/eng/pc/eng_pc_f007.do.

After following the one child policy for many years, China has begun to address its aging population. In June 2021, the Decision of the Central Committee and the State Council on Optimizing Family Planning Policy to Promote Long-term and Balanced Development of the Population was issued, allowing each family to have up to three children. This means an anticipated increase in the familial responsibilities for childcare which, in turn, has accelerated the need for childcare services, especially for 0–3-year-olds.

The number of childcare places for children under 3 years old per 1,000 people in China was only 1.82 in 2020, far lower than in OECD countries (12 per 1,000 people). The Outline of the 14th Five-Year Plan for National Economic and Social Development and China's Vision 2035 clearly state that the childcare service capacity per 1,000 people should be no less than 4.5 by 2025 (China, Government of the People's Republic of China 2021).

► **Table 7. Landscape of the childcare sector in economies in East Asia**

Economy	Key ministries	National policies
China^(a)	Ministration of Education Ministration of Hygiene Family Planning Department National Education Committee, 1989 National Development and Reform Commission of China	The introduction of integrated birth-to-age 6 education and care Early childhood education in rural or remote areas Early childhood curriculum reform Rules on Kindergarten Routines and Early Childhood Teacher Education
Japan^(b)	Cabinet Office Ministry of Education, Culture, Sports, Science and Technology Ministry of Health, Labour and Welfare	Child Welfare Law (Law No. 164), 1947 Japanese School Education Law, Act 22 (governs kindergartens) New integrated early childhood care and development system, called <i>nintei-Kodomo-en</i> since 2015 Child and Child-rearing Support Act (Act No. 65), 2012 Act for Partial Amendment of the Act on Promotion of Comprehensive Provision of Education, Childcare, etc. for Preschool Children (Act No. 66), 2012 Standards for the Equipment and Operation of Child Welfare Facilities, Ordinance of the Ministry of Health and Welfare (No. 63), 1948 (amended in 2022)

Economy	Key ministries	National policies
Japan^(b) (continued)		Act on the Improvement of Related Laws Accompanying the Enforcement of the Act on the Partial Amendment of the Child and Child Rearing Support Act and the Act on the Promotion of Comprehensive Provision of Education, Childcare, etc. for Preschool Children (Act No. 67), 2012
Mongolia^(c)	National Council for Children Standing Committee on Child Protection Ministry of Education and Science Ministry of Labour and Social Protection Ministry of Finance Ministry of Health	Law on Childcare Services General requirement for Child Day Care Labour Law Gender Equality Law
Hong Kong, China^(d)	Education Bureau Social Welfare Department Department of Health	Free Quality Kindergarten Education Policy Quality Assurance Framework, 2012–13
Republic of Korea^(e)	Ministry of Education Ministry of Health and Welfare Committee of Early Childhood Education Development, 2000 Committee on the Development of Childcare, 2001 Ministry of Gender Equality and Family	Early Childhood Education Promotion Act, 1982 Child Welfare Act, 1961 Educational Reform Committee, 1997 Comprehensive Plan for the Development of Early Childhood Education Promotion Plan for Childcare

Sources: (a) **China:** World Bank 2016; (b) **Japan:** OECD 2017; (c) **Mongolia:** Findings of the national case study on Mongolia; (d) **Hong Kong, China:** Rao et al. 2018; (e) **Republic of Korea:** Na and Moon 2003; OECD 2004.

► 3.5. The Pacific

Among countries in the Pacific, Australia and New Zealand have well-established and developed childcare sectors with a mix of public and private provision. The Pacific Regional Council for Early Childhood Care and Education (PRC4ECCE), set up in 2011, sets guidelines to support Pacific countries to develop their childcare policies and regulate the childcare sector across 15 countries¹⁹ (PRC4ECCE and UNICEF 2013, 4).

¹⁹ The Cook Islands, the Federated States of Micronesia, Fiji, Kiribati, Nauru, Niue, Palau, Papua New Guinea, the Marshall Islands, Samoa, the Solomon Islands, Tonga, Tokelau, Tuvalu, and Vanuatu.

The focus of childcare policies in Pacific Island countries appears to largely be on 3–5-year-olds. As such, the need for childcare for children under the age of 3 remains largely unaddressed. Table 8 outlines the main policy context, key actors and legislative frameworks governing childcare in countries in the Pacific. Among Pacific Island countries, Fiji, Vanuatu and Papua New Guinea have well-developed national frameworks and legislation on childcare. The Government of Vanuatu created the five-year Vanuatu Education Support Programme in 2012 with development partners – namely, Australia and New Zealand – to place a greater emphasis on early learning and strengthen early childhood care and education. Elements of care, development and education are included in Fiji’s early childhood care and development framework, which caters to children between 0 and 8 years old. Fiji has also been experimenting with employer-run childcare centres in collaboration with the International Finance Corporation (Fiji, Government of Fiji 2021a).

There is one primary and one secondary school in Niue,²⁰ and five government schools in Nauru, offering three years of early childhood education at the level of playschool, preschool and preparatory school for children aged 3 to 5 years old. Nauru is one of the only Pacific Islands to have made early childhood education compulsory and ensured its free provision by the Government. In the Cook Islands, there were 31 schools in 2016, consisting of one standalone early childhood education centre, 11 primary schools (10 of which had an ECCD centre attached) and 14 area schools with ECCD centres attached. The vast majority of schools are State schools, with only five church-run and three privately-run centres (Cook Islands News 2018; UNICEF 2017f and 2017e).

The Marshall Islands has received World Bank project funding to invest in and boost early childhood care and development services. The project focuses on improving the availability, quality and coverage of services through better health equipment, infrastructure and supplies, and improved data on health. However, it does not address decent work conditions for childcare workers. The initiative is part of a second phase of funding, following on from the first phase of the Early Child Development Project completed in 2019 (World Bank 2022c). The first phase was a multisectoral project funded through a grant of US\$13 million from the International Development Association (IDA), and delivered in partnership with the Government of the Republic of the Marshall Islands and UNICEF (World Bank 2019b). Early Childhood education in Palau is delivered by Head Start programmes, funded by the United States of America. Information is extremely limited on the state of early childhood care and development services in Palau. Box 13 in section 7.1 showcases a recent official decree to incentivize retired senior citizens to join early childhood care centres. Tuvalu has received funding support of US\$14 million from the World Bank to set up and expand early childhood care and development centres (Lucas 2020).

²⁰ More information is available on Education Profiles’ website, <https://education-profiles.org/oceania/niue/~inclusion>.

► **Table 8. Landscape of the childcare sector in economies in the Pacific**

Economy	Key ministries	National policies
Australia^(a)	Ministry of Education	National Early Childhood Development Strategy, 2009 Students First, 2014 Australian Education Act, 2013 Child Care Act, 1972 National Partnership Agreement on Early Childhood Education National Quality Framework for Early Childhood Education 2012
Cook Islands^(b)	Ministry of Education	Education Master Plan, 2008–2023 National Sustainable Development Plan, 2016–2020
Federated States of Micronesia^(c)	Department of Education (DoE)	Federated States of Micronesia Strategic Development Plan, 2004–2023
Fiji^(d)	Ministry of Education, National Heritage, Culture and Arts	Education for All (EFA), 2000 Education Commission Report, 2000 Education Act, 1978 Public Service Act, 1999 Public Service Code of Conduct Social Justice Act, 2001 Compulsory Education Act, 2000
Kiribati^(e)	Church groups, NGOs and community groups Kiribati Early Childhood Care and Education Association (while this exists, it is informal)	Kiribati Early Childhood Care Policy, 2010 Kiribati Early Childhood Curriculum, 2010 Education Sector Strategic Plan (ESSP)
Nauru^(f)	Department of Education	Footpath for Education and Training Strategic Plan 2008–2013, set out in the National Sustainable Development Strategy 2005–2025
New Zealand	Ministry of Social Development Ministry of Education Ministry of Health	Working for Families Package, introduced in 2004 <i>Ngā Huarahi Arataki: A 10-Year Strategic Plan for Early Childhood Education</i>

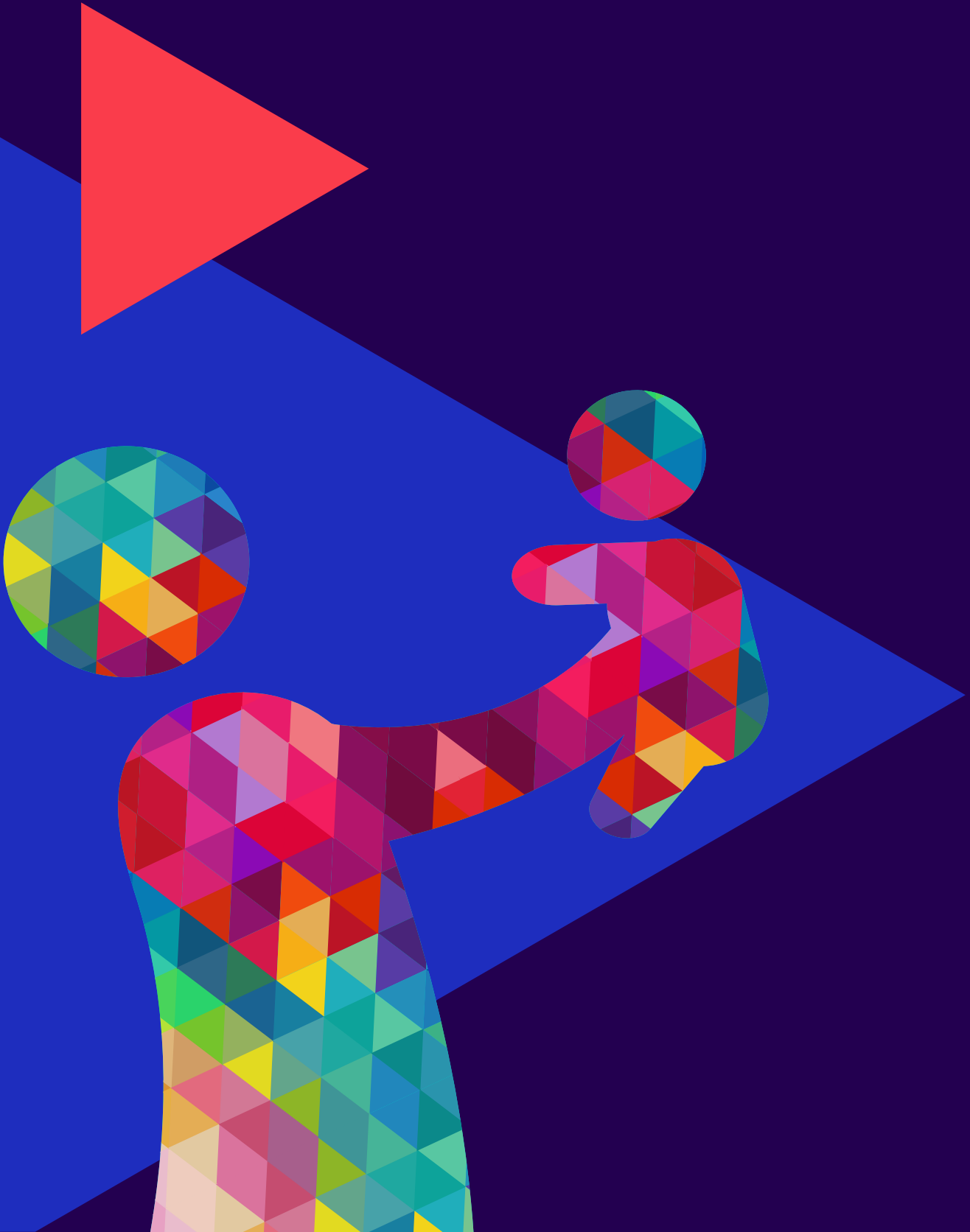
Economy	Key ministries	National policies
Niue ^(g)	Ministry of Social Services, under which the relevant departments for childcare are the Departments of Education, Health, and Justice, Lands, Survey and Community Affairs	Education Act, 1989
Papua New Guinea ^(h)	Department of Education Department of Health	<i>Lukautim Pikinini</i> (Child Welfare) Act, 2007 Education Act National Health Plan National Education Policy National Nutrition Policy
Samoa ⁽ⁱ⁾	Ministry of Education, Sports and Culture Ministry of Women, Community and Social Development National Council of Early Childhood Education	Minimum Service Standards (MSS), 2015 Framework for Action in Education, 2030 National Action Plan for Children in Samoa
Solomon Islands ^(j)	Ministry of Education and Human Resources Development National Advisory Committee on Children Ministry of Women, Youth, and Children Affairs Ministry of Health and Medical Services	National Development Strategy, Vision: A United and Vibrant Solomon Islands National Education Action Plan, 2013–2015 National Children’s Policy with National Plan of Action: April 2010, National Early Childhood Education Policy statement 2008
Tonga ^(k)	Ministry of Education and Training	Education Act, 2013 (covers 4–18-year-olds) Tonga Education Policy Framework, 2004–2009 Tonga Education <i>Lakalaka</i> Policy Framework, 2012–2017
Tuvalu ^(l)	Ministry of Education, Youth and Sport	Tuvalu Education Strategic Plan, 2011–2015 Tuvalu National Strategy for Sustainable Development, 2005–2015
Vanuatu	Ministry of Education	National Framework on Early Childhood Care and Education, 2010

Sources: (a) Australia: Santiago et al. 2011; (b) Cook Islands: UNICEF 2017g; (c) Federated States of Micronesia: UNICEF 2017i; (d) Fiji: Fiji, Ministry of Education 2008; (e) Kiribati: UNICEF 2017d; World Bank 2014b; (f) Nauru: UNICEF 2017e; (g) Niue: UNICEF 2017f; (h) Papua New Guinea: Papua New Guinea, Department of Community Development 2007; (i) Samoa: Findings from the national case study on Samoa; (j) Solomon Islands: World Bank 2013b; (k) Tonga: UNICEF 2017h; (l) Tuvalu: UNICEF 2017i.

This section has provided an overview of key policy actors and national policies, guidelines and frameworks relevant to the childcare sector across subregions and economies in Asia and the Pacific. The report now turns to the extent to which these are implemented, how they are implemented and, crucially, how they are experienced by childcare users (mothers, fathers and other family members) and childcare workers. Taking up each of the AAQDW principles, the next four sections examine experiences of the childcare sector across economies and subregions, identifying key gaps and challenges. These findings inform the policy recommendations presented in section 9.

Section 4

Accessibility

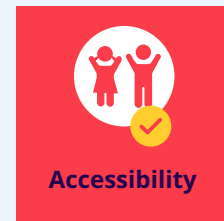


▶ 4

Accessibility



Key messages



- ▶ There is a **lack of the statutory right to childcare** and, consequently, **an absence of childcare systems**.
- ▶ **Children aged 0–2 are the most under-served**, with mothers forced to exit the workforce to care for this age group.
- ▶ **Children with disabilities** have particularly compromised access to childcare.
- ▶ In terms of coverage, **socio-economic inequalities** and the **rural-urban divide** are key determinants of childcare accessibility. Low-income rural households are the worst affected.
- ▶ **Caste and language** form another axis of exclusion.
- ▶ **A lack of transport** to childcare centres hinders access and increases the drudgery associated with availing childcare.
- ▶ **A lack of flexibility** in childcare centres' hours of service also compromises accessibility.

The ILO estimates that only 17.7 per cent of potential parents worldwide (687 million people) live in countries with statutory provisions for public childcare services for children between 0 and 2 years old (Addati, Cattaneo and Pozzan 2022). Access to childcare services varies substantially across countries and regions, and is mediated by a number of factors.

These include the location and demographic profile of households (understood intersectionally on the basis of income, class, caste, race, ethnicity, the mother's education, and geographical location), the age, sex and disability status of the child, and various supply side factors, such as the location of centres, their hours of operation, their ability to cater to children with special needs, and their ability to cater to younger age groups. For example, 25.9 per cent of children in women-headed households around the world live in extreme poverty, compared to 17.7 per cent of those in households head by men (UNICEF, ILO and WIEGO 2021). This demonstrates that the links between women-headed households and child poverty are critical. It also highlights the importance of addressing the needs of vulnerable households through an intersectional lens, which considers the household's structure – for instance, the additional burdens and reduced support in single-parent households – parents' income and education levels, and the disability status of parents and children, among other factors.

This section takes a closer look at the intersectional profile of households and the profile of children in relation to their access to childcare services. It also assesses factors such as the distance from homes or workplace to childcare centres, these centres' timings and hours of operation, among other issues that are found to influence parents' decisions to enrol children in centre-based care.

► 4.1. Intersectional profile of households

Compelling evidence confirms that childcare services are vital, especially for vulnerable and disadvantaged families, as these enable children to benefit from early education and allow parents to be in paid work. Therefore, childcare services have tremendous potential to close gaps in school outcomes, employment and earnings between poor and high-income groups. This underscores the need for childcare services to help families gain access to more income-generating possibilities and thereby help protect them against poverty, particularly for women. Despite the demand for childcare services, their availability remains scant across most of the Asia and the Pacific region, leading to a childcare deficit.²¹

²¹ It is important to bear in mind that different studies and international organizations estimate the care deficit and coverage gaps in different ways. The World Bank uses female labour force participation as a proxy to estimate the number of families with two working parents, or single-headed households with one working parent, that need childcare (Devercelli and Beaton-Day 2020). The ILO's recent Care at Work report estimates the childcare policy gap from the end of the statutory childcare-related leave period, to the provision of a statutory right to childcare services or pre-primary education, if available. That report also builds on a macro-simulation for 82 countries on the investment requirements and benefits of free, universal, publicly-funded childcare services, as part of a gender-transformative care policy package. It does so by calculating the investment requirements for all children of a certain age in proportion to the selected enrolment rate by age group, and then subtracts the current public investment, if available. This methodology overrides existing provision with the new system to guarantee a transformative package for all beneficiaries (ILO 2022; De Henau 2022). The UN Women and ILO policy tool assesses the care coverage gap as the difference between estimated potential demand and current supply – that is, the number of potential care beneficiaries who would need to be covered by service provisioning in order for the country to achieve the policy target, minus the number of care beneficiaries who already have access to services (UN Women and ILO 2021).

Devercelli and Beaton-Day (2020) estimate that 72 per cent of children below the age for entry into primary school need some form of childcare service worldwide (593 million children). Of these, 59 per cent do not currently have access to childcare (349 million children) and this demand is as much as five times higher in low- and lower-middle income countries (Devercelli and Beaton-Day 2020). While Asia-Pacific estimates are unavailable, factoring in the large number of low- and middle-income countries in the region, as well as women headed-households and women in informal work, it is fair to presume that a large proportion of the need for childcare comes from the region.

A key finding of this study is that **disparities in access are created on account of the socio-economic status of households** and the **rural-urban divide, and especially at their intersection. Low-income, rural households are worst affected**. High income countries, especially OECD members such as Australia, Japan, the Republic of Korea and New Zealand, are able to provide more universal or means-tested access (based on the needs and abilities of users) to childcare services, compared with economies in South Asia which rely more heavily on private provisioning (World Bank 2022a, 58). The South Asian context is particularly illustrative of this trend. In Bangladesh, estimates from the most recent Household Income Expenditure Survey (HIES) 2016–17, indicate that only 35.3 per cent of 5-year-old children from the poorest families are enrolled in preschool, compared to 61.3 per cent from the wealthiest families. Conversely, among those not enrolled in preschool, 39 per cent of children are from the poorest quintile, compared with 17 per cent from the richest quintile (World Bank 2017). According to the World Bank, the vast majority of these poor children live in rural areas. In India, the Ministry of Women and Child Development used to run a National Crèche Scheme for low-income working mothers. However, it is unclear if the scheme is continuing, and the number of centres has declined in recent years due to funding-related difficulties. From 23,000 crèches in 2015, there were reportedly only 7,000 as of 2019 (CWDS-FORCES 2020). At the same time, private day care centres catering to high-income segments in metropolitan cities have been expanding their scale and reach, widening disparities in accessibility.²²

Beyond South Asia, even in contexts where gross enrolment rates in pre-primary education have significantly increased, disparities across different demographic groups persist. On occasion, these have even intensified, especially during and following the COVID-19 pandemic. In Malaysia, gross enrolment rates in preschools (for children aged 4 and 5) rose from 46 per cent in 2000 to 85.35 per cent by 2018 (Yoke-Yean et al. 2021). This can be explained by the focus the Government has placed on early childhood care and education as one of the key indicators of the nation's growth and progress, aided by the Millennium Development Goals and the Sustainable Development Goals (Yoke-Yean et al. 2021).

²² This situation has been adversely affected by the COVID-19 pandemic, with various centres remaining closed for significant periods of time, during and beyond lockdowns.

Despite this impressive progress, children in poorer families, children with disabilities, indigenous children, and the children of migrants generally do not have access to quality preschool education. Enrolment in rural areas is further hindered by a lack of awareness among parents, both of the importance of childcare as well as the availability of options and how to access them (Yoke-Yean et al. 2021).

Caste and language form another axis of exclusion. In Nepal, the persistence of caste-based exclusion has been partially addressed through the provision of scholarships for *Dalit* children at childcare centres, thereby effecting a positive change on access and enrolment.²³

Families who are part of linguistic minorities find it harder to enrol their children due to the lack of availability of specialist or dual-language childcare centres. In Australia, for instance, evidence shows that non-English speaking households are among the most-underserved populations (Raban and Kilderry 2017). Georgia faces a slightly different challenge related to the language of instruction. This study's respondents note that one of the leading motivations for (ethnic minority) Azerbaijani parents enrolling their children in preschool education is the acquisition of the Georgian language and preparation for schooling. According to respondents, well-off parents prefer to travel longer distances to enrol their children in kindergartens that offer bilingual or completely Georgian preschool education. Their rationale is that this will increase their children's future opportunities. Poorer families are unable to afford such measures, thereby exacerbating pre-existing social inequalities.

There is an **urban-rural divide in the availability of early childhood care and development services**, not only in low- and middle-income countries but also in developed, advanced economies. Recent research highlights the existence of 'childcare deserts', defined as areas where childcare is most scarce. For example, areas in outer regional Australia, and in remote and very remote Australia have an extremely high number of childcare deserts. Between 61.3 and 85.5 per cent of children in these areas do not have access to childcare (Hurley et al. 2022). Conversely, 'childcare oases' are areas with a high concentration of childcare services. These tend to be concentrated in major cities where many families live due to the high availability of jobs.



The State provides scholarships to children belonging to low caste/ethnic groups. We thus feel [it is] mandatory to give priority to those children. Furthermore, discrimination based on caste and ethnicity is strictly prohibited within the premises of the school.”

– Principal of a state-funded childcare centre, Nepal

²³ Nepal's Education for All Review 2006 refers to scholarships for *Dalit* students and 'other disadvantaged groups'. However, this study's respondents spoke specifically about the inclusion of *Dalit* children.

The urban-rural divide in the provision of, and access to, childcare is particularly acute in Timor-Leste, where there is very limited provisioning outside of the capital, Dili. Geographical disparities in preschool gross enrolment rates (GER) are very pronounced, with the lowest in Ermera municipality (4.6 per cent) and the highest in Viqueque (27 per cent) (UNICEF 2017b).

Income intersects with geographical location to adversely impact accessibility for low-income, rural households. In Pakistan, the supply of childcare centres is not adequate for the enrolment of all children, particularly at the pre-primary level for children aged 3–5. This is especially true in remote rural and low-income urban neighbourhoods (Pakistan, Ministry of Education and Professional Training 2015). Box 2 illustrates the intersectional nature of income, geographical and language factors in determining accessibility in the context of Thailand.



Box 2. Promising practice from Thailand on the intersection of income, geographical and language factors for childcare accessibility

In Thailand, concerted efforts towards equity and inclusion in pre-primary education for 3–5-year-olds have resulted in children from the poorest quintile overtaking the number of children from the wealthiest quintile in attending early childhood education programmes (pre-primary education). Strong political will and data-driven policy planning – in the form of Multiple Indicator Cluster Surveys (MICS) in 2006, 2012 and 2016 – helped to establish clear links between poverty, gender, the education levels of mothers and fathers, and geographical location. While the number of children jumped from 55 per cent in 2005 to 86 per cent in 2016 among the poorest quintile, the enrolment of non-Thai speakers continues to lag behind that of Thai speakers (71 per cent and 86 per cent, respectively). This underscores the importance of the language of instruction in determining the accessibility of childcare.

Source: UNICEF 2019a, 57.

Similar trends are apparent in Central Asia. In Tashkent City, Uzbekistan, almost 80 per cent of children are enrolled in preschool. However, three of the five most vulnerable areas – Kashkadarya, Djizzak and Surkhandarya – have the lowest enrolment rates in the country.

In Tajikistan, of a total of 615 kindergartens in 2017, there were 132 kindergartens in the capital, Dushanbe, alone and these had higher enrolment rates. Because kindergartens are clustered near more densely populated districts, physical distance from preschool services poses a critical access barrier for most rural children. In Turkmenistan, the number of preschools decreased in rural areas from 238 in 2015 to 212 in 2016, with a corresponding decline in the number of children attending them. While 81 per cent of children living in the wealthiest households attend early childhood care and development programmes, this figure falls to a mere 17 per cent among children in the poorest families (UNICEF 2019b).

Similarly, in Azerbaijan, most children out of pre-primary education live in rural areas. One key reason for this is that more than one-quarter of preschool establishments are located in the capital city of Baku, and most other preschools are in other major urban centres. Overall enrolment remains low at 36 per cent for children between 3 and 6 years old, and is especially low among children in rural and remote areas, and children with disabilities (UNICEF 2019c). In Armenia, 35 per cent of children are enrolled in some form of childcare in urban areas, compared to just 17 per cent of children in rural areas (Zaqaryan 2019).

In Mongolia, kindergarten enrolment for children aged 3–5 was 81.4 per cent in urban areas and 58.2 per cent in rural areas. Interviews with key informants reveal that most children in rural areas who are unable to attend alternative services are herders' children. Since one-quarter of Mongolia's population is nomadic and constantly on the move, the Government has endeavoured to introduce early childhood education programmes for 3–5-year-olds keeping in mind location, climate and poverty-related factors (UNICEF 2019a).

Bucking the trend of higher enrolment rates in urban centres is Japan, despite very high overall rates of enrolment in early childhood care and education facilities, at 97 per cent of children in the 3–6-year-old age group (Nakatsubo et al. 2022). There are often challenges to securing a place in densely populated urban centres where supply has not kept up with demand. Georgia's capital city of Tbilisi faces similar challenges, despite the construction of new public kindergartens, and the renovation and expansion of existing spaces by local municipalities.



In the last 4 to 5 years, there were around 30 kindergartens built, which led to an increased number of places. However, the demand has increased as well. Despite the fact that we increased the number of places quickly, we are still falling behind to accommodate the demand.”

– Representative of the Tbilisi Kindergarten Management Agency, Georgia

▶ 4.2. Profile of the children covered

Increasingly, evidence from education sector research demonstrates that quality pre-primary schooling for children between 3 and 5 years old has important benefits for advancing learning achievement, increasing primary school completion rates, reducing achievement gaps and inequities in later life, and building skills for future employment (UNICEF 2019a). Worldwide, only 78 countries have a policy of free pre-primary education, ranging from one to four years of education before children start primary school. Of these countries, fewer than one-third are low or lower-middle income countries. Moreover, only 34 of these countries have made pre-primary compulsory (UNICEF 2019a).

In Asia and the Pacific, enrolment numbers vary significantly at the subregional (and even national) levels. The average pre-primary gross enrolment rate in East Asia and the Pacific was 81 per cent in 2017, and just 23 per cent in South Asia, compared to a global average of 50 per cent. Mongolia, Nepal, Lao People's Democratic Republic and Bangladesh are some of the low-income countries that have made impressive gains in gross enrolment rates between 2000 and 2017, as shown in table 9.

▶ **Table 9. Gross enrolment rates in pre-primary education (2005–2017) in selected low-income economies (percentage)**

Economy	2005 (%)	2010 (%)	2015 (%)	2017 (%)
Low-income economies (globally)	12	14	20	22
Bangladesh	10	12	30	40
Lao People's Democratic Republic	8	20	35	43
Nepal	35	76	86	86
Mongolia	46	79	80	87

Source: UNICEF 2019a, 48 (figure 2.6).

This expanding provision of preschool education largely caters to children between 3 and 5 years old. The enrolment of children under 3 years old remains extremely limited. The primary and secondary research conducted for this study highlights that children aged 0–2 remain an underserved category, and that children with disabilities are particularly excluded in the childcare sector in the Asia and the Pacific. These findings are discussed in greater detail below.

Of the 48 economies in Asia and the Pacific examined by this study, only 24 have policies in place for early childhood care and education of 3–5-year-olds (see table 10).²⁴ Governments in these cases have not only mandated a statutory right to early childhood educational development (ECED) programmes (childcare services) or pre-primary education, but also provide funding or subsidize such services. Only eight countries – Australia, Georgia, Japan, Kazakhstan, Mongolia, New Zealand, the Republic of Korea and Singapore – have national care systems for children under the age of 2 (see table 11). This means that just 16 per cent of countries in the region have a statutory childcare system for 0–2-year-olds, while globally this is true for 32 per cent of countries (Addati, Cattaneo and Pozzan 2022).

► **Table 10. Economies in Asia and the Pacific with national childcare systems for 3–5-year-olds**

Economy	Type of funding	Starting age of entitlement	Hours of service
Armenia	Out-of-pocket	3 years old	A number of hours are guaranteed by law, but the number of hours are not stipulated in the law
Australia	Targeted	4 years old	Up to 100 funded hours per fortnight
Azerbaijan	Universal	5 years old (private childcare is available from the age of 3)	No indication of hours per week
Bangladesh	Universal	5 years old (private childcare is available from the age of 3)	12 hours per week
Brunei Darussalam	Universal	5 years old (private childcare is available from the age of 3)	No indication of hours per week
China	Universal	3 years old	Full day
Fiji	Targeted	3–5 years old	No indication of hours per week
Georgia	Out-of-pocket	3 years old	Full day
Japan*	Universal	3–5 years old	Two options: (i) 8 hours and (ii) 11 hours per day
Kazakhstan	Targeted	3 years old (optional); 5 years old (compulsory)	No indication

²⁴ The statutory provision of early childhood educational development programmes for children between 0 and 2 years old only exists in 57 of the 178 countries surveyed by the ILO. Of these, only 21 countries make it a universal right, which translates into potential access to free or affordable childcare services for only 1 in 10 potential parents worldwide.

Economy	Type of funding	Starting age of entitlement	Hours of service
Maldives	Out-of-pocket	3 years old	No indication
Mongolia	Universal	3 years old	8 hours per day
New Zealand	Universal	3 years old	20 hours per week
Pakistan	Universal	5 years old (private childcare is available from the age of 3)	School day
Philippines	Universal	5 years old (private childcare is available from the age of 3)	3–4 hours per day
Republic of Korea	Targeted	3–5 years old	No indication of hours per week
Singapore	Targeted	3 years old	Half or full day
Solomon Islands	Out-of-pocket	3 years old	No indication of hours per week
Sri Lanka	Out-of-pocket	3 years old	No indication of hours per week
Thailand	Universal	3 years old	No indication of hours per week
Turkmenistan	Out-of-pocket	3 years old	No indication of hours per week
Uzbekistan	Out-of-pocket	3–5 years old	No indication of hours per week
Vanuatu	Universal	4 years old	No indication of hours per week
Viet Nam	Targeted	3–5 years old	No indication of hours per week

Source: Table replicated from Addati, Cattaneo and Pozzan 2022 (Appendix table A.7).

Methodological note: ‘Out-of-pocket’ means that the full, or almost full, cost of services is paid by parents, with no or very limited public subsidies, thereby causing financial hardship to parents. ‘Targeted or means-tested’ means that the cost of services is shared between parents and the State, according to means tests and without causing financial hardship to parents. ‘Universal’ and free means that the full or almost full cost of services is paid by the State or general taxation. ‘Full-day’ refers to 40 hours per week or more. The starting age refers to the statutory age at which a child is guaranteed a legal entitlement to a place in childcare or pre-primary education.

Note: * Japan keeps track of the number of children and the number of childcare facilities (day care, kindergarten, and community-based childcare facilities, etc.) to monitor the situation in terms of the number of children waiting to be enrolled in childcare (Japan, Ministry of Health, Labour and Social Welfare 2020).

While some economies in Asia and the Pacific have universal systems for 3–5-year-olds, whereby the costs are borne by the State, **none of the economies in the region have a universal or free childcare system for 0–2-year-olds**. Most of the systems that exist for this age group are means-tested and targeted at certain income categories of parents or households. Others require that parents bear out-of-pocket expenses, such as in New Zealand and Georgia.

► **Table 11. Economies in Asia and the Pacific with national childcare systems for 0–2 year-olds**

Economy	Type of funding	Starting age of entitlement	Hours of service
Australia	Targeted	0–3 years old	Up to 100 funded hours per fortnight
Georgia	Out-of-pocket	1 year old	Full day
Japan	Targeted	0–2 years old	Full day
Kazakhstan	Targeted	1 year old	Full day or part time
Mongolia	Targeted	0 years old	8 hours per day
New Zealand	Out-of-pocket	0 years old	No indication of hours per week
Republic of Korea	Targeted	100 days old	No indication of hours per week
Singapore	Targeted	2 months old	As required

Source: Table replicated from Addati, Cattaneo and Pozzan 2022 (Appendix table A.7).

Methodological note: ‘Out-of-pocket’ means that the full, or almost full, cost of services is paid by parents, with no or very limited public subsidies, thereby causing financial hardship to parents. ‘Targeted or means-tested’ means that the cost of services is shared between parents and the State, according to means tests and without causing financial hardship to parents. ‘Universal’ and free means that the full or almost full cost of services is paid by the State or general taxation. ‘Full day’ refers to 40 hours per week or more. The starting age refers to the statutory age at which a child is guaranteed a legal entitlement to a place in childcare or pre-primary education.

These findings concur with research which estimates that the gap in childcare coverage is particularly acute for children under 3 years old around the world (Devercelli and Beaton-Day 2020). While the cost of provision for this age group is cited as one reason for this situation, due to the higher child-to-carer ratios, the absence of national legislation for children under the age of 3, fewer options for centre-based care, and the lack of suitable maternity and paternity leaves also make the availability of childcare provision for this age group a serious issue. In the absence of publicly-provided or trustworthy childcare services, many families prefer to hire domestic workers (in-home services) to care for their children (Addati, Cattaneo and Pozzan 2022). ILO research shows that a high reliance on domestic workers for care services is indicative of insufficient care service provision in countries (ILO 2018).

Data collected for this study consistently shows that there is a gap in enrolment rates for younger children compared to older children. There is also a large gap in provision between urban and rural areas, with most childcare provision concentrated in urban settings. In Lao People’s Democratic Republic, for instance, 33.6 per cent of children between 0 and 2 years old are enrolled in any form of childcare in the capital of Vientiane, while in Saisomboun province, only 0.6 per cent of children are enrolled.

In 2020–2021, the enrolment rate of children in the 0–2 age group was 5.2 per cent across the country, compared with an enrolment rate of 43 per cent among 3–5-year-olds (UNICEF 2019a, 48). Respondents from Sri Lanka, Georgia, Indonesia, Nepal and the Philippines reported that they are least likely to enrol their children in childcare facilities between the ages of 0 and 18 months old. A significant contributing factor is the absence of specialized services needed for this age group, and the lack of capacity to administer such services.

Formal care for children between 0 and 2 years old is perceived adversely among parents interviewed in all of the countries where case studies were conducted for this study.

Echoing parents across countries, most users interviewed in Georgia believe there are no sufficiently trustworthy services for this age group in the country. Users are not confident that their children will receive adequate care that meets the needs of an infant or toddler, especially when infants are breastfed, cannot talk or walk, or lack the mental and cognitive preparedness to leave their mother. Centres that do not have adequate services or infrastructure are also deemed unacceptable by parents. For example, one mother in Georgia reported that she had to delay her child’s enrolment for a year because the nursery did not have sufficient beds for her infant to sleep in during the day.

Addressing these concerns could significantly improve access to childcare for 0–2-year-olds, with considerable benefits for gender equality and particularly for mothers, as highlighted by respondents in Georgia and elsewhere.



At this stage, our kindergartens are not equipped to provide services for infants that would meet safety requirements and create a family-like environment. This is a very difficult service that requires infrastructural and other kinds of readiness that we currently do not have.”

– Representative, Tbilisi Kindergarten Management Agency, Georgia



If the environment of this care facility were adequate, I would welcome this. I went through a very hard period [raising two children alone as a teenager] and many mothers like me are, or will be, in the same condition [...] It would be good not to walk down this hard road as I did [...] This kind of facility would have enabled me to start my studies earlier; I would have done many things earlier. I think that when you have very young children, it is an impediment for a woman to take care of personal development.”

– 29-year-old mother of four living below the poverty line, Georgia

Sri Lanka and Indonesia are examples of countries with a high level of the private provisioning of childcare. The primary research for this study confirms other estimates, which show as many as 70 per cent of early childhood care and development centres are privately managed (UNICEF 2019a). These take the form of centres run by employers, private childcare companies or private individuals.

In Indonesia, although pre-primary education has been growing rapidly with a mix of State-run, privately-run and employer-run centres, enrolment continues to fall short of targets. The national enrolment rate in formal pre-primary education for 4–6-year-olds was 38 per cent in 2020, falling short of the Government’s target of 77 per cent in line with Indonesia’s Medium-Term National Development Plan (Prospera 2022). The lack of attention, resources and skilled workers available to care for children between 0 and 2 years old discourages parents from leaving children in institutional care. This reinforces cultural norms which consider that the family, or more usually the mother, should be the primary caregiver for children under 18 months old.

It is important to note that inclusive childcare does not imply creating separate and distinct services to accommodate children with different needs or backgrounds. Instead, all services should be designed to accommodate all children. Childcare may be made more inclusive and accessible either from a geographical lens or a disability lens (COFACE 2018). This study finds that **children with disabilities have particularly compromised access to childcare**. The lack of facilities catering to children with disabilities, and the lack of infrastructure and trained staff to support students with disabilities within mainstream childcare centres makes access to suitable childcare particularly challenging for these children.

For example, in Bangladesh, a child with a disability is 54 per cent less likely to be enrolled in preschool than a child with no disability, holding other factors constant (World Bank 2017). Timor-Leste has almost no provision for children with disabilities, especially not in rural centres. Children with disabilities rarely have preschool learning opportunities due to inadequate facilities, materials and trained teachers.

Mongolia’s education policies recognize the need to focus on the inclusion of disadvantaged groups, such as rural children from remote areas, children in nomadic herder families, and children with disabilities. Preschool education receives more than 20 per cent of the education sector budget – a higher share than in most other countries. At the national level, there are three special state-owned kindergartens in Ulaanbaatar and private kindergartens for children with severe disabilities in some *aimag* centres.²⁵ Yet, there remain severe challenges to access even where centres do exist.

²⁵ An *aimag* is a province in Mongolia. The country is divided into 21 provinces, and each aimag is sub-divided into several districts. However, childcare centres often exist at the aimag level.



Box 3. Promising practice from Singapore on promoting childcare accessibility

Singapore has achieved an almost universal participation rate in preschool education. Data from the Ministry of Education confirms that more than 99 per cent of children attend at least one year of preschool education before entering primary school. Children are usually enrolled in either a childcare centre or a kindergarten before starting school at Grade 1 (P1). These are the two main types of preschool education providers for children under 7 years old. According to statistics reported by the Early Childhood Development Agency, there are more than 1,300 childcare centres and about 480 kindergartens in Singapore. Since 2016, a unique government programme known as **KidStart** has supported disadvantaged and low-income families to access good quality early childhood care and education programmes, recognizing that children in these households risk being excluded from preschool education. In 2019, the Government also introduced more affordable and customized **'Early Intervention' programmes for children with disabilities**.

Another programme targeting the early development of infants and toddlers from low-income families is the **Temasek Cares Kids Integrated Development Service** for children aged 0–3. This programme was piloted in July 2014 to optimize the developmental potential of young children from vulnerable families through an integrated, multi-layered community health and social care support system. A partnership between KK Women's and Children's Hospital, AMKFSC Community Services Ltd (AMKFSC) and the Temasek Foundation, the programme included home visits and centre-based activities coordinated by a cross-sectoral multi-disciplinary team. The programme model was developed based on evidence from early childhood learning and intervention programmes, as well as reviews of successful models of support in other countries. It also drew on the findings of a study on families in Singapore with challenging socio-economic backgrounds, commissioned by KKH and funded by the Temasek Foundation.

Source: Lipponen et al. 2019.

Respondents reported that enrolment in these centres requires substantial financial resources, household time, and often even involves migrating to the city or renting an apartment near a specialized centre. Beyond specialized centres, it is legal to enrol a maximum of two children with disabilities in a group in a state-owned kindergarten.

However, kindergarten management teams are often reluctant to enrol children with disabilities, due to the high workload this involves for teachers and the lack of in-service training for children with disabilities. Parents are also discouraged from enrolling children with disabilities in kindergartens due to the complexity of transporting or carrying their children to kindergarten, especially in harsh winter conditions.

In Malaysia, the Government aims to construct accessible buildings and toilet facilities in early childhood education centres. A Special Education Unit within the Ministry of Education is responsible for overseeing the financing and construction of these facilities. However, it faces challenges in resourcing given the high costs of such equipment and infrastructure (Yoke-Yean et al. 2021). Similarly, the Kyrgyz Republic has introduced a policy to promote equitable access to early childhood care and development services for children with special needs. The policy has yet to be implemented, and the system of specialized education facilities is very limited. According to the Ministry of Education and Science, there are 14 special kindergartens in the Kyrgyz Republic, 10 of which are located in Bishkek City (World Bank 2013a).

Parents of children with disabilities interviewed for this study cited **location and transport as major impediments to accessing specialized childcare centres**. Among this study's respondents, mothers indicated that they were often forced to drop out of employment when they had a child with a disability. To ensure that all children receive appropriate care, it is vital for the childcare sector to accommodate the specific and differentiated needs of children with disabilities and consider carers' situations in terms of accessing childcare centres.



By law, a maximum of two children with mild disabilities may be enrolled in a regular class. However, teachers say that ordinary [sic] children are influenced by imitating their behaviour. The number of children per class in Ulaanbaatar kindergartens is too high. Therefore, it is difficult for a teacher to reach every child. Children with disabilities need special attention. In addition, it is difficult for other children to develop.”

– 57-year-old woman childcare worker and member of the Kindergarten Teachers' Trade Union of Ulaanbaatar, Mongolia



The kindergarten for children with disabilities is limited. It takes 30–40 minutes [to reach it]. As we have no car, sometimes it is hard to hail a taxi. In winter, it is hard with layers of clothes [...and] Too heavy. The environment and facilitation are convenient. The only barrier is that their stairs are too high. It is hard to carry the child up or down.”

– Married mother of three, who is unemployed because she provides primary care for her 3-year-old daughter with cerebral palsy, whom she enrolled in kindergarten to engage with other children, Mongolia



Box 4. Promising practice from Viet Nam on the inclusion of children with special needs

Viet Nam has made important strides in making early childhood education as inclusive as possible of children with disabilities by establishing crucial links between early intervention centres, integration centres for children with disabilities, preschool institutions, and families. As a result, 62.3 per cent of all children with disabilities of preschool age participated in preschools in 2012–13. The provinces of Tien Giang, Da Nang, Ho Chi Minh City, Thanh Hoa, Lam Dong and Bac Ninh have been leaders in inclusive education for preschool children with disabilities.

Source: Viet Nam, Ministry of Education and Training 2015.

▶ 4.3. Other factors

Transport to and from childcare centres, as well as their hours of operation, pose a major challenge for parents, as reported in the primary research for this study. These factors are equally problematic in rural contexts – where parents or carers need to travel longer distances to access childcare – and in urban settings, due to the lack of safe, suitable public transport for young children. As the quotes from respondents included in this study indicate, even where childcare centres exist, the drudgery associated with transporting children to and from these centres remains considerable, and often falls to mothers.

In Georgia, parents are responsible for organizing transport to childcare facilities. Families who can afford private transportation can access a wider range of childcare options and choose the most suitable among them. Children in less privileged families who rely on public transportation face greater challenges.

Income inequalities in access are reflected in the issue of transport, as low-income families in the region generally do not have recourse to private cars or similar transport arrangements and must rely on public infrastructure.

In addition to the absence of adequate public transport infrastructure, **laws regulating the timings and operating hours of childcare centres are either inadequate or absent**. For instance, of the 55 economies globally that regulate the public or private provision of childhood care and development services, only eight have established minimum hours of operation for childcare centres.

Full-day centres are regulated for 7 hours in the Republic of Korea, while in the Kyrgyz Republic and Uzbekistan, flexible hours of operation are available (World Bank 2022a, 59). Georgia has regulations determining working hours in different municipalities, but the lack of flexible work arrangements places significant pressure on both parents and service providers.

Respondents across all national contexts expressed a **strong preference for childcare centres with flexible timings**, highlighting concerns around the limited availability of such centres, especially in the context of contemporary working hours which stretch beyond the 9 a.m.–5 p.m. window.



I do not have a vehicle to take my children to school because my husband uses his motorbike to [go to] his workplace.”

– A mother in Luangprabang, Lao People’s Democratic Republic



There is no school bus. We use a private car to bring our children to school and sometimes there is no car because of other uses. [Traffic] jams are another problem for transportation to school.”

– A mother in Vientiane Capital, Lao People’s Democratic Republic



Many parents I know require a kindergarten. There are some who transport their children to [kindergarten in] another village. But I know families that do not have this opportunity [...] no transport goes to these areas regularly. Not all have private cars, or the time or capacity to take their children and travel more than 10 kilometres.”

– 39-year-old mother of two from a rural settlement in Imereti, Georgia



Most work, [regardless of whether they are] in the private or public sector, finishes at 6 p.m. whereas kindergartens stop at 5 p.m. One hour has always been a problem [...] Therefore, I have been performing miracles [...] I used to do the same 16 years ago, and I am doing this now. Many other parents are in the same situation as me. Some working parents who work until 6 or 7 p.m., those working in Tbilisi who return at 8 or 9 p.m., have nannies who are responsible for collecting the children from kindergarten. Before my son turned 2, I could have 1 hour flexibility to leave my job early, but now even this is not available and I have to perform miracles.”

– 37-year-old working mother of two who lives in an urban area, Georgia

Childcare workers note that they often work overtime uncompensated simply waiting for parents or guardians to pick up their children, often considerably beyond centres’ formal operating hours. As such, they too express a preference for flexible working arrangements with proper compensation for overtime.

In Indonesia, a *Taman Penitipan Anak* centre in Depok, an area in the province of West Java, is open from 6 a.m. to 5 p.m. Monday to Friday, allowing parents to drop their children before their own working hours begin and to pick them up after work. Given the long commute from Jakarta to Depok, this centre provides extra care hours for children, with overtime charged per hour.

Parents appreciate this flexibility, especially when they are caught in traffic or delayed by meetings and chores. In a similar vein, in the Philippines, child-minding centres (or crèches as they are referred to locally), operate from 8 a.m. to 5 p.m. with some open until 7 p.m. This allows parents to focus on both paid and household work, as noted by one user of a privately-run childcare centre.



We started with them [the centre when] my baby was just 3 months old [...] I work far from my home. It is good that the centre is just walking distance from our house. We drop my child in the centre before 7 a.m. and pick her up between 6 to 7 p.m.”

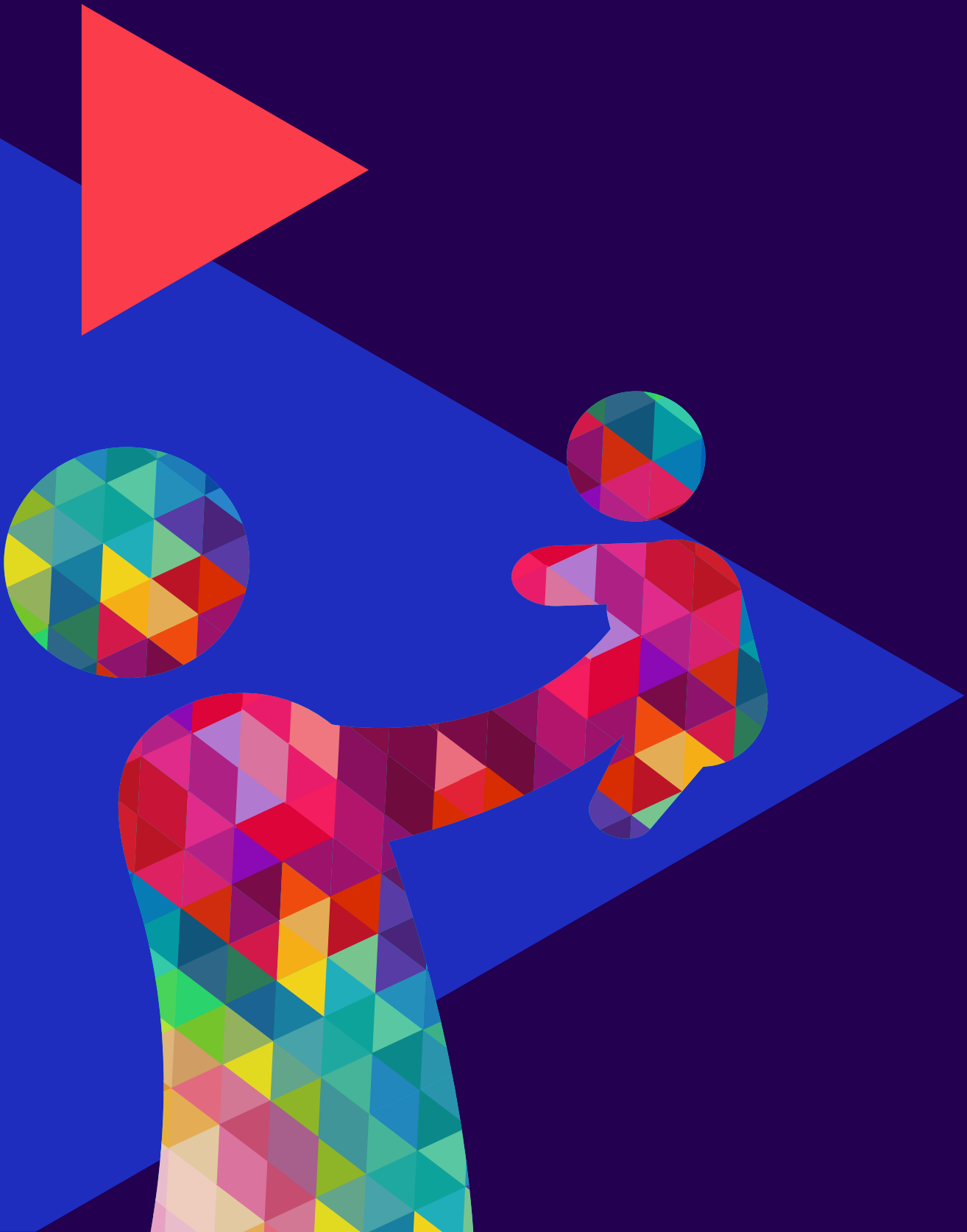
– Mother and childcare centre user, the Philippines

The availability of early childhood care and development services, and ensuring access for households and children with different socio-economic characteristics at the household or individual levels are crucial considerations for improving the childcare sector across Asia and the Pacific.

Other key issues that merit the attention of policymakers include the need to expand pre-primary education for 3–5-year-olds, as well as to increase the centre-based availability and utilization of care services for 0–2-year-olds. It is equally important to address the particular challenges facing children in rural areas, in emergency and conflict settings, in low-income families, and children with disabilities.

Section 5

Affordability



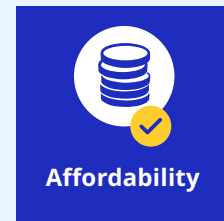


Affordability



Key messages

- **Insufficient public funding** is allocated to childcare throughout Asia and the Pacific.
- Even where subsidies exist, **high out-of-pocket costs** remain (e.g. for transport, books and materials, meals, and enrolment fees), which are being **driven up further** by the rising cost of living. This poses a significant challenge to parents, making childcare prohibitively expensive for many, and mothers in particular from entering or re-entering the workforce.
- Although resources exist for both childcare providers and users, access is hampered by **challenges to navigating the highly fragmented and multi-layered childcare funding landscape**.
- A **lack of awareness of benefits** means that parents are often unable to make use of existing provisions.



The cost of availing childcare services is a key determinant in their uptake and utilization. This study finds that the high costs of childcare are a contributing factor to inequalities of access and childcare use across income groups. Childcare costs borne by families can also disincentivize and weaken employment for parents, especially mothers. For example, across OECD countries, low-paid single mothers in full-time work lose as much as two-thirds of their gross earnings to taxes and childcare costs (OECD 2020b).

Governments can offer a number of financial and non-financial incentives and support to both childcare users and service providers to make services affordable. Different economies have also adopted a variety of measures to support childcare use by low-income families. These include providing a certain number of hours for free, a certain percentage subsidy on fees, or offering wholly subsidized, free universal access. In Hong Kong, China, for instance, fees are waived for children under 3 years old if their parents pass a ‘social needs’ test. Other examples exist beyond Asia and the Pacific. For instance, childcare fees in Croatia are reduced by 80 per cent for families who receive a basic minimum benefit from the social security system. In Türkiye, 3 per cent of the capacity of childcare facilities is reserved for children from poor families to use for free (World Bank 2022a). Conditionalities are often linked to household income levels, parents’ work status, the number of hours that a child spends in a facility, the number of children enrolled in a facility from the same family, and the average rate of childcare in a facility as generally set by the Government (World Bank 2022a). These support mechanisms for low-income and highly vulnerable families aim to ease the burden on parents, enable poverty eradication, and offer young children the best possible start to life.

Preferential tax policies can facilitate the provision of childcare services by private providers and employers. Childcare allowances and vouchers are other financing mechanisms prevalent within the childcare sector globally. For example, Malaysia’s Income Tax Act offers parents an annual personal tax deduction for childcare fees paid to registered centres (World Bank 2022a).

Parents across all economies incur high costs for childcare, often even when subsidies or fee-waivers exist. At the same time, childcare centres often struggle to access public funds due to a host of bureaucratic and related challenges, resulting in a **highly fragmented landscape of public funding for childcare**. This fragmentation results in gaps in implementation, alongside inconsistencies in quality and access to services. The absence of a holistic approach to childcare has been exacerbated by the COVID-19 pandemic, as resources have been redirected to the emergency response and have yet to return to pre-pandemic levels.

The next two sections outline the landscape of childcare sector funding, especially public provisioning in the 48 economies examined by this study. They also highlight the costs to households and challenges to affordable childcare.

► 5.1. Public expenditure on early childhood care and development services

In **Central and West Asia**, data on childcare-related investments, funding structures and flows varies by country. In Azerbaijan, there is no separate budget explicitly allocated to early childhood care and development in sectors responsible for early childhood, such as health and nutrition. The education sector allocates 10.5 per cent of the total education budget to preschool education. The child and social protection sector, meanwhile, budgets for pregnancy and the child delivery allowance, the childbirth allowance, and childcare benefits for children up to the age of 3 (World Bank 2018a). In Pakistan, despite a clear national policy, standards, curriculum and teacher training packages for pre-primary/early childhood education, there is no separate public sector budgetary allocations for early childhood education. Families rely on expensive private services for quality care, if they can afford them, or 'poor quality' government preschools (Pakistan, Ministry of Education and Professional Training 2015).

By contrast, public sector funding is clearly allocated in Armenia for early childhood care and development services. The central Government provides the funding for health services, while preschools for 3–5-year-olds are supported by local government budgets. For instance, Yerevan Municipality has its own funding for Yerevan-based public preschool institutions, which became free in 2010. With the exception of Yerevan, kindergartens in the rest of the country charge parents fees to purchase meals and cover other auxiliary costs. In 2016, total public spending on childcare amounted to 665.5 million Armenian dram (approximately US\$1.73 million), equivalent to 0.01 per cent of GDP (Ayliffe et al. 2019).

The public sector financial commitment to early childhood development is low in the Kyrgyz Republic, amounting to an estimated 0.97 per cent of GDP in 2017. This is comparable to Kazakhstan (0.5 per cent), Uzbekistan and Turkmenistan (0.8 per cent of GDP each). However, only 24 per cent of children between 0 and 6 years old are enrolled in such services in the Kyrgyz Republic, comparable to Uzbekistan (27 per cent) but much lower than Kazakhstan (66 per cent) (UN Women 2019, 23). This may indicate that the system in the Kyrgyz Republic relies heavily on parental contributions and favours urban and more affluent areas despite targeted social assistance programmes. In Uzbekistan, although the state endeavours to subsidize 70 per cent of the costs of a child's public preschool attendance, parents still incur expenses of up to US\$20 per month. This is substantial, given that the average monthly income in the country is around US\$1,392. Expenses rise far higher for private services (UNICEF 2017c).

In Tajikistan, public financing for preschool education is also low. State funding remains the main source of social spending. However, fees charged to parents make up more than one-third of state preschool funding. This is because general and higher education are government priorities, while pre-primary education is not. From a low baseline of only 2.1 per cent of the total education budget in 2010, spending on preschool education reached just 5.6 per cent by 2017 (World Bank 2019a, 49). The Government of Turkmenistan is keen to introduce one-year quality pre-primary education for all 5-year-old children as a foundation for lifelong learning and well-being. Total government expenditure on education was 4 per cent of GDP in 2015, which is in the range of 3–7 per cent in neighbouring countries (UNICEF 2019b).

The childcare sector's funding landscape is varied in **South Asia**. India's Integrated Child Development Services (ICDS) Scheme accounts for the bulk of the Ministry of Women and Child Development's budget allocation, making the Government the largest provider of early childhood care and development services in the country. The programme focuses on four components: early childhood education and development, care and nutrition counselling, immunization and health services, and community mobilization, awareness, advocacy and communication. The first component is provided by *Anganwadi* centres, run mostly by NGOs. In 2016, the ministry reported that only half of all 0–6-year-olds in India were registered under the programme (Chaturvedi 2019b). Moreover, centres operate for 4–6 per day, which does not meet the needs of working parents. In the absence of minimum education qualifications and caregiver standards, the programme's care and developmental elements often take second place to its focus on nutrition.²⁶

While the demand for universal coverage has been put forward, the reach of existing schemes remains limited. Budgetary allocations for India's National Crèche Scheme – catering to the children of low-income working parents – have declined in recent years (Dewan 2019). The central funding allocation has also decreased, obliging Indian states to contribute higher amounts. In a tightening fiscal environment, the implementation and quality of childcare centres run under this programme have been hit hard. Alternative models of childcare provision, including for informal workers and low-income families through efforts by community-based organizations and trade unions, some of which also operate in India are highlighted in box 5.

²⁶ According to an unpublished ILO report on various initiatives related to childcare in India.



Box 5. Promising practice from India on affordable community childcare centres

The Self-Employed Women's Association (SEWA) was set up in 1972 as a trade union representing 1.5 million women workers in the informal economy across 14 states in India. Its members include agricultural workers, home-based workers, domestic workers, street vendors and waste-pickers, among others. A central aim of the association is to ensure livelihood security for its members. As such, it encourages and supports them to form their own cooperatives. The **SEWA Sangini Child Care Workers' Cooperative** is a cooperative that provides childcare services to its members, with a focus on offering holistic services for low-income parents. It was specifically created to meet the needs of women working in rural and urban areas, positioning working women as the users, owners and managers of childcare services. The women who run the cooperative are also shareholders and receive 10 per cent of its surplus per year.

Since 1970, the **Mobile Crèches (MC)** initiative has collaborated with NGO networks, local urban bodies and people's representatives to implement strategies that enhance supply and strengthen demand for quality childcare services. Covering construction sites in North India, it ensures crèche services for 5,000 children of migrant workers at 40 locations in and around the national capital of Delhi. The initiative reaches out to slum dwellers and ensures holistic services for children through family-based and community interventions. The initiative takes full responsibility for setting up and managing the 9 a.m.–5 p.m. crèche programme available six days per week, with trained staff, quality norms and partial monetary support from builders. It also identifies and trains other NGO service providers, negotiates with builders on infrastructure and funds, facilitates partnerships, establishes crèches and closely monitors them in the first year of operation to ensure that the quality of services is maintained. Builders are fully responsible for managing and fully financing crèches after the initial set-up period, delivering staff training and subsequent on-going supervision by the initiative.

Source: Chaturvedi 2019a; ILO, unpublished.

Available expenditure reports in Bhutan indicate three primary sources of funding for centre-based early childhood care and development programmes – the Government, UNICEF and Save the Children. The Ministry of Education accounts for the majority of expenses (45 per cent), followed by UNICEF (42 per cent) and Save the Children (13 per cent). In some cases, communities and parents provide labour contributions during the construction of centres, plots for establishing centres, and monetary support in the form of establishment funds and fees (UNICEF 2017a).

Public spending on early childhood care and development in Bangladesh accounted for 0.3 per cent of GDP in 2016–17 (World Bank 2017). The country lags behind in terms of expenditure per child. For example, per child expenditure on early childhood education in 2012 in low-income and lower-middle-income countries was US\$123 and US\$242, respectively. By contrast, Bangladesh spent only US\$3.67 per child in 2013. A significant share of the public budget goes to school teachers' salaries, leaving limited funds for early childhood care and development. Consequently, a large percentage of such services in Bangladesh are privately financed. Non-state institutions comprise around 41 per cent of the institutions that provide early childhood care and development services. While some of these institutions are subsidized by funds from donors and non-profit entities – such as religious organizations and NGOs – others rely on user fees. Families in Bangladesh spend a substantial share of household resources on childcare.

In **Southeast Asia**, Thailand provides universal free pre-primary care and education to children from the age of 3 onwards, as noted in table 10. Government funds cover infrastructure and equipment, teacher and staff salaries, utilities, and basic operational expenses. Public funds from national and local governments are supplemented by fees charged to parents to cover meals and other running costs. As a result, parental fees comprise the second-largest source of funding of Thailand's childcare sector, making childcare costly for parents. Private philanthropic organizations, foundations, NGOs and faith-based organizations also run childcare centres in poor slum communities. As the Government of Cambodia lacks sufficient resources to expand state preschool provision, local communities fund their own programmes. Early childhood education's share of the total budget was 0.60 per cent in 2006 in Cambodia, rising to 0.80 per cent in 2012 (Cambodia, National Education For All Committee 2015). This study was not able to identify data on investments for children under the age of 3.

Myanmar's Ministry of Education has no separate budget for early childhood services. When the multisectoral early childhood care and development policy was launched in 2013, the Ministry for Social Welfare, Relief and Resettlement (SWRR) pledged 28 per cent of its budget to early childhood care and development services, while the Ministry of Education committed 12 per cent of its budget to preschool education.

However, a severe lack of resources persists and funds devoted to early childhood care and development are meagre (Myanmar, Ministry of Social Welfare, Relief and Resettlement 2014). The sector also relies on funds from external international development partners – including UNICEF, the World Health Organization (WHO), UNESCO – bilateral assistance, international and national NGOs, associations and foundations. A review of Timor-Leste’s General State Budget 2017 shows that the Ministry of Education’s budget for preschools and primary education at the central level decreased to US\$6.9 million (US\$0.69 million for preschools and US\$6.2 million for primary school), from US\$23.2 million previously (US\$1.7 million and 21.5 million, respectively). This is due to the transfer of the budget for school feeding and school subsidies directly to the municipality level (UNICEF 2017b). As such, community-based preschools have been encouraged as an alternative model in Timor-Leste.

Public state-run kindergartens exist in Viet Nam and are fully funded by the State, including the construction of buildings, learning materials and equipment, and human resource costs like teachers’ salaries and investments in teacher training. These kindergartens chiefly cater to children of ethnic minority, poor and disadvantaged families, who account for the most significant percentage of children enrolled. Singapore provides a variety of subsidies to families, enabling them to opt for government-supported, partner-operated preschools (see box 6 for notable measures in this regard). The mother’s working status, the household’s gross monthly income, and gross monthly per capita income are some of the decisive factors used to calculate subsidy amounts and eligibility.



Box 6. Promising practice from Singapore on fee subsidies for preschool education (both private and public)

Singapore introduced an Additional Subsidy in 2013 and enhanced the Kindergarten Fee Assistance Scheme in 2015. A Partner Operator scheme began in 2016, resulting in a corresponding decline in average childcare fees from US\$900 per month in 2015 to US\$856 per month (the partner operator fee cap) in 2016. Fees have stabilized at this level ever since. Singapore also has a Child Development Account (CDA) which can be used to pay for preschool expenses. This was enhanced in 2016 with the introduction of the CDA First Step, which does not require parents’ co-savings. In April 2019, subsidy support was further enhanced for non-working mothers who are seeking employment or are the full-time caregivers for their young children.

Source: Singapore, Early Childhood Development Agency 2019.

In **East Asia**, different authorities in Japan are in charge of different childcare settings at the central level. To promote synergies and effective coordination among relevant organizations, the Children and Child-rearing Administration was set up in the Cabinet Office in 2015. Funding responsibilities are shared between national and local government authorities. In October 2019, the Government announced a further expansion of its free preschool funding for 3–5-year-old children and children under 2 years old from low-income families (whose income is less than 2.5 million Japanese yen (equivalent to US\$18,641) per year) (Nikkei Asia 2019). Low-income families have fully-subsidized access to childcare for children between 0 and 5 years old, while access to childcare for 3–5-year-olds is fully subsidized for all children. Families that do not qualify for a full childcare subsidy for 0–2 year-olds pay monthly fees of about 42,000 yen (US\$313). Other expenses covered by parents include costs for meals and events, although low-income families are exempt from paying these costs (see figure 4; Japan, Cabinet Office n.d.).

In the Republic of Korea, early education of young children receives only 1 per cent of the Ministry of Education's budget. Comparative funding per child for pre-primary education, relative to GDP per capita, is 0.13 per cent – lower than the OECD average of 0.17 per cent. The country has built an extensive, affordable early childhood care and development sector through a mix of public and privately-run services. Direct subsidies are provided for childcare service providers, as are childcare benefits for parents, all supported by a ten-fold increase in public spending since the mid-2000s (OECD 2019).

China's budget for early childhood care and development is apportioned at the provincial level. It tends to be directed towards public kindergartens in urban areas in each province, seriously neglecting rural areas. Overall, funding for the sector tends to be low, although China has made great efforts to increase investments in pre-primary education. Between 2011 and 2013, the central Government invested 50 billion Chinese renminbi, while local governments invested over 160 billion renminbi (equivalent to US\$23.09 billion). The percentage of the total education budget dedicated to pre-primary education rose from 1.7 per cent in 2010 to 3.4 per cent in 2012. However, a heavier reliance on private investment in the childcare sector remains (World Bank 2016). In Hong Kong, China, a total of 3.9 billion Hong Kong dollars (0.70 per cent of the total budget, equivalent to US\$441.7 million) was allocated in the government budget for family and child welfare, including the provision of day care, foster care and residential care services in the 2017–18 fiscal year (Rao et al. 2018). Funding for early childhood education only accounts for an average of 1.3 per cent of the education budget. Such deficits have impeded public investments in the development of early childhood education.

In the **Pacific**, Australia and New Zealand are the only countries with well-developed systems for early childhood care and development services. Australia primarily operates a market-based system. Public childcare support consists of cash benefits or tax concessions for parents with children in non-parental care, often on an income-tested basis. Childcare fees in Australia have been growing well above inflation rates in recent years, as fees set by childcare providers remain unregulated. Across all types of childcare, average hourly fees increased by 20.7 per cent in real terms between 2011 and 2017. Average costs for extended day care have increased by an average of 6.5 per cent annually since 2009 (Joseph and Mueller 2019). The Government of Australia provides a range of subsidies to families who use approved formal childcare. Depending on their income, families can claim a subsidy of between 20 and 90 per cent of the hourly childcare fee or relevant benchmark price. Government expenditure on early childhood education and care (ECEC) has grown substantially since 2008, reaching US\$9.2 billion in 2018 – denoting growth of 140 per cent. Approximately 83.5 per cent of these costs are in the form of childcare subsidies. However, even after accounting for subsidies, average out-of-pocket costs for parents still grew by almost 50 per cent in real terms between 2011 and 2017. On average, families covered 37 per cent of the cost of childcare after subsidies (Joseph and Mueller 2019).

In 2018, the Government of Australia restructured childcare subsidies as part of the Jobs for Families Package, with an emphasis on supporting the labour market participation of adult family members. The legislation replaced childcare benefits and rebates with a single means-tested childcare subsidy for families who earn under 350,000 Australian dollars (equivalent to US\$252,708) and meet a work or activity test. The number of subsidized hours of care are calculated on the basis of parents' weekly hours of engagement in work activities – such as paid work, work-related training, volunteering, studying and actively looking for work. Furthermore, a non-mainstream 'childcare safety net' has been created to provide subsidies (up to 24 hours every two weeks) to low-income families that do not meet the work or activity test, and to vulnerable children (Taylor 2018).

In the wake of the COVID-19 pandemic, Australia's Government announced an Early Childhood Education and Care Relief Package of free childcare for 1 million families, and additional funding for the ParentsNext programme to support working parents to return to the labour force. Children in families whose members are essential workers, vulnerable and disadvantaged children, and previously enrolled children, were prioritized for care during lockdown months. More recently, the Government introduced legislation in September 2022 to increase the Child Care Subsidy (CCS). From July 2023, the Government will lift the maximum CCS rate to 90 per cent for families who earn 80,000 Australian dollars or less (equivalent to US\$52,840), and increase CCS rates for around 96 per cent of families with a child currently in care who earn less than 530,000 Australian dollars (US\$350,066).

Higher CCS rates will be retained for families with two or more children aged 5 years or under in care (Australia, Department of Education 2022).

In New Zealand, participation in early childhood care and development services is supported by partially subsidized places for all children of preschool age, alongside efforts to ensure fully subsidized access for specific age groups and/or target group children, such as those from disadvantaged backgrounds. For example, low-income parents can claim work and income subsidies to cover part or all of their children's fees. A legal entitlement to a childcare place does not exist in New Zealand. Nevertheless, children between 3 and 5 years old have free access to pre-primary education for up to 20 hours per week, provided by the Ministry of Education. The introduction of these 20 hours of free care is a powerful incentive supporting families to access early childhood education and care services (Shuker and Cherrington 2016). However, childcare costs are deemed close to unaffordable – on average, a couple must spend one-third of one salary to pay for full-time childcare for two children. As such, New Zealand ranks as the second most expensive country for childcare out of 41 countries, behind Switzerland (Daly 2021).

The availability of early childhood care and development services is limited in other Pacific Island countries, especially for children under the age of 3. Parents rely on employer-supported care, as in Fiji, or private provisions. Governments have yet to put financing mechanisms in place for adequate universal or free early childcare provision. In 2018, the Cook Islands Party promised to look into “the unexplored frontier” of paid work as a right for women by developing a model and system for affordable, accessible and quality childcare, including expanding maternity allowances and paid parental leave (Cook Islands News 2018).

As this section demonstrates, there is **very limited public funding in the childcare sector** across Asia and the Pacific. This points to the urgent need to boost public investments in free and universal early childhood care and development services.

► 5.2. Challenges in accessing public funding

As a result of low public investments in the early childhood care and development sector, households incur considerable out-of-pocket expenses to access childcare services. The examples of Australia, New Zealand, Japan and the Republic of Korea demonstrate that, despite a high level of economic growth, commitments to universal, free public childcare for children between 0 and 6 years old remain low. The high costs associated with accessing childcare services represent a particularly large share of the income of low-paid single mothers and low-income couples.

Private childcare services vary widely in terms of costs as they are for-profit and often unregulated by government policies. NGOs and community-based organizations cater to low-income families (see the examples discussed in box 5), but even nominal user fees or transport and related costs can represent a large proportion of their income. Although subsidies are crucial and have gone a long way to alleviating inequalities in access, they remain insufficient in most contexts given the costs that parents continue to bear for childcare. This often skews decision-making around sending children to childcare centres, versus relying on family-based care.

In Bhutan, for instance, government funds are considered insufficient, and parents and communities play an essential role in supporting community-based centres (Bhutan, Ministry of Education and UNICEF 2020). Parents pay two types of costs, a monetary price in the form of fees and a non-monetary cost in the form of parental labour contributions, time, volunteer support and materials. Most centres use parental contributions to pay for operational expenses on utilities, repair, maintenance and stationery. Similarly, in Georgia, although all public nurseries and kindergartens are free, parents remain responsible for funding various educational resources, such as stationery. In nurseries, parents are also responsible for providing basic hygiene products, such as diapers and wipes. In Sri Lanka, parents reported significant costs for transport, meals, medications, clothing and sanitation, even where fee waivers or subsidies exist.

Table 12 outlines different types of childcare services that cater to the needs of workers in the informal economy, as identified by research by the ILO and WIEGO. Since 2014, informal women workers' organizations have raised a demand for local and national governments to make public childcare available as a key social protection measure aimed at reducing poverty and inequality (ILO and WIEGO 2020). Unregistered services may indicate poor quality, which puts the children of informal economy workers at a disadvantage compared to their wealthier peers. At the same time, this diversity of childcare options represents a way of involving non-state actors in the early childhood care and development landscape in countries to aid and complement government efforts (Devercelli and Beaton-Day 2020).

► **Table 12. Types of childcare services available for informal economy workers' children under 3 years old**

Type of childcare provision	Registered/ unregistered	Employment status of childcare workers	Financing modality of childcare centre
Home-based childcare services	Unregistered	Informal own-account workers Informal waged or salaried workers Contributing family workers Unpaid volunteer workers	User fees In-kind transfers
Home-based childcare services	Registered	Informal/formal own account workers Informal/formal waged or salaried workers Contributing family workers Unpaid volunteer workers	User fees Public subsidies
Private for-profit centres	Unregistered Registered	Own account workers Informal/formal waged or salaried workers Unpaid volunteer workers	User fees In-kind transfers
Community/NGO centres	Unregistered Registered	Informal/formal waged or salaried workers Unpaid volunteer workers	User fees In-kind transfers Public subsidies Donor funding
Cooperative	Registered	Informal/formal waged or salaried workers Unpaid volunteer workers	User fees In-kind transfers Membership dues Cooperative profits Public subsidies Donor funding
Employer-supported centres	Registered	Informal/formal waged or salaried workers Unpaid volunteer workers	User fees Corporate profits Public subsidies Social insurance (social security contributions)

Type of childcare provision	Registered/unregistered	Employment status of childcare workers	Financing modality of childcare centre
Public centres	Registered	Informal/formal waged or salaried workers Unpaid volunteer workers	User fees National revenues (public funding) Municipal revenues (public funding) Social insurance (social security contributions) Donor funding

Source: ILO and WIEGO 2020.

In addition to challenges faced by parents and users, **childcare service providers face multiple challenges in accessing public funding and support**. These challenges relate to navigating the criteria and systems to access financial resources and subsidies, coupled with a lack of awareness of what is on offer. In Indonesia, although various forms of government subsidy exist for childcare centres, this study's respondents often feel unable to apply for them due to procedural hurdles. For example, to be eligible for a *Bantuan Operasional PAUD*, a childcare centre has to meet certain standard accreditation criteria, such as room standards or standards for the educational background of teachers and carers. Teachers must be university graduates and carers must be high school graduates. Respondents believe these criteria do not necessarily meaningfully correspond to the actual needs of children or the delivery quality care; instead, these place unnecessary and often unachievable burdens on centres in order to access public support. For instance, some centres do not only employ graduates as they believe many of the skills required, especially for caring support staff, are better acquired through specialized on-the-job training rather than through formal education.

Owners and operators of other childcare centres have encountered challenges in accessing information on funding and how to access it. For example, in South Tangerang, Indonesia, information on funding availability and trainings for teachers is not easily publicly accessible, and is often spread through networks that not all centres are included in or have access to. Similarly, where subsidies, tax incentives, vouchers and other forms of support are available to childcare users (parents), resources often remain inaccessible to the most marginalized groups due to their lack of awareness and the challenges they face to accessing and navigating dispensing agencies.

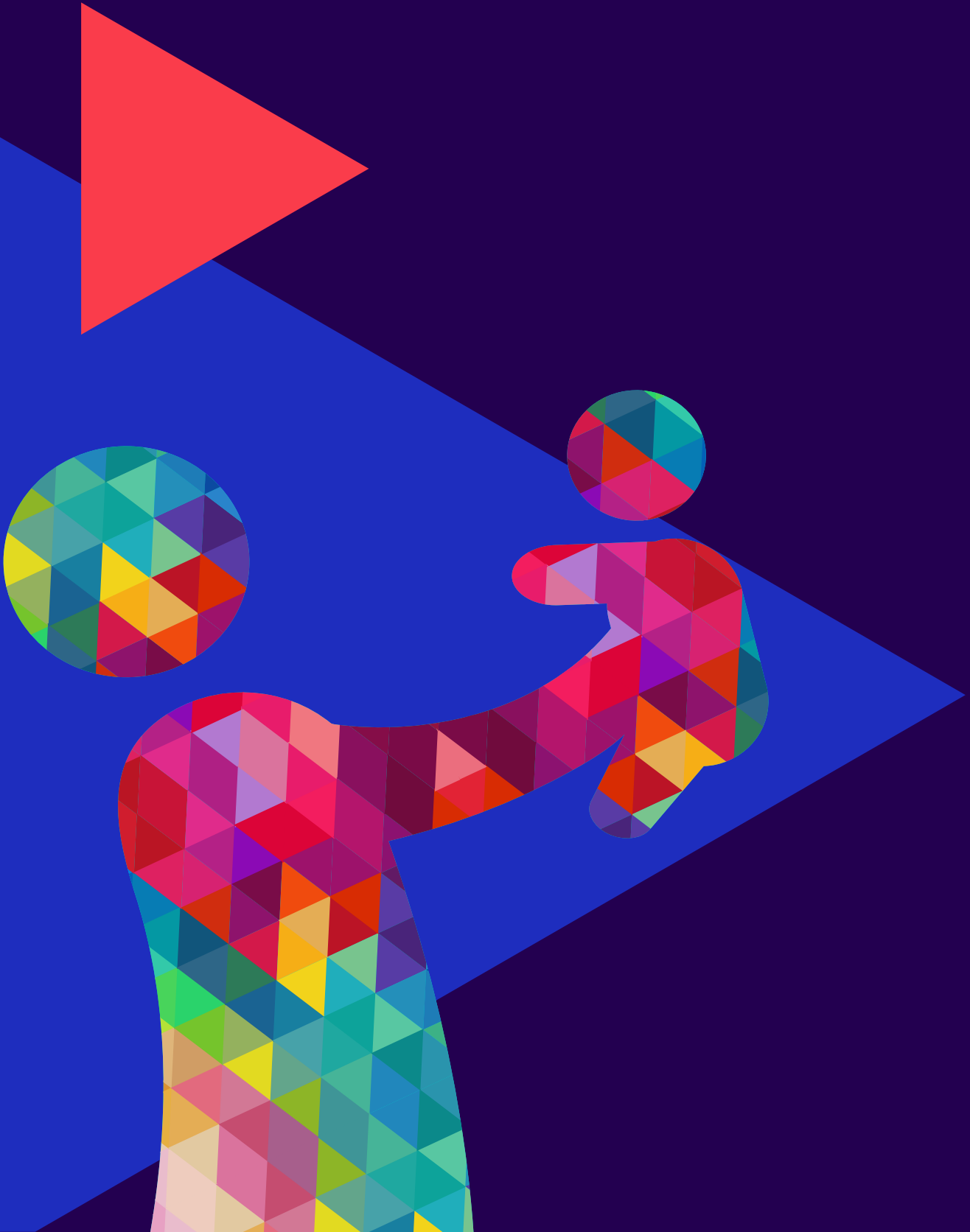
A significant contributing factor to these challenges is the **highly fragmented landscape of funding for childcare**, and the absence of a holistic, equality-based approach to ensuring childcare across economies. As discussed in section 3, a range of ministries are involved in childcare funding, regulation and monitoring in most national contexts. Each has its own specific mandate and remit, such as Ministries of Education, of Social Affairs, of Health and Nutrition, of Labour, and of Women's Affairs. In the Philippines, for instance, funding from the Ministry of Education is limited to explicitly supporting children's learning activities. The mandate of the Ministry of Health and Nutrition focuses on immunization, meals, sanitation and the provision of some primary healthcare. As there is no central coordinating body driving a unified approach to funding childcare from a holistic perspective, keeping track of and accessing different pools of funds for different functions is administratively challenging. In addition, some areas of childcare fall through the cracks and remain unfunded, such as transport, clothing, and routine operating costs for centres, including electricity and water.

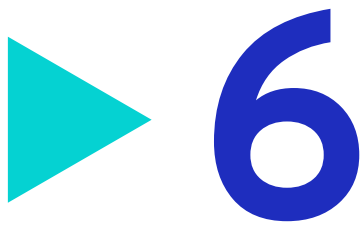
The fragmented nature of the childcare funding and administrative landscape is further complicated by multi-tiered implementation systems, where budgets are often eventually allocated and disbursed at the local (municipal or district) level. In Nepal, although national legislative frameworks exist for funding and supporting childcare, this study's primary research finds that implementation at the local level is uneven, and there are major gaps in ensuring that funding is earmarked and disbursed as intended (see section 9.7). In the Philippines, legal frameworks list various sources of funds, including but not limited to the Department of Education, Culture and Sports, the Department of Health, the Department of Social Welfare and Development, and the internal revenue allotment to the Department of the Interior and Local Government. Revenues are distributed based on the computation prescribed under the Local Government Code, 1991, for funding early childhood care and development programmes and services at the level of Local Governmental Units (LGUs). However, funding at this level is highly uneven across districts because subsidies and funding ultimately depend on the perceived value of childcare in the community and the Local Governmental Unit.

Increasing public investments in the childcare sector requires a nuanced understanding of the complexities within each country context, given their unique political economy, demographic profile, cultural norms and population trends. Each country's level of income and development plays a role in determining the fiscal space available for public spending. With the COVID-19 pandemic, there has been a tightening of fiscal space. Thus, innovative financing mechanisms and funding models are required, some of which have been highlighted in this section, while others are discussed in section 9 on policy recommendations.

Section 6

Quality



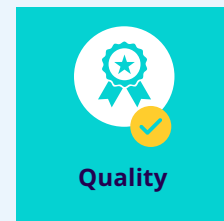


Quality



Key messages

- ▶ Even where standards do exist on safety, physical and pedagogic infrastructure, and decent work for childcare workers, there are **gaps in terms of monitoring and enforcing these standards.**
- ▶ While there are regulations governing minimum qualifications for childcare workers, there is a **mismatch between qualification requirements and role-specific, practice-based learning and training** in competencies crucial for childcare.
- ▶ While formal qualifications are essential, an understudied dimension of quality is the significant **emphasis parents place on carers' 'intangible' qualities**, which **determines parental trust and the likelihood of children's enrolment.**
- ▶ The **wide variety of modalities of childcare provision** make it difficult to implement and enforce existing minimum legislative standards.



The perceived quality of childcare is a key factor determining parents' willingness to enrol children in centres. Attentiveness to questions of quality is essential for increasing uptake of childcare and freeing up mothers' time. Research by the International Finance Corporation identifies seven markers of quality.

These are: a safe learning environment, a stable and qualified workforce, engaged caregivers (mothers and fathers), teacher-to-child ratios, learning opportunities, child development tracking, and nutrition (IFC 2017). A living wage – based on the principle of equal pay for work of equal value – and decent working conditions for childcare workers are other important markers of quality which enable workers to give their best to the children they care for. Therefore, quality can be conceptualized as the extent to which the childcare sector supports children to develop intellectually, physically, socially and emotionally, including adequate support for childcare workers to help them meet children’s needs (UNICEF 2019a).

Varying levels of standards and frameworks are in place across Asia and the Pacific to regulate the quality of childcare. These fall under two broad categories: (i) infrastructure, including the provision of basic physical and pedagogical infrastructure, standards for safety and nutrition, pedagogical frameworks and curricula, and caregiver-to child ratios, and (ii) minimum qualifications, certification, and training requirements for childcare workers. Key gaps exist in terms of meeting minimum infrastructure and care delivery standards, largely due to inadequate systems for monitoring and enforcing standards.

► 6.1. Standards and frameworks on childcare infrastructure

This study finds that policy frameworks exist in most economies to regulate the safety, health, nutrition, care and development of children through the provision of adequate physical and pedagogical infrastructure. However, **significant gaps remain in the monitoring and implementation of these standards and frameworks.**

The situation in **South Asia** demonstrates a need for improvement in upholding standards for nutrition and safe environments for children. According to the Bangladesh National Education for All (EFA) Review 2015, several preschools do not meet minimum standards on physical environments and facilities, or on adequate safety and security provisions. Safe water and hygienic toilets are often unavailable, and a 1:30 teacher-to-child ratio indicates that group sizes are far too large to foster positive interaction. As a result of the 2015 review, Bangladesh recently introduced a new regulatory law, the Child Day Care Centre Act, 2021 (see box 7).



Box 7. Promising practice from Bangladesh on regulations for childcare centres

In June 2021, the Parliament of Bangladesh passed the Child Day Care Centre Act, 2021, bearing in mind the rising number of professional and working women. Four types of childcare centres are recognized under this law:

1. Child day care centres run with subsidies provided by the Government.
2. Day care centres run by the government agencies, directorates, departments, statutory agencies or autonomous agencies that provide free services.
3. Day care centres run by individuals or organizations for commercial purposes.
4. Non-profit day care centres run by individuals, organizations, NGOs, clubs, associations, and the corporate or industrial sectors.

The new law requires that all childcare centres are registered with the Government. Thus, all government, semi-government, autonomous and private entities will be regulated once the law comes into force. According to the Cabinet Secretary, 119 child day care centres were run by the Ministry of Women and Children Affairs in 2021, as were 20 by the Ministry of Social Welfare.

The Act makes provision for a fine of up to 500,000 Bangladesh taka (equivalent to US\$4,762), or 10 years of imprisonment, in the case of any mismanagement and harm to a child's safety. It is mandatory to ensure health, protection and other services. Authorities are required to collect feedback from parents once every three months.

Source: The Daily Star 2021.

In 2017, India developed National Minimum Guidelines on the provision of crèches. However, these are not binding for providers and no monitoring or enforcement mechanisms are in place. Crèche and care facilities provided under the Integrated Child Development Services Scheme follow their own standards for physical facilities and caregiver ratios. These are one adult caregiver for a group of 10 children under 3 years old, and one adult caregiver for a group of 20 children between 3 and 6 years old.

In Nepal, state-funded centres provide midday meals. Meals provided by private kindergartens are generally considered more nutritious, but this is only due to the active monitoring of food quality by parents or guardians on a regular basis. Primary research conducted for this study with childcare users and providers in Sri Lanka indicates that, with the exception of newly established day care centres for children with special needs, centres run by the Colombo Municipal Council (CMC) are often poorly resourced in terms of space and learning materials for children.

To date in Bhutan, early childhood care and development programmes are not regulated in terms of their pedagogical infrastructure, including an absence of guidelines on curricula and caregiver-to-child ratios. Nevertheless, all physical infrastructure facilities – including buildings, toilets and outdoor play areas – must be licensed by the Ministry of Education. Impact evaluation studies by Save the Children in 2015 have found that many centres were housed in poorly maintained renovated buildings lacking proper toilet facilities. Children who attend such poor quality centres have lower learning outcomes than children who attend better quality centres (UNICEF 2017a). By 2016, Nepal’s Ministry of Education had increased its establishment fund for centres to US\$20,000 per centre and a guideline on a teacher-to-child ratio of 1:15 was in use (UNICEF 2017a).

Significant gaps in standards and infrastructure also exist in **Southeast Asia**. Timor-Leste lacks both infrastructure facilities and teaching and learning materials, with especially few books for literacy and language learning in rural areas. UNICEF is supporting the country’s Ministry of Education to construct child-friendly school buildings with water, sanitation and hygiene (WASH) facilities.



There are rules for the schools [kindergartens] to adopt in their midday meal programme to ensure that children get healthy and nutritious diets. The Government has announced the cutting off [of] junk food from the meals. However, there is a severe lack of monitoring mechanisms in place to guarantee healthy and nutritious diets for children.”

– Policy expert, Nepal



We pay money for the education and care of our children. The amount we pay has to be worthwhile. We are aware of the nutrition requirements of the children for their growth and development. We monitor the food at the centres quite frequently and do not allow our schools to include junk food in meals.”

– Mother of a student at a private kindergarten in Kathmandu, Nepal

Community-based alternative preschools, however, have an adequate number of facilitators and maintain the recommended facilitator-to-child ratio of 1:14, which gives carers more time for one-on-one interaction with children (De Araujo 2018).

Viet Nam introduced Fundamental School Quality Levels in 2009, outlining key minimum quality standards for schools on teaching staff, teaching materials, infrastructure and school management (World Bank 2011). Early childhood care and development infrastructure in Viet Nam is relatively better than elsewhere in the subregion. Roughly 55 per cent of preschool classrooms in the country are permanent, while 37 per cent are temporary. Approximately 88 per cent of all schools, kindergartens and preschool classes in rural areas have water supplies and appropriate sanitation facilities. In some rural schools, there is just one teacher and an assistant teacher due to a shortage of qualified teaching staff. Group sizes are usually smaller in nurseries, ranging from 15 to 25 children, with teacher-to-student ratios of 1:7 or 1:8. The teacher-student ratio in preschools for 5 year olds is 1:17 (Viet Nam, Ministry of Education and Training 2015).

In the Philippines, primary research conducted for this study reveals that public or privately-run childcare centres often do not meet the recommended teacher-to-child ratio. The COVID-19 pandemic has resulted in many local government-run childcare centres being converted into storage areas for relief goods and quarantine facilities. During the pandemic, many children were unable to access digital learning platforms due to a lack of digital infrastructure (see section 9.1 on the national case study on the Philippines). Childcare users in the Philippines also report that trust in childcare workers is built on the combined basis of facilities, the curriculum and positive interactions with well-trained teachers.

In Cambodia in 2012–13, 24.7 per cent of preschools had toilets on their premises, while 35 per cent had drinking water, despite government-set construction standards (Cambodia, National Education For All Committee 2015). The absence of a national database on the childcare sector in Myanmar makes it difficult to assess compliance with and accountability to quality standards. A baseline study in 2012 noted that only 2 per cent of Myanmar's early childhood care and development centres met all 15 core quality indicators, 54 per cent required urgent attention, and just 31 per cent had sufficient play materials.



[At the childcare centre] They have an organized learning environment. Children are comfortable because there is an air conditioner. They have a refrigerator, wash area, and comfort room. The centre is orderly. There are toys, blocks, colouring materials, dominoes and musical instruments.”

– Father of a child attending a childcare centre run by a Local Government Unit, the Philippines

Moreover, 24 per cent of teachers lacked appropriate training, a factor that significantly affects quality, as discussed below (Myanmar, Ministry of Social Welfare, Relief and Resettlement 2014).



Box 8. Promising practice on the holistic childcare centre accreditation framework in Singapore

The Singapore Preschool Accreditation Framework (SPARK), designed by the Ministry of Education, was introduced in 2011 to strengthen the provision of quality preschool education. The framework encourages licensed childcare centres and kindergartens catering to children between 4 and 6 years old to conduct an annual self-appraisal using its Quality Rating Scale, and to volunteer for external assessment. At present, almost 900 of the 1,800 preschools in Singapore are SPARK-certified. For centres that offer care for infants and toddlers between 2 and 18 months old, a staff to infant ratio of 1:5 is required under the Class A licence. This indicates that educators must be well-trained to cater to a wide range of learning and developmental needs. However, the quality of teacher training has been heterogeneous and was only harmonized in 2017, suggesting that the quality of educators remains uneven.

Among countries in **Central and West Asia**, primary data collection in Georgia indicates that pedagogical infrastructure is inadequate in public childcare facilities. Group sizes are prescribed as 25 children per group for the 2–3-year-old age group, and 30 children per group for the 3–6-year-old age group (see section 9.2 on the national case study on Georgia). However, kindergarten groups in the city of Tbilisi are regularly overcrowded, with 40–60 children per group observed during the primary research conducted for this study, as a result of the shortage of places. This complicates efforts to meet individual children’s learning needs by obliging teachers and care workers to focus on routine interactions – such as group hygiene and meals – rather than on developmental education. There are a maximum of 15 children per group in private kindergartens, making interactions with them more manageable for care workers. However, the quality and nature of professional practice at private institutions does not appear to differ substantially from public kindergartens.

In terms of infrastructure, appropriate wash basins and towel hooks, are lacking in many public kindergartens, as are hygienically designed furniture and toys. Toilet arrangements are often not aligned to children's needs, especially of children with disabilities, and ensuring the supply of hot water is challenging. Some kindergartens do not have gardens or safe surroundings, and play areas are not organized according to children's needs and safety. A recent initiative to enhance learning and development outcomes for children under the age of 6 in the Kyrgyz Republic is discussed in the box below.



Box 9. Promising practice on alternative models from the Kyrgyz Republic

Several recent government initiatives in the Kyrgyz Republic have sought to create alternative models that increase children's access to early learning. Child Development Centres, offering spaces for early childhood learning and development, were piloted in eight libraries across the country between September 2018 and September 2019. Implemented by the Ministry of Culture and Tourism, the pilot involved cross-sectoral support from the Ministry of Education and Science, the Ministry of Health, the Ministry of Finance, and the State Agency for Local Self-Government and Ethnic Relations, alongside technical assistance from UNICEF's Country Office. Staff trained on early childhood development oversee developmental activities and the centres are provided with toys, games, books and ideas to effectively deliver joint activities for children and parents.

Source: UN Women 2019.

Pre-primary class sizes often exceed 40–45 children in Mongolia, despite the standards set by the Early Childhood Education Framework, which limit the number of children per class to 25. This situation is due to a mismatch between supply and demand, coupled with poor resourcing, especially in remote rural areas. Large class sizes double the workloads, but not the wages, of teachers, assistant teachers, cooks, cleaners and doctors, while compromising the quality of care and attention they are able to provide to children. The need to rent expensive premises due to the lack of centre-owned buildings and facilities is a major challenge, resulting in high infrastructure costs which detract from the ability to invest in quality.

Large private kindergartens and their branches offer safer, more convenient and better quality facilities than public kindergartens, although many private kindergartens operating on the first floor of residential apartments do not meet standards for basic physical infrastructure. For instance, they usually lack playgrounds and only have one small bathroom. According to standards for childcare centres, the area per child should be 2.5 square metres, the carer-to-child ratio should be 1:5, and the centre's dining room should be separate from the children's play area. Despite these standards, there are cases of childcare centres accommodating 40 children in two rooms, while some centres operate in one room with 10 children. The carer-to-child ratio is usually 1:7 or 1:8, and age groups are often mixed in a way that is not conducive to meeting different groups' specific infrastructural and pedagogic needs (see section 9.3 on the national case study on Mongolia).

Uzbekistan has no system in place to measure or monitor quality within the preschool system, which hinders effective policymaking on childcare. Existing data shows that preschools frequently do not have functioning lighting, heating, water supplies and sewerage services during school hours, especially in rural areas, and a large number of existing preschools (47 per cent in 2016) need major repairs (World Bank 2018b). In Armenia, the quality of kindergarten provision is comparable to other countries in the subregion. The curriculum is considered a strong point, although human resourcing is an area where further improvement is required (Ayliffe et al. 2019). Although new standards and curricula have been developed in Azerbaijan, they have yet to be widely disseminated among childcare centres due to a lack of funding (World Bank 2018a).

In **East Asia**, Hong Kong, China, has seen significant improvements in the recommended teacher-to-student ratio and requirements for kindergarten teachers. The Quality Assurance Framework has contributed to an increased number of trained and qualified kindergarten teachers and personnel. Government documents seek to improve childcare quality, including operations' manuals, 'do's and don'ts', and a guide to the pre-primary curriculum. Similarly, China's Ministry of Education has issued a range of documents including regulations on the management of kindergartens, kindergarten working regulations and professional standards for kindergarten teachers (Li et al. 2017).

In Japan, the pupil-to-staff ratio in day care centres is 1:3 for the 0 age group, 1:6 for the 1–2-year-old age group, 1:20 (or sometimes 1:15) for 3-year-olds, and 1:30 for 4–5-year-olds. In addition to the main day care workers, each day care centre must also have at least two additional childcare workers. In the Republic of Korea, responsibilities for regulating the childcare sector are split between the national Government and regional and local authorities, where duties for standard-setting and curriculum development sit at the federal level (see box 10).



Box 10. Promising practice on childcare sector regulation from the Republic of Korea

The Republic of Korea's early childhood care and education system has a split system of governance. The Ministry of Education oversees all kindergartens for 3–5-year-olds, while the Ministry of Health and Welfare oversees all childcare centres and family day care centres for 0–5-year-olds. In 2004, childcare became the responsibility of the Ministry of Gender Equality and Family, but this mandate was transferred to the Ministry of Health and Welfare in 2008. The Ministries of Education and Health have worked together since 2011 to develop and implement the Nuri Initiative, a project that represents the core of early childhood education policies for children aged 3–5, including a common curriculum, a common government-provided subsidy, and a common in-service teacher training programme.

Reflecting the split system of governance, two systems of monitoring exist in the Republic of Korea: the Child Care Accreditation System (CAS) introduced in 2005, and a Kindergarten Evaluation System (KES) introduced in 2008. Participation in both systems in their entirety is voluntary, but participation is tied to government subsidies. Therefore, 96.3 per cent of kindergartens participated in KES in 2015, while 78.8 per cent of childcare centres achieved accreditation through CAS. Both systems involve a self-evaluation, a written evaluation and an on-site evaluation, with results ultimately made available to the public to inform parental choice and incentivize improvement.

Source: NCEE 2018.

In **the Pacific**, Australia created a National Quality Framework for Early Childhood Education and Care in 2010 to provide guidance and assurance to parents and carers. The framework outlines National Quality Standards (NQS), which set a high national benchmark for early childhood education and care, and care services outside school hours. NQS quality ratings are published annually to share good practices, promote continuous quality improvement, and provide key information to existing and prospective users of regulated education and care.

In 2018, two-thirds (65 per cent) of services were rated 'Working Towards NQS', around half (51 per cent) were rated 'Meeting NQS', and 14 per cent were deemed to be 'Exceeding NQS'. Roughly nine out of ten (88 per cent) of early childhood care and development services were rated 'Meeting NQS' or above for children's health and safety (ACECA 2020). As many as four-fifths (86 per cent) of family day care services were rated as 'Meeting NQS' or above, and better teacher-to-child ratios over the years (1:5) have resulted in an improved quality of learning.

New Zealand has also established national frameworks and curriculum standards, alongside decent pay for childcare workers. However, other Pacific Island countries lag behind on infrastructure and facilities. Kiribati, for example, has identified infrastructure as a barrier to ensuring quality early childhood care and development. In 2010, only 75 of the country's 225 pre-primary schools had classrooms, while the remainder used local community halls (known as *maneaba*). In the same year, only 38 preschools had toilets and no data was available on the provision of running water or handwashing facilities (World Bank 2014b).

UNICEF conducted a detailed situation analysis of WASH facilities in Tonga, Tuvalu, Niue, Nauru, Kiribati, the Federated States of Micronesia, Palau and the Cook Islands in 2017–18. Box 11 highlights the components set out in the Pacific guidelines to support the formulation of National Quality Frameworks for Early Childhood Care and Education among Pacific Island member countries.



Box 11. Promising practice on guidelines for the development of national quality frameworks from the Pacific Islands

The Pacific Regional Council for Early Childhood Care and Education's (PRC4ECCE) Guidelines for the Development of National Quality Frameworks for Early Childhood Care and Education contain five components:

1. **Policy, legislation and governance**, covering strategies and regulations on how to support early childhood care and education.
2. **Human resources**, identifying who should work with young children, what qualifications and training they need, and how they will be compensated.
3. **Curriculum, child assessment and environment**, describing how children will be taught, what they will learn and the best learning environments for young children.
4. **Performance monitoring and assessment**, illustrating how quality will be defined and monitored, including who will provide oversight, what will be monitored, and how often monitoring should take place.
5. **Family and community partnerships**, outlining the relationship between governments (oversight provision), and families and communities (ownership and implementation of early childhood care and education centres).

Source: PRC4ECCE and UNICEF 2013, 5.

▶ 6.2. Qualification and training of childcare workers

Empirical evidence highlights the importance of continuous training and lifelong learning for childcare workers to enable better, more effective teaching, high quality interactions between teachers and children, and the improved learning, development and well-being of children, especially those who are disadvantaged in any way (COFACE 2018).

While all economies in Asia and the Pacific have minimum educational requirements for teachers and support staff working in childcare centres, the types of standards varies. Table 13 outlines this variation for the countries selected for case studies in this study, including the unevenness in monitoring and enforcement. These standards are often not adhered to due to a lack of qualified staff, or the high costs associated with employing qualified workers, coupled with the poor monitoring and enforcement of standards.



Not all our staff are college graduates. Even if they received training and attend seminars, it still matters if your degree is related to early childhood or education.”

– Centre manager of a government-run crèche, the Philippines

► **Table 13. Minimum certification and training requirements**

Economy	Minimum certification and training requirements
Georgia	Primary research finds that 44 per cent of caregivers have no relevant qualifications and 50 per cent of directors do meet the minimum educational standard of a relevant bachelor’s degree. Municipalities lack resources for retraining and enhancing caregivers’ qualifications. Public or private caregivers cannot attend such courses independently because of their low salaries.
Indonesia	In <i>Taman Penitipan Anak</i> centres, most teachers have a diploma or bachelor’s degree, while care workers in <i>Taman Anak Sejahtera</i> facilities have high school certificates.
Lao People’s Democratic Republic	The Ministry of Education and Sports provides the curriculum and mandates annual training for all childcare workers. In practice however, the primary research conducted for this study finds that the training for childcare workers is insufficient and that most have not been trained on the new curriculum.
Nepal	<p>No minimum qualifications have been set for caregivers at NGO-run or community-based centres. Many centres are supported by the foreign and domestic volunteers, usually students.</p> <p>State-funded centres have set minimum qualifications for facilitators, who must at least be Grade 10 graduates. Almost 39 per cent have beyond the minimum qualification, 54.9 per cent possess the minimum qualification, and 6.4 per cent do not meet minimum qualifications.</p> <p>Private sector caregivers usually have a bachelor’s degree, but not necessarily in a field related to education, care or pedagogy.</p> <p>The School Sector Development Project provides one month of training, which 90 per cent of caregivers have attended.</p>

Economy	Minimum certification and training requirements
Sri Lanka	The Colombo Municipal Council’s standards stipulate education and training requirements for childcare. However, according to the childcare providers interviewed for this study, most childcare services are ‘exposure programmes’ and their quality is not monitored. One notable exception in this regard is the Colombo Municipal Council Special Needs Centre. Private centres have, and strictly maintain, their own standards. Care workers interviewed at NGO centres reported that they do not have suitable opportunities for training and career progression.
The Philippines	The Early Childhood Care and Development Council has developed Competency Standards for Child Development Teachers and Child Development Workers to ensure that they possess the competencies essential for implementing quality programmes. Primary research conducted for this study finds that many childcare workers do not have adequate professional preparation. College degree holders often have diplomas that are not related to early childhood and preschool education. They receive various trainings to remedy this concern.

Source: Based on a combination of primary and secondary data collection.

Not only are standards often unmet, but there is also a **mismatch between what the standards or guidelines demand and what is understood by those within the childcare sector as important qualifications** required to ensure quality childcare.

For instance, where regulations demand that teachers have at least a bachelor’s degree, no attention is paid to whether the degree is in any way substantively related to childcare, or equips graduates with the technical and soft competencies required to undertake such a role. Even where childcare workers have degrees that are specifically related to education, they are not often expressly trained to meet the needs of young children within the 0–6 age range. Childcare workers interviewed for this study highlight concerns over the inadequacies of existing requirements, and the lack of opportunities to gain specialized training that would enhance the quality of their childcare service delivery and better equip them for career advancement.



Although I have a bachelor’s degree in education, I feel we need skills that specifically are geared towards providing effective childcare. It has two benefits. First, it is good for my career advancement and, second, I will be equipped with proper knowledge and skills to provide effective care to the children.”

– Childcare worker, Nepal

In **Central and West Asia**, lacunae exist both in terms of data and in the availability of qualified or highly trained workers in the childcare sector. In Mongolia, early childhood education teachers and support staff are required to have at least a bachelor's degree, while assistant teachers or child carers need to be certified with a minimum of three credit hours of training. In Georgia, caregivers lack relevant competencies and mechanisms to improve the quality of the care they provide. Professional training is not sufficiently provided, and no preparation in this regard is delivered by higher education institutions. This study's respondents from Georgia note that the initial training courses for caregivers lasts 66 hours and is insufficient as it largely consists of theoretical information without practice-based learning. In Armenia, more than half of the staff working in kindergartens (59 per cent) have a college degree, but only 18 per cent have received training on early childhood development (Ayliffe et al. 2019).

Detailed up-to-date data on teachers' qualifications and wages in the Kyrgyz Republic is not available. A study in 2010 noted that 9 per cent of early childhood care and development workers had not completed the mandatory entry-level requirements of having a higher education degree (World Bank 2013a). Similarly, although preschool teachers in Uzbekistan are required to have completed a minimum of three years of vocational training, only 77 per cent have done so. In Tajikistan, preschool staff qualifications also do not meet state standards. According to regulations for early childhood care and development institutions, all pedagogical staff in preschools should have secondary or higher professional pedagogical education, with knowledge of preschool psychology and basic remedial pedagogy. However, in 2017 only 50 per cent of professional staff had a degree in pedagogy (World Bank 2019a).

In **South Asia**, Bangladesh has established clear qualification levels for teachers and staff, ranging from high school to university for different roles in playschools, preschools, childcare centres and integrated services (Bangladesh, Ministry of Primary and Mass Education 2013). However, no minimum standards on competencies in teaching exist. Teachers in these centres often do not hold a professional degree in education pedagogy. The provision of in-service professional training also varies across localities (Rao et al. 2018). Limited professional development opportunities for pre-primary education teachers are not conducive to attracting and retaining talent. Bhutan lacks both infrastructure and trained personnel in the early childhood care and development sector. Personnel capacity to implement quality services is limited, including of facilitators and teachers. Challenges include limited infrastructure at childhood centre, alongside staff qualifications. Facilitators must have passed Grade 12 (secondary schooling) and have undertaken 13 days of training. Attracting and retaining quality facilitators is another challenge, and crèche caregivers and centre facilitators want targeted opportunities for professional development (Bhutan, Ministry of Education and UNICEF 2020).

Publicly-funded childcare services in India as part of the Integrated Child Development Services Scheme, or the National Crèche Scheme (NCS), usually hire local women as volunteers, known as *anganwadi* workers (childcare workers or helpers). These women usually lack professional skills or educational qualifications and are only paid a low honorarium, rather than a salary, because they are considered volunteers. According to the National Crèche Scheme's Guidelines, the minimum qualification for crèche workers is the completion of Class XII (intermediate) and the requirement for helpers is to have completed Class X (matriculation). If individuals with these qualifications are unavailable, state governments or district administrations may reduce requirements to the completion of Class X for crèche workers and Class VII for helpers. The age limit for both categories is 18–35 at the time of appointment. As a result, unpaid care labour is simply redistributed from mothers to other women, without meaningfully rewarding or remunerating care work.

In **Southeast Asia**, a mix of standards and skills in the early childhood care and development sector exists across countries. The proportion of trained preschool teachers in Viet Nam who met national standards increased rapidly between 2006–07 and 2012–13, rising from 87 per cent to 96.6 per cent (Viet Nam, Ministry of Education and Training 2015). An improved recruitment policy for preschool teachers prioritizes staffing for unstable areas. In Cambodia, an education review in 2015 found that the quality of basic education was low, indicating a need to improve the skills and abilities of teachers and childcare workers (Cambodia, National Education For All Committee 2015).

There is a need to improve childcare workers' levels of education and skills in Malaysia, especially through professional early childhood care and development training programmes. An ongoing process is working to harmonizing qualification requirements for preschool teachers across different providers in the childcare sector. Advocating for upgraded qualifications for childcare workers through higher quality training is often met with resistance, discouraging potential childcare workers from joining the sector (Yoke-Yean et al. 2021). Despite two national level early childhood curricula for 0–6-year-olds – the PERMATA National Curriculum and the National Preschool Standard Curriculum (NPSC) – implementation has proved challenging due to poor training and teachers' limited understanding of the curricula (Rahmatullah et al. 2021).

In 2016, the Government of Singapore devised an Early Childhood Manpower Plan to provide more opportunities for individuals to join and develop their careers in the childcare sector. The Continuing Professional Development (CPD) Master Plan provides a roadmap to enable workers currently certified by the Early Childhood Development Agency to gain the knowledge and skills they need to progress within and across the educator, teacher and leader tracks. The agency covers 80–100 per cent of course fees for all certified educators who participate in short-term continuing professional development.

The SkillsFuture programme offers a subsidy of up to 90 per cent for mid-career professionals over the age of 40, including early childhood workers, to take courses and upgrade their qualifications. Training awards, a Professional Conversion Programme for Preschool Teachers, the Place-and-Train Programme for ‘Educarers’ and professional development programmes have also been rolled out to attract and develop early childhood educators. Box 12 discusses an innovative public-private partnership to promote the professional training and development of childcare workers in Viet Nam.



Box 12. Promising practice on training childcare workers from Viet Nam

OneSky partners with local communities to train adult caregivers (early childhood educators, child welfare workers, childcare providers, parents, extended family members, foster parents and others) to provide responsive care and create the types of safe, nurturing learning environments that help young children thrive. In 2011, the Government of China invited OneSky to train every child welfare worker in the country. This partnership transformed the standard of care and directly reached over 200,000 children in China’s 31 provinces.

Partnering with the Government of Viet Nam to transform systems of care, OneSky addresses the needs of marginalized young children whose parents work in Vietnamese factories and expanding industrial zones. In partnership with the national and provincial governments, OneSky is training home-based care (HBC) providers working in the country’s industrial zones. An Early Learning Centre in Da Nang’s Hoa Khanh Industrial Park is the national training and demonstration centre for quality early childhood education, providing daily care to 252 children of migrant factory workers. Since its launch in 2017, hundreds of children, parents and community members have benefitted from the Early Learning Centre’s programmes and best practices. At the invitation of Viet Nam’s Ministry of Education and Training to scale up the initiative nationwide, OneSky is now working to build government capacities to implement training programmes to reach all children in Viet Nam with access to quality home-based childcare.

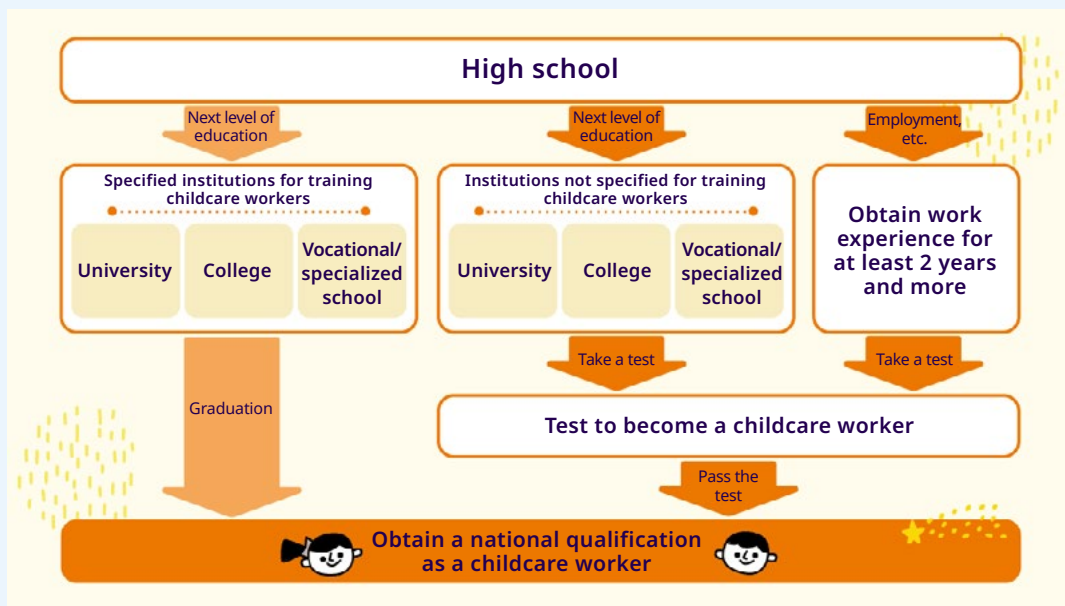
Source: OneSky 2023.

Among **East Asian** economies, Japan has highly qualified childcare staff. To become a childcare worker in Japan, a person must obtain a national qualification as a childcare worker. Those engaged in the care sector and teaching staff in early childhood education and care need a minimum qualification equal to the International Standard Classification of Education (ISCED) level 5 (see figure 5). There is both public and private provision of education and training for day care staff and kindergarten teachers. A variety of providers offer professional development opportunities. The Government, employers, universities, colleges, and non-governmental providers offer professional development for kindergarten and childcare staff.

FIGURE 5

Becoming a childcare worker in Japan

There are two ways to obtain a national qualification as a childcare worker



Source: Ministry of Health, Labour and Welfare of Japan (translated by Aya Matsuura, ILO).

By contrast, no professional training on early childhood care and development is provided in Myanmar, although some short-term in-service training exists. Although Myanmar has a national early childhood development framework, it includes few process or output indicators on teacher training and qualifications. Formally, staff must have attained professional, secondary or university level education.

In practice, there is no nationwide data on teacher or childcare workers' quality (Rao et al. 2021). In rural China, there remains a shortage of qualified teachers for childcare centres. As a result, centres often resort to hiring untrained persons. In 2012, more than 68 per cent of preschool teachers in urban areas had a bachelor's or higher degree, as did just 46.4 per cent of rural kindergarten teachers (World Bank 2016).

Among countries in the **Pacific**, Australia, New Zealand and Fiji have among the most developed childcare sectors in terms of trained and certified professional staff. The Tonga Education Policy Framework 2004–2019 offers a certificate and diploma programme for early childhood care and development teachers. The programme is delivered by the Tonga Institute of Education, which is also responsible for the development of the curriculum (UNICEF 2017h). In Kiribati, data on pre-primary teacher training indicates the need to strengthen the quality of education by improving formal training for teachers. However, there are no training schools in Kiribati. Teachers would need to travel to places like Fiji, Australia or New Zealand to access suitable professional development training (UNICEF 2017d).

Across the seven countries in which primary data was collected for this study, parents highlight the **importance of trust in childcare centres, and specifically in childcare workers, as a crucial factor determining their willingness to enrol their children**. Trust is developed, this study's primary research shows, if there is quality in the provision of childcare. Where childcare workers are perceived as, by and large, passionate and dedicated to their work, they often receive considerable moral and other support from parents.

According to interviews with respondents, the qualities that parents most value in childcare workers have less to do with their formal qualifications and more to do with 'intangibles' – such as a being loving, caring, patient, dedicated, trustworthy and gentle (see section 9.1 on the national case study on the Philippines). Therefore, while the level of qualification of childcare workers is of significance to childcare quality, a seldom discussed element which disproportionately affects parent's perceptions of quality, and their willingness to enrol children, is this broader set of normative associations with a 'good' care worker. Time and again, the parents interviewed stressed the importance of trust for enrolment and re-enrolment.

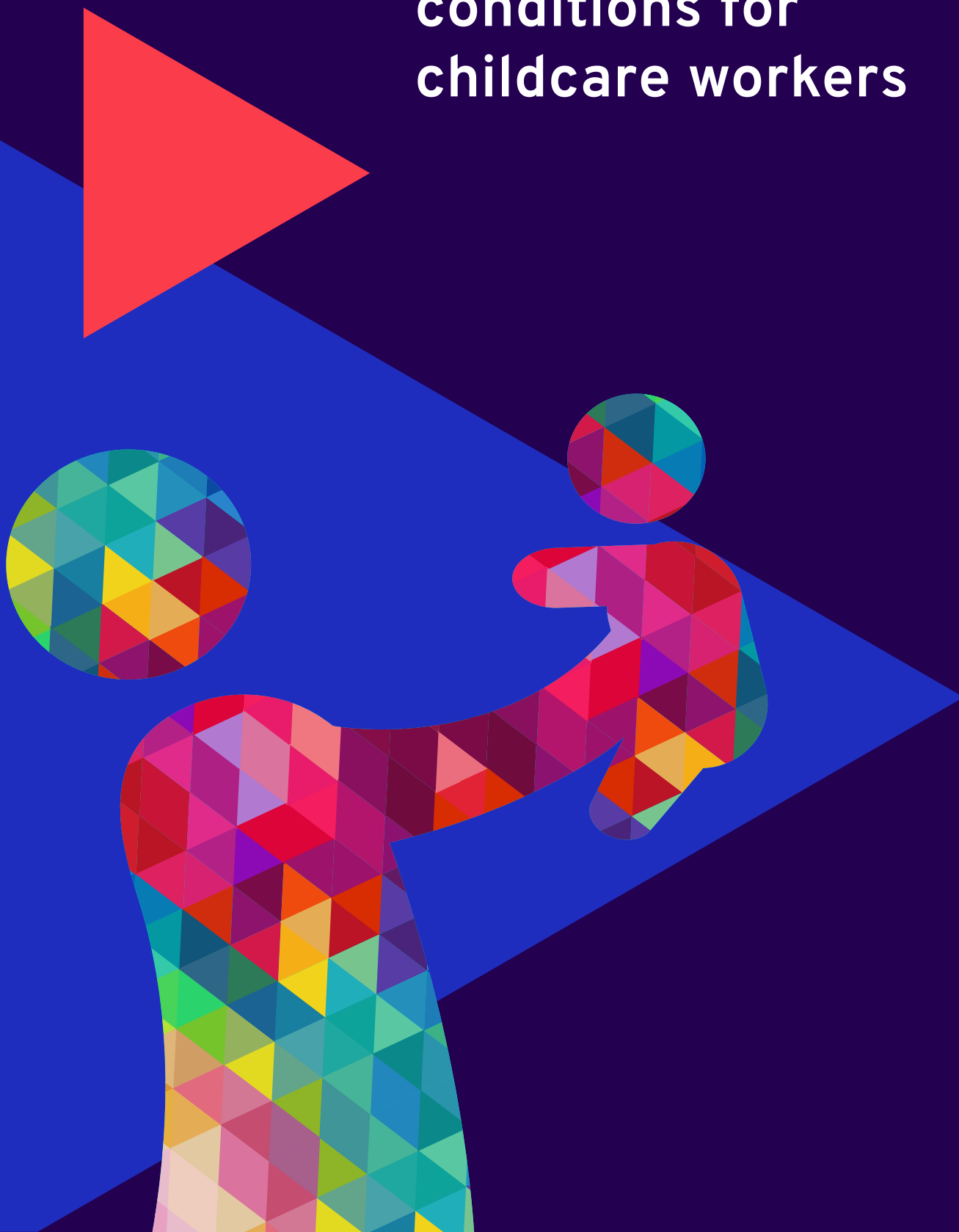


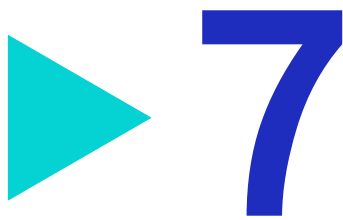
We brought the elder child to this day care centre when we had only one child. When my wife got pregnant again, we went back to our village. After the second baby was born, we came back here to work. And, **we put the children back in this day care [centre].**"

– Father of a child enrolled in an NGO-run day care centre that caters to Free Trade Zone workers' children, Sri Lanka (emphasis added)

Section 7

Decent work conditions for childcare workers





Decent work conditions for childcare workers



Key messages



- The **childcare sector remains highly feminized across Asia and the Pacific**. Parents and care workers often reflect and reinforce dominant norms around care as women's work.
- In non-OECD countries, **wages are well below average and often below the poverty level** in most economies in Asia and the Pacific.
- Childcare workers have **low levels of job security, employment benefits, and social protection**.
- It is crucial to **recognize care workers' own household care responsibilities** (especially given the sector's feminization) to ensure decent work.
- The childcare sector is marked by **low levels of collectivization, bargaining power and voice**. Unions often do not focus on childcare workers (especially if they are migrants), leading to low levels of meaningful representation.

The International Standard Classification of Occupations categorizes selected education workers into the following groups: early childhood care and development workers, pre-primary education teachers, primary education teachers, secondary education teachers, and childcare workers in the household (Addati, Cattaneo and Pozzan 2022). This study is concerned largely with early childhood care and development workers and pre-primary education teachers who together cater to children between 0 and 5 years old. As discussed above, the ILO estimates that investing in universal childcare and long-term care services can generate up to 280 million jobs by 2030 globally (ILO 2022). Care workers' skills levels, conditions of work, remuneration and voice in decision-making are critical aspects for ensuring the provision of quality services.

A number of care-related international labour standards have a bearing upon the working conditions of workers in the childcare sector and other care related occupations.²⁷ Many significant ILO Conventions among these have yet to be ratified by countries in Asia and the Pacific (ILO 2018). While the absence of ratification does not rule out the possibility of national legislation that protects and regulates workers' rights, this can be considered an important indicator of Member States' commitment to meeting international labour standards, in spirit and in practice.

This section takes a closer look at the profile, employment opportunities, working conditions, wages, employment and social security benefits, and opportunities for social dialogue and collective bargaining – including trade union membership and representation – that childcare workers have at the national level in Asia and the Pacific.

► 7.1. Feminized composition of the childcare workforce

Childcare for children between 0 and 6 years old is a highly feminized sector across Asia and the Pacific. In all seven countries where primary research was conducted for this study, most childcare workers are women, with few men present as workers in care centres, usually in supervisory or managerial roles.

²⁷ Care-related ILO Conventions include the Freedom of Association and Protection of the Right to Organize Convention, 1948 (No. 87), the Migration for Employment Convention (Revised), 1949 (No. 97), the Right to Organize and Collective Bargaining Convention, 1949 (No. 98), the Equal Remuneration Convention, 1951 (No. 100), the Social Security (Minimum Standards) Convention, 1952 (No. 102), the Discrimination (Employment and Occupation) Convention, 1958 (No. 111), the Minimum Age Convention, 1973 (No. 138), the Rural Workers' Organizations Convention, 1975 (No. 141), the Migrant Workers (Supplementary Provisions) Convention, 1975 (No. 143), the Nursing Personnel Convention, 1977 (No. 149), the Labour Relations (Public Service) Convention, 1978 (No. 151), the Collective Bargaining Convention, 1981 (No. 154), the Occupational Safety and Health Convention, 1981 (No. 155), the Workers with Family Responsibilities Convention, 1981 (No. 156), the Part-time Work Convention, 1994 (No. 175), the Home Work Convention, 1996 (No. 177), the Private Employment Agencies Convention, 1997 (No. 181), the Maternity Protection Convention, 2000 (No. 183), the Domestic Workers Convention, 2011 (No. 189) (ILO 2018), and the Violence and Harassment Convention, 2019 (No. 190).

Based on interview responses, the sector's feminization is largely due to dominant social norms around care, and especially childcare. In Indonesia, for instance, norms based on *kodrat* (or a biological state of being) dictate that because women bear children, deliver them and breastfeed them, it is only natural that responsibility for early childhood care also rests with women.

Among countries in **Central and West Asia**, women make up the majority of the childcare sector workforce – 98 per cent in Tajikistan, 96 per cent in the Kyrgyz Republic and 95 per cent in Turkmenistan (UN Women 2019; World Bank 2019a). Pakistan is a notable exception, where men make up a greater proportion of teachers in the education sector, including pre-primary teachers. The reasons for this include women's low literacy rates, patriarchal norms and tribal culture, along with poor water, hygiene and other facilities which limit the participation of girls and women in learning and teaching (Pakistan, Ministry of Education and Professional Training 2015).

The situation in **South Asia, East Asia and Southeast Asia** is similar. Women make up the bulk of the childcare sector workforce in Bangladesh, India, Malaysia, Thailand and Viet Nam in both state-run and private facilities. Women account for close to 99 per cent of childcare workers in Lao People's Democratic Republic, and 95 per cent in Cambodia. Based on interviews for this study, the perceptions of both parents and childcare workers and managers are aligned with dominant social norms around care work as women's work, and also express concerns around men engaging in certain forms of childcare. Respondents in the Philippines, for instance, claim that women are best placed to deliver childcare because they understand how to care for children.

Japan stands apart from many countries in having a slightly higher number of men among the pre-primary care and teaching staff.



It is easier for you to care for children if you are a woman because women understand how it is to care for children. Women are patient with children because they know how difficult it is for a mother to bear children. I treat children in my class like my own.”

– Childcare worker (woman), the Philippines



I have assured parents that when their child who is a girl uses the toilet, I would call an adult female to clean her up. I don't want to have issues with parents because of this. I am concerned that when I clean up girls, they will charge me with sexual harassment.”

– Childcare worker (man) at a child development centre run by a Local Government Unit, the Philippines

Men's participation in the childcare sector as childcare workers gradually began increasing in the 1990s, following the introduction of the Equal Employment Opportunity Act of 1985 and the Basic Law for Gender Equal Society in 1999. As of April 2020, there were 1,665,549 registered childcare workers in Japan, of whom 1,583, 219 are women and 82,330 are men.²⁸

Among countries in **the Pacific**, Australia has a large early childhood care and development workforce of 216,619 workers, close to 150,000 of whom are employed in centre-based day care, a number that has doubled in the past decade. Approximately 96 per cent of the workforce are women, as are 97.7 per cent of in-home care workers (Social Research Centre 2022). Data from other Pacific Island countries is very limited, as noted above. From the limited data available, it may be deduced that the feminization of the childcare sector is also a feature of these countries. As such, the initiative by Palau discussed in box 13 is a unique innovation.



Box 13. Promising practice on care providers from Palau

The Palau National Framework on Early Childhood Council aims to incentivize retired senior citizens to join licensed childcare centres as care providers. This is an interesting means of ensuring a two-fold benefit. First, it means leveraging the experience and knowledge of seniors and passing this on to the younger generation, including to ensure that they can be reared in line with traditional Palauan culture. Second, it encourages senior citizens to remain active in their later years and to engage meaningfully in society with an avenue for income generation while being exempt from the earnings test.

Source: Palau, Office of the President 2018.

▶ 7.2. Inadequate wages, benefits and poor working conditions

In most of Asia and the Pacific – with the exception of Australia, Japan and the Republic of Korea – childcare workers across levels are paid below standards for their level of qualification.

²⁸ Data translated from the website of Japan's Ministry of Health, Labour and Welfare, <https://www.mhlw.go.jp/content/000656131.pdf>.

On occasion, they are paid below national minimum wage guarantees or even below the poverty line, and often below the minimum required for a reasonable standard of living. Low wages associated with childcare are both a result of, and reinforce, the devaluation and undervaluing of care work, which is largely considered ‘women’s work’. This leaves care workers with a low social status, leading to disengagement with work and negatively affecting the quality of care.

As discussed in the previous section, care workers in India are not even paid wages, but an ‘honorarium’ since they are considered volunteers as part of the National Rural Health Mission and the Integrated Childhood Development Services Scheme, and the Government’s National Crèche Scheme. As volunteers they do not benefit from the pay scales or social security benefits available to other cadres of public sector employees. The guidelines of the National Crèche Scheme stipulate that each childcare worker should receive 3,000 Indian rupees per month (equivalent to US\$36.65), while a childcare helper is entitled to receive 1,500 rupees per month (US\$18.33) as an honorarium.

Figure 6 compares wages in the childcare sector to the education sector, highlighting the inadequate remuneration offered to early childhood care and development workers and pre-primary teachers compared to primary teachers in selected countries in Asia and the Pacific (Bangladesh, the Philippines, Thailand and Sri Lanka). There is a wide variability between economies, and early childhood care and development workers are compensated well below professionally qualified teachers since care work is seen as less skilled.

The trend observed in Figure 6 is also evident in **East Asia**, including Japan, China and the Republic of Korea (Hui et al. 2017; World Bank 2016). Childcare workers receive low salaries and experience high turnover rates in all of these economies (World Bank 2016). Japan has a low remuneration level for teaching staff in preschools compared to primary teachers. Pre-primary teachers are paid less than primary teachers, earning 61 per cent of their average wage. Various measures have been taken to retain early childhood care and education staff by offering professional development opportunities. A range of incentives have also been introduced to encourage kindergarten staff to take up professional development as a path towards obtaining higher qualifications, such as the provision for study leave and financial support to partially cover training costs (Taguma et al. 2012).

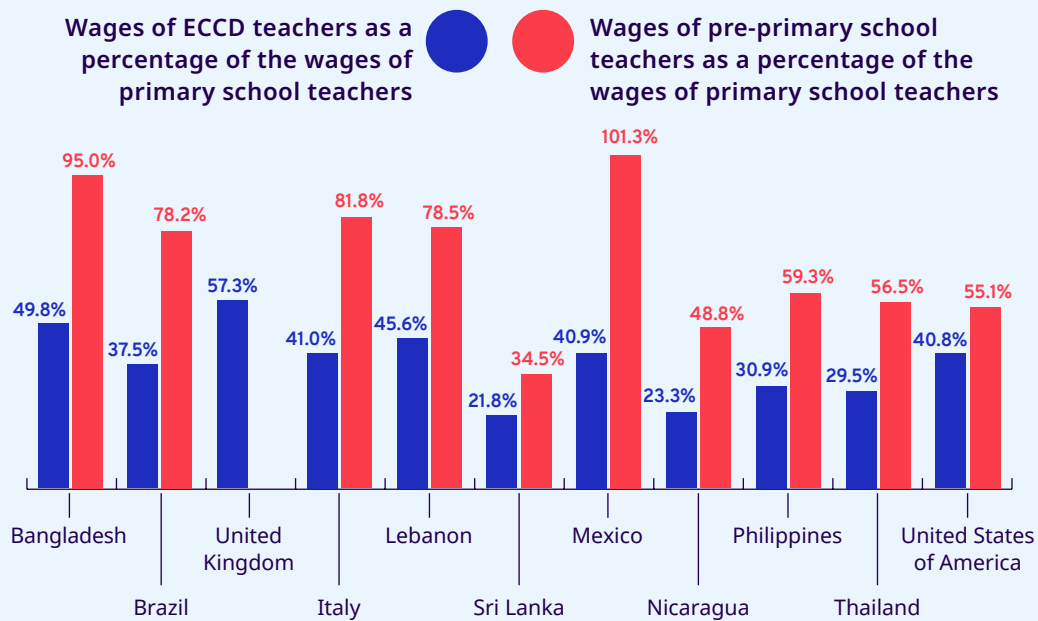


Our remuneration is way less than those of private nannies. They have one child to take care of, we have 40–45 [...] Yes, a high degree of appreciation and love is expressed when I meet my pupils when they grow up, but I currently feel my work is not valued.”

– Caregiver and pedagogue at a public kindergarten in Tbilisi, Georgia

FIGURE 6

Comparing early childhood care and development workers and pre-primary teachers as a percentage of primary teachers wages, latest year



Source: Addati, Cattaneo and Pozzan 2022, 216 (figure 7.2).

Childcare teachers and workers in the Republic of Korea work in diverse environments, usually with poor working conditions and low pay. There is a problem with teacher compensation across the early childhood care and education sector. Public kindergarten teachers are paid considerably more and receive more benefits than other teachers in the sector. Private childcare and family home day care workers are less qualified and paid significantly less than private kindergarten and public childcare teachers (Hui et al. 2017). In addition, childcare workers in rural areas experience high turnover, which the Government aims to address by introducing additional allowances for rural teachers. In Mongolia, primary research conducted for this study finds that kindergarten teachers are required to work an average of 10 hours per day, with 8 hours paid as a base salary and the remaining two hours as overtime. However, there is no overtime pay if teachers work on the weekends or during non-working hours, despite the expectation for teachers to put in extra hours.

In **South Asia**, attracting and retaining quality workers is an issue in Bhutan due to concerns over wages. Although the Royal Civil Service Commission approved an increase in pay from 11,400 Bhutan ngultrum (equivalent to US\$139.30) to 16,000 ngultrum (US\$195.50) in July 2019, wages remain low (Bhutan, Ministry of Education and UNICEF 2020).

Even where frameworks are in place to ensure that salaries in the childcare sector are at least in line with minimum wage guidelines, monitoring and implementation remains a challenge, for instance, in Nepal.

In Sri Lanka, interviews with childcare providers and workers reveal notable differences in the terms and conditions of employment of childcare workers between those employed in state-run childcare centres compared to private centres. Staff employed by the Colombo Municipal Council, for instance, have the most secure conditions of employment with access to government retirement pensions and other subsidies and benefits. Despite lockdowns requiring the closure of facilities, council employees received their regular salaries. The situation of those who are employed by private childcare service providers, by contrast, is less secure. During the pandemic, these workers did not enjoy the benefits available to government employees. Lockdowns resulted in wage cuts, and there were no subsidies to compensate for the loss of income. Salary cuts also had implications for contributions to employees' retirement savings.

Another key finding from the primary research conducted for this study is that concerns exist about **accommodating childcare workers' own household and care responsibilities**. Respondents note that a key motivation for caregivers taking up roles in the childcare sector despite the low wages, precarious conditions and low social value accorded to their work is that it allows them cheap access to childcare themselves. Given the highly feminized nature of the childcare sector (and of home-based caring roles), it is important to address workers' household care responsibilities as part of decent working conditions in the childcare sector.

Even in better paid and monitored contexts like Singapore in **Southeast Asia**, challenges exist in attracting and retaining early childhood teachers. Attrition continues to be high, estimated at 25 per cent per annum. Many parents 'sub-contract' the role of caring and educating their children entirely to childcare workers.



The salary scale for the child caregivers, including facilitators, should be at least be in line with the minimum wage set by the Government. One of the reasons for the inconsistent salary scale is the lack of [a] proper monitoring mechanism that ensures the minimum wage for the workers."

– Woman childcare worker, Nepal



I have kept my daughter who is 4 months old at the centre. This helps me to work and look after my daughter at the same time."

– Childcare worker at an NGO-run centre in Kathmandu, Nepal

However, they do not accord these workers great respect or appreciation. Staff shortages are mentioned by all early childhood care and development operators in one study, given the limited salaries and recognition involved. Hence, motivating talented people to join the profession is challenging (Lipponen et al. 2019).



Box 14. Promising practice on care worker remuneration from New Zealand

Pay parity between kindergarten teachers and primary school teachers in New Zealand has made early childhood education teaching an attractive occupation. A funding system that provides incentives for services to employ more qualified and registered early childhood teachers means that services can afford to pay better salaries. This has significantly increased the number of registered teachers in the early childhood care and development workforce, leading to more qualified teachers in centres who are trained in the *TeWhariki* curriculum and its implementation. The performance appraisal system in New Zealand's early childhood care and education setting focuses on implementing the curriculum, the overall quality of teaching and instruction, teamwork, communication between staff and parents, management and leadership, and overall process quality. All of this contributes to improved working conditions. Following the Early Childhood Education Collective Agreement 2020–21, the minimum salary depends on seniority and staffing responsibility. For an early childhood teacher, it varies between 49,862 and 71,821 New Zealand dollars (equivalent to US\$30,553 and US\$44,008).

Source: Nzei Te Riu Roa 2020.

Beyond low wages and low social status, a major challenge in the childcare sector is the **lack of job security, employment benefits, and social security**. Employment structures in the childcare sector in **Southeast Asia** often involve part-time and even volunteer work for considerable periods of time before workers are able to secure permanent waged positions.

In Lao People's Democratic Republic, three-month apprenticeships are required in the form of unpaid internships. After this, 95 per cent of a worker's salary is paid over one year, before the apprentices are evaluated as full-time employees and receive 100 per cent of their salary. However, apprenticeships are not properly enforced in all cases, especially among contract and volunteer teachers. Many volunteer teachers have internship periods of longer than one year, with few chances of securing permanent employment. Volunteer teachers often resign due to the long periods of waiting before they are made permanent. Some volunteer teachers even have to resort to alternative simultaneous sources of income in order to sustain themselves.



I have taught here for three years and waited for a quota to become [a] government staff [member]. But my chance is very limited because the Government has a very small quota for government positions. So I have to wait for many years to apply [to become] permanent staff.”

– Volunteer teacher, Lao People's Democratic Republic



I am working here because of [my] future hope to become a government staff [member] and receive a better salary. My current salary is very low and cannot pay for living [expenses], so I have to do agricultural work and raise chickens for my family's consumption.”

– Volunteer teacher, Lao People's Democratic Republic

The situation is similar in Timor-Leste, where teachers are poorly trained, classrooms lack quality teaching and learning materials in appropriate languages, and some teachers have a second job to supplement their income. Teachers in Timor-Leste are often not paid salaries on time, which also reduces motivation and contributes to high levels of absenteeism (De Araujo 2018). In Indonesia, most childcare workers are not provided health insurance by their workplaces, despite the fact that their work leaves them vulnerable to infection.



We are not given any health insurance although we are actually at risk of being infected at work. You know, working with young children, they can easily catch cold, and we might get infected.”

– 29-year-old teacher (woman) at a childcare centre, Indonesia

In the Philippines, childcare workers' employment status is inconsistent. Some respondents reported having a regular and permanent post with health insurance,²⁹ a retirement package, paid leave, 13th-month pay, a clothing allowance and other bonuses. Others are in a contractual position where they do not have any benefits, and the 'no work, no pay' policy applies to them. During the COVID-19 pandemic, many were assigned other tasks, such as distributing relief goods and assisting other sectors, such as older persons and single parents.

In **Central and West Asia**, wages remain a concern. The Government of Uzbekistan announced a 30 per cent increase in salaries of preschool teachers in February 2018 (World Bank 2018b, 11). The Kyrgyz Republic's Law on the Status of Teachers states that preschool teachers should be compensated on par with primary school teachers. In practice, their workloads vary and, therefore, compensation is not comparable (World Bank 2013a). According to Tajikistan's Ministry of Finance, remuneration for public sector preschool teachers is calculated using a formula based on their qualifications and years of service. In 2018, primary and preschool teachers received approximately 570–900 Tajikistan somoni per month (equivalent to US\$52.23–82.46), depending on their education level and qualification category (World Bank 2019a).

In Georgia, carers lack a well-defined career and progression structure, and contracting mechanisms are poorly designed and administered. Workloads and shifts are particularly challenging for childcare workers, especially in urban areas with high enrolment numbers. A two-shift system which would mitigate this issue is rarely practiced at centres. Workers also lack either public or private social protection in the form of unemployment benefits or unemployment insurance.

Under the Education Law of the Republic of Azerbaijan, the State guarantees social protection for educators by establishing an official pay scale for academic staff based on functional responsibilities, professional characteristics, qualifications and length of service. Nevertheless, preschool teachers' average annual salaries are significantly less (158–210 Azerbaijan manat, equivalent to US\$93–124) than the salaries of primary school teachers (320–385 manat, roughly US\$189–227), as highlighted in figure 6 (World Bank 2018a). Overall teacher salaries, including for preschool teachers, are below the poverty line, which discourages highly skilled individuals from entering and remaining in the profession. The Government of Azerbaijan is financially unable to raise teachers' salaries, which may account for the low morale observed among preschool teachers in the country.

²⁹ The Philippines has a public health insurance system under PhilHealth and SSS, which aims to provide universal coverage to formal and informal economy workers, as well as private insurance providers.

Finally, **precarious working conditions in terms of safety, job security, decent working time and overtime** exacerbate the difficulties faced by childcare sector workers. In Cambodia, key informants note that meagre salaries, large class sizes, little training – particularly outside the state preschool system – and a general lack of incentives affects the quality of teaching and learning environments (Khieng et al. 2015). In several economies, staff work long hours and often work overtime. In Hong Kong, China, preschool teachers generally have long working hours and heavy workloads, including heavy administrative duties. Day care centres open for full days have longer hours and offer staff fewer holidays than half-day centres. Childcare workers in the Republic of Korea have high turnover rates and low job security, leading to low job satisfaction and pride in their work (Kaga et al. 2012). By one estimate, they work more than 9.5 hours per day, resulting in higher turnover than kindergarten teachers (Li et al. 2017).

In Viet Nam, the rate of trained preschool teachers who meet national standards increased rapidly between 2006–07 and 2012–13, rising from 87 per cent to 96.6 per cent (Viet Nam, Ministry of Education and Training 2015). Some provinces, such as Binh Duong, Dong Nai and Ba Ria-Vung Tau pay teachers an overtime allowance from the local budget. Recruitment and policies on wages, social insurance and health insurance for teaching staff have improved their lives and given teachers a more empowered role, making teachers more motivated and devoted to teaching.

► 7.3. Low organization, representation in social dialogue and voice

Organization and representation is uneven across economies. Socialist states such as Lao People’s Democratic Republic, Viet Nam and India have a culture of union formation and collective bargaining. However, the relative strength and effectiveness of trade unions in representing childcare workers and making gains towards their rights is questionable. Georgia and Nepal are examples of countries where unions were regarded as weak or with cynicism by the research respondents (see sections on 9.2 and 9.7 on the national case studies on these countries). In the Kyrgyz Republic, the Trade Union of Education and Science Workers (TUESW) is well-established and engaged in projects to alleviate financial problems experienced by the teaching workforce (ETUCE 2022). However, **childcare workers and their concerns are often under-represented even by such unions**.

Respondents across the national case study countries acknowledge the importance of collective voice and bargaining power in order to secure workers’ rights and protections.

At the same time, they lament the series of challenges and hurdles in securing meaningful and substantive representation. Childcare workers are often not considered an important constituency for unions, which remain dominated by men. As a result, issues faced by childcare workers and the complications arising from the fact that many are migrant women, are not adequately represented.

In the Philippines, childcare workers who do not have security of tenure are not under an employee-employer relationship and cannot officially join unions. This means that they cannot participate in collective negotiation agreements or collective bargaining agreements with their employers. They also do not have the same benefits as regular employees. This experience is common among childcare workers in the Philippines. Their salaries and labour conditions are tied to the signed contracts with their respective Local Government Unit or government institution.

Strong recognition of the importance of unions and other formal and informal mechanisms of collectivization is notable in the Philippines. In Navotas City, the clamour for just and fair treatment of childcare workers began with a collective mobilization that succeeded in securing the support of former Mayor John Rey Tiangco in 2010. However, this was not an easy process. Childcare workers received unfavourable comments from some members of the local council, betraying a lack of recognition and appreciation for their contributions to the early childhood care and development sector.

In Iloilo City, qualified childcare workers were granted security of tenure through the initiative of the late Mayor Mansing Malbor, who recognized the commitment and sacrifices of childcare workers and the importance of giving them tenure (see section 9.1).



We are members of the employees' union here, but we do not have voting power and we cannot participate in collective negotiation because we are merely contractual employees."

– Childcare worker, the Philippines



The mayor recognized our hard work. He saw how we are relating to parents and children, and barangay officials. He also realized that day care workers earn very little. We used to earn only between US\$10–20 monthly. So he made sure that those who are qualified will become permanent and will have security of tenure."

– Childcare centre manager, the Philippines

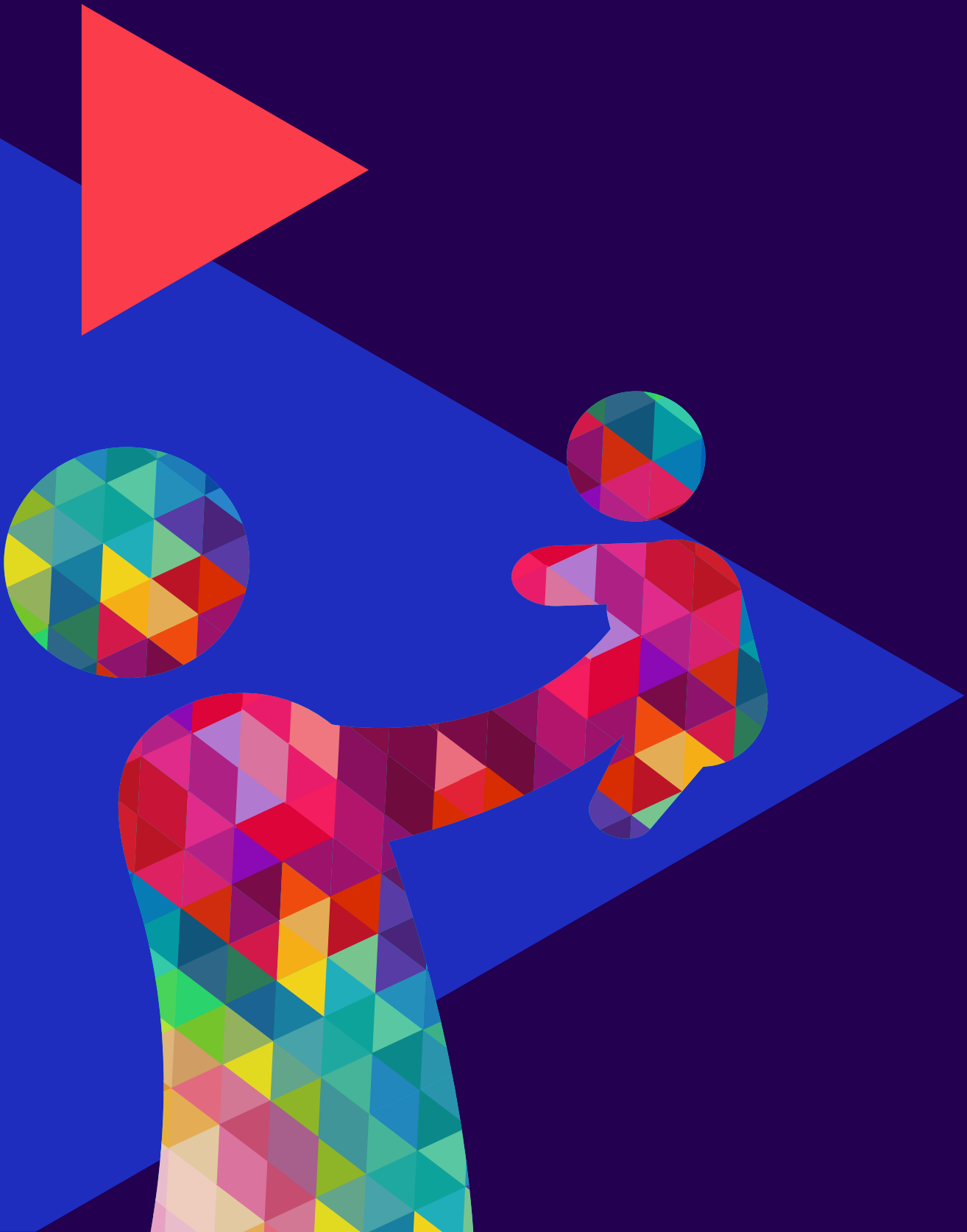
According to the President of the National Federation of Day Care Workers in the Philippines, the federation is still pushing to pass the 'Magna Carta for Day Care Workers' into law. When this occurs, it will serve as a legal framework that mandates the creation of regular government positions for child development workers in the country. This will significantly contribute to ensuring decent work for these workers. Policymakers' political will and priorities will determine the bill's enactment. The current absence of such a legal framework perpetuates the cycle of unjust labour practices and precarity experienced by childcare workers.

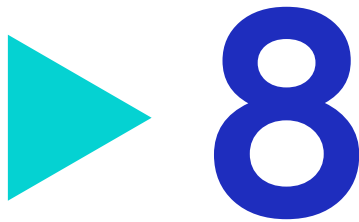
As noted above, levels of union membership are high in Lao People's Democratic Republic, where all teachers, except volunteers, are members of the Lao Federation of Trade Unions. If teachers are sick, require surgery, or pass away, they and their families receive welfare benefits, with sums raised through fundraising by mass organizations such as the Lao Women's Union, the Lao Youth Union and the Lao Trade Union. In Singapore, the Child Welfare Society started two crèches in the 1930s to help low-income mothers and their children. Eventually, the Social Welfare Department came to run crèches in 1949. In the 1970s, the Ministry of Social Affairs roped in the National Trade Union Congress (NTUC) and industrial establishments to run crèches. To better support working parents, the Government of Singapore has since taken a larger role in ensuring childcare accessible, affordable and of good quality, and in 2013, the Early Childhood Development Agency (ECDA) was established to regulate and develop the early childhood sector, which covers both childcare centres and kindergartens (Singapore, National Archives of Singapore 2017).

Among **South Asian** countries, although trade unions exist, their strength and successes in representing childcare workers is unclear. In 1989, the All-India Federation of *Anganwadi* Workers and Helpers was formed by the Centre of Indian Trade Unions. Its efforts to mobilize and unionize care workers have yielded some gains in terms of decent working conditions. However, childcare workers and childcare helpers working in crèches as part of the National Crèche Schemes are generally not covered by the All-India Federation of *Anganwadi* Workers and Helpers. None of the childcare workers interviewed in Sri Lanka are members of trade unions. The 'care worker' designation does not appear to be included in the membership categories of mainstream teachers' unions. There are, however, separate trade unions solely for preschool teachers, such as the *Samastha Lanka Pera Pasel* trade union (All Sri Lanka Preschool Trade Union). If union action is successful, childcare workers stand to benefit from increased salaries whether or not they are members of unions themselves.

Section 8

Recommendations





Recommendations

This study's recommendations offer guidance on multiple avenues by which governments and other stakeholders across Asia and the Pacific can strengthen national childcare systems – in terms of policy and regulatory frameworks, finance, the provision of services, and the status and working conditions of workers. They aim to enable better socio-economic outcomes for women, decent work for childcare workers, and to support a transformative recovery from the COVID-19 pandemic that advances gender equality and sustainable development. They take into account the demographic, socio-cultural and economic diversity of the region, coupled with the different stages of development of the childcare sector across economies.

The recommendations act as a roadmap that can be adapted to national and local contexts, and should not be interpreted as independent or linear. On the contrary, they are interdependent: the linkages between the different recommendations are what makes it possible to create a virtuous circle where quality childcare becomes a lived reality. The recommendations are grouped under the study's framework focusing on accessibility, affordability, quality, and decent work for childcare workers.

► 8.1. Recommendations on accessibility

People have different care needs. Structural inequalities also affect the care needs of different groups, and the prospects that their needs will be met. **Progressivity and universality** should be guiding principles, acknowledging that childcare is a universal human right. Criteria on progressivity should be based on the prioritization of the needs expressed by different people, particularly of vulnerable populations who use services, and of (paid and unpaid) care providers.

There is an acute shortage of accessible, affordable and quality childcare support services across Asia and the Pacific.

Existing services are unevenly distributed geographically, concentrated in urban centres, and do not cover children of all ages – or with different needs – equally and adequately. Knowledge of existing services is lacking in some areas, reducing the likelihood that parents and caregivers will make use of available services.

Steps to support universal access include:



Adopt integrated and comprehensive national childcare service systems, anchored in national legislation and aligned with international labour standards, as well as with other normative global guidelines and frameworks.

While country contexts and responses to childcare are diverse, in order to ensure that the most marginalized children can access childcare services, there should be a comprehensive approach to the provision of national childcare. This includes linkages to existing social protection systems and developing complementarities with the advancement of comprehensive social protection floors.



Diversify childcare modalities to promote inclusive and universal access to childcare.

Childcare services, as a common good for society, should accommodate and respond to the diverse range of needs of children and their families. This requires more flexible and broader perspectives on who can provide quality childcare, shifting away from mothers or informal female caregivers, to an appreciation of childcare as early childhood education.

As this study highlights, there are multiple childcare models and modalities for children between 0 and 6 years old across the region. These include public-subsidized or publicly-funded childcare, community-based organizations and social and solidarity economy-based childcare, family-run day care, and private or employer-based childcare. In some economies, financial support to households provides valuable support in making childcare accessible to all income groups, such as cash transfers and fiscal subsidies. Governments across the region should explore different childcare service models, including the provision of childcare with flexible timings, and adapt them to their socio-economic and cultural contexts. This must move towards the universal provision of childcare, alongside developing and implementing minimum standards for childcare services.

Investments in childcare should integrate a social norms component to support these shifts in diversifying childcare service provision. This should include promoting the involvement of adult household members other than mothers, women and girls, and particularly encourage fathers, men and boys to participate in childcare, in order to contribute to shifting perceptions of care as solely 'women's work'.

Using childcare support services outside the household is not always accepted in societies, including by women, as desirable or adequate. For this reason, social norm campaigns should focus on changing the perceived role of mothers (and other women in the household) as sole primary childcare providers, as well as encouraging greater appreciation of formal childcare services as part of the early childhood educational needs of every child.



Eliminate disparities in accessibility to childcare services.

Promoting universal access to childcare services will require undertaking comprehensive and regular diagnostics to identify barriers to accessing childcare services. This can include assessing (i) discrimination based on various grounds, such as ethnicity, social origin, cultural differences, migration status, gender, geographic location, socio-economic background, and disabilities, among others, (ii) inadequate infrastructure or expertise to accommodate the needs of children with disabilities, and (iii) additional costs of childcare, such the costs of food or transportation in addition to, or even in the absence of, fees. In addition, childcare services for 0–2-year-olds are either non-existent or inadequate across the region, and should be seen as a priority for all countries given the multiple educational and developmental benefits for children, as well as the benefits for overcoming gender inequalities in the labour market. Laws, regulations and other policy or funding mechanisms should be developed or strengthened to ensure that the universality principle is fully integrated and implemented.



Strengthen evidence-based investments in childcare services through mapping and monitoring.

Mapping childcare needs and monitoring the availability of childcare are important to identify gaps in childcare provision and emerging challenges, which may require a differentiated policy response. In addition to regularly assessing demographic, geographic and economic data, consultations with associations of parents and childcare providers are especially important processes for developing and monitoring childcare policies. Policy and legal frameworks for service provision, as well as financial provisions, should be regularly reviewed and updated, as needed.

► 8.2. Recommendations on affordability



Increase public investment to realize affordable childcare.

Quality childcare requires public support to offset the burden of costs on families, particularly low-income families. Public support is equally essential to strengthen the childcare sector's capacity to provide quality childcare and attractive work conditions for skilled care providers. The costs of quality childcare, whether provided by private, public or community-based providers, are currently prohibitive for many households across Asia and the Pacific. The question of affordability is less of a problem where some levels of public investments are made. Different models of financial support are currently in use in the region – such as needs-based or means-tested grants and subsidies, and tax credits – with positive effect. Other forms of financial subsidy should be explored, such as other fiscal incentives.



Undertake regular comprehensive analysis and budget audits of childcare costs for both families and childcare providers.

Such budget reviews should aim to ensure universal access for families, and to ensure affordability without compromising on quality. For example, it is important to ensure that parents are not left in a position where they are unable to afford childcare due to low household income, while being ineligible for other forms of subsidies or support due to their income level. Childcare providers should be included in developing minimum standards for operations and reviewing budgets to ensure that working towards affordability is not done at the expense of the quality of childcare services, including the working conditions of childcare workers. The ILO's Recommendation on Workers with Family Responsibilities, 1981 (No. 165) (section V, paragraph 25) recommends that childcare be provided *“free of charge or at a reasonable charge in accordance with workers' ability to pay.”* Childcare funding models should be regularly revisited to reflect other shifts, such as inflation or income increases/decreases, and the income thresholds for parents eligible for childcare should be adjusted periodically.



Keep low-income parents' out-of-pocket expenses (beyond fees) to an absolute minimum.

Additional costs to childcare, such as households providing children with their own food or supplies like diapers, compound the costs of childcare for families. These out-of-pocket expenses need to be eased, especially for low-income families. To ease these costs, governments and childcare providers should take stock of additional expenses – including clothing, hygiene products, transport, learning materials, and food – and undertake regular assessments of how such costs could be subsidized or reduced.



Build system coherence for childcare sector funding, monitoring, evaluation and support.

Efforts to build system coherence should include promoting a multi-agency integrated approach to childcare. System coherence must span all levels of policymaking and delivery – the national, provincial/regional/state, and local/municipal/district levels – so that there is a single point-of-contact at the local government level for all childcare-related concerns. This would help tackle some of the challenges highlighted in this study (see section 5.2) on childcare users’ and providers’ ability to access funding in a highly fragmented funding landscape.

► 8.3. Recommendations on quality



Establish, implement and measure the quality of childcare services.

Although it is not easy to define universal quality criteria – because these vary depending on the stakeholders (parents, caregivers and governments at different levels) – it is important that all services – formal and informal – meet certain criteria with the greatest possible consensus, and drawing from existing guidance (ILO 2014). Key metrics of quality include the child-to-caregiver ratio, physical infrastructure, safety and health standards, pedagogical infrastructure, age-appropriate and ability-appropriate learning inputs, a skilled childcare workforce with the education, knowledge and skills correspond to the learning needs of all children, and positive and empathetic interactions between caregivers and children, parents and the community. Key metrics should be agreed on and integrated into national, provincial/regional/state and local/municipal/district childcare strategies and policies, as relevant. They should also be publicly reported on and monitored by appropriate public agencies.



Modify the perception that parents have of the quality of the centres, based on an effective implementation of quality standards.

This study sheds light on parents’ negative perceptions or mistrust of childcare services as a key challenge. While inadequate infrastructure is a common concern among the parents interviewed – such as overcrowding, location, and adaptations for children with special needs – they also highlighted the ‘intangible’ aspects of ‘quality’ among care workers. These include qualities like being loving, caring, patient, dedicated, trustworthy and gentle, alongside skills, qualifications and capacity. High staff turnover due to informal or precarious working conditions, limited education or training, and low salaries perpetuates perceptions of the low quality of childcare provision.

In order to combat these perceptions, a series of targeted actions can be taken. These include (i) effectively implementing quality standards, and (ii) ensuring that all parties – parents, childcare providers and workers, and governments – are represented in decision-making processes on childcare to consolidate stable and acceptable consensus to establish minimum standards for what represents and enables quality childcare.



Provide childcare services that integrate the needs of rural, indigenous and tribal communities.

There are perceptions that childcare services are failing to understand the contextual childcare needs of children in rural areas, particularly those who belong to indigenous or tribal groups. For them, a completely different needs-based model should be developed. This model might differ from what is considered quality childcare for an urban community, so as to better respond to the specific needs of these children and their parents. This is essential to increase demand for quality childcare services in areas, and among groups, that are currently underserved.



Periodically monitor quality compliance and improve coordination.

One of the challenges for effective monitoring is the periodic review of standards themselves, given the discrepancy that usually appears between the real requirements for quality childcare and existing schemes. Therefore, it is vital to align childcare policies at all levels – national, provincial/regional/state and local/municipal/district – in order to avoid poor coordination in terms of regulations, budgets and infrastructure.

► 8.4. Recommendations on decent work for childcare workers



Recognize all childcare workers as workers and ensure decent work by improving legal frameworks and their implementation, aligned with guidance under international labour standards.

Recognizing all childcare workers as workers by extending labour and social protection in law and practice will have the multiplier benefit of protecting workers' rights, improving work quality and income for more women workers in particular, contributing to poverty alleviation and gender equality, and ensuring a favourable environment for quality childcare service provision. This recommendation includes bringing all informal childcare workers into the formal system by requiring childcare centres to report all workers with a view to ensuring their coverage by labour laws and social protection.

The wages and working conditions of childcare workers should be determined, free from discrimination and gender bias, including through collective bargaining. This is vital to eliminate all forms of uncompensated and unprotected work, as well as to achieve better working conditions and equal pay for work of equal value for a form of work that has been historically undervalued. Documenting care workers terms of employment through written contracts can promote respect for their rights and responsibilities. To this end, a coordinated approach is required, involving all relevant ministries, including Ministries of Labour, as well as other key stakeholders, including care workers' representative organizations. Where needed, the economic and social contributions of the childcare sector should be measured and communicated to change the mindsets of policymakers and the general public, in order to support the formalization of childcare workers.



Ensure inclusive skills development, accreditation and upskilling of childcare workers and other professionals in the childcare sector.

In order to recognize childcare as a valued profession and ensure quality professional childcare services, governments, through relevant ministries, should work in collaboration with key stakeholders to develop or adapt (where already present but insufficient) standard curricula and accreditation or certification standards, for training and upskilling childcare workers through TVET and other training systems, as well as on-the-job training. Programmes should include a national certification for childcare workers and managers of childcare facilities. This should be accessible to formal and informal (pending their proposed formalization) childcare workers, including migrant workers and those with prior experience, in order to create a highly skilled childcare workforce.



Establish minimum required national standards and operating procedures that ensure decent working conditions and remuneration for workers in the childcare sector through social dialogue, while ensuring that these standards meet the needs of users.

Service provision and working conditions vary across the childcare sector, without clear guidance on ensuring quality standards that uphold decent work. Governments, in collaboration with relevant ministries and key stakeholders, should develop and adopt national standards and operational guidelines for childcare centres. These include guidance on, for example, standard pay scales without gender bias, working hours, overtime, rest time, child-to-teacher ratios, generic human resource policies – including non-discrimination, equal opportunity, pay equity, work-life balance, leave days including paid holidays and sick leave – occupational safety and health, OSH risk assessments that prevent and address violence and harassment at work, and procedures for times of crisis.

These standards should be in accessible language, widely disseminated, and updated periodically through social dialogue. They should fall under legal requirements and be monitored by the relevant inspection authorities.



Extend social protection to cover all childcare workers.

Millions of childcare workers in the region have meagre earnings and little or no access to safety nets. This makes them vulnerable to poverty, especially in times of crisis and downturns. Therefore, ensuring that all childcare workers, regardless of their employment status, have access to universal social protection – including health insurance, maternity protection and pensions – should be a priority. Efforts should also be made to assist childcare workers to access quality childcare services and work-life balance measures to address their own care requirements.



Ensure childcare workers' right to organize, and their voice and representation, including through collective bargaining and multi-stakeholder dialogue platforms in which childcare workers are meaningfully represented.

Social dialogue³⁰ should be encouraged, as well as forging alliances between trade unions and care workers' associations in order to strengthen childcare workers' voice and representation. Collective bargaining can strengthen the sector's ability to establish decent working conditions. Efforts should also be made to create and maintain active and gender-responsive feedback loops, alongside channels for accountability through which childcare users and workers can claim their rights and hold to account local agencies tasked with the implementation of childcare frameworks and policies. This means investing in creating spaces – virtual or physical – for childcare workers and users to directly engage with policymakers and implementation agencies.

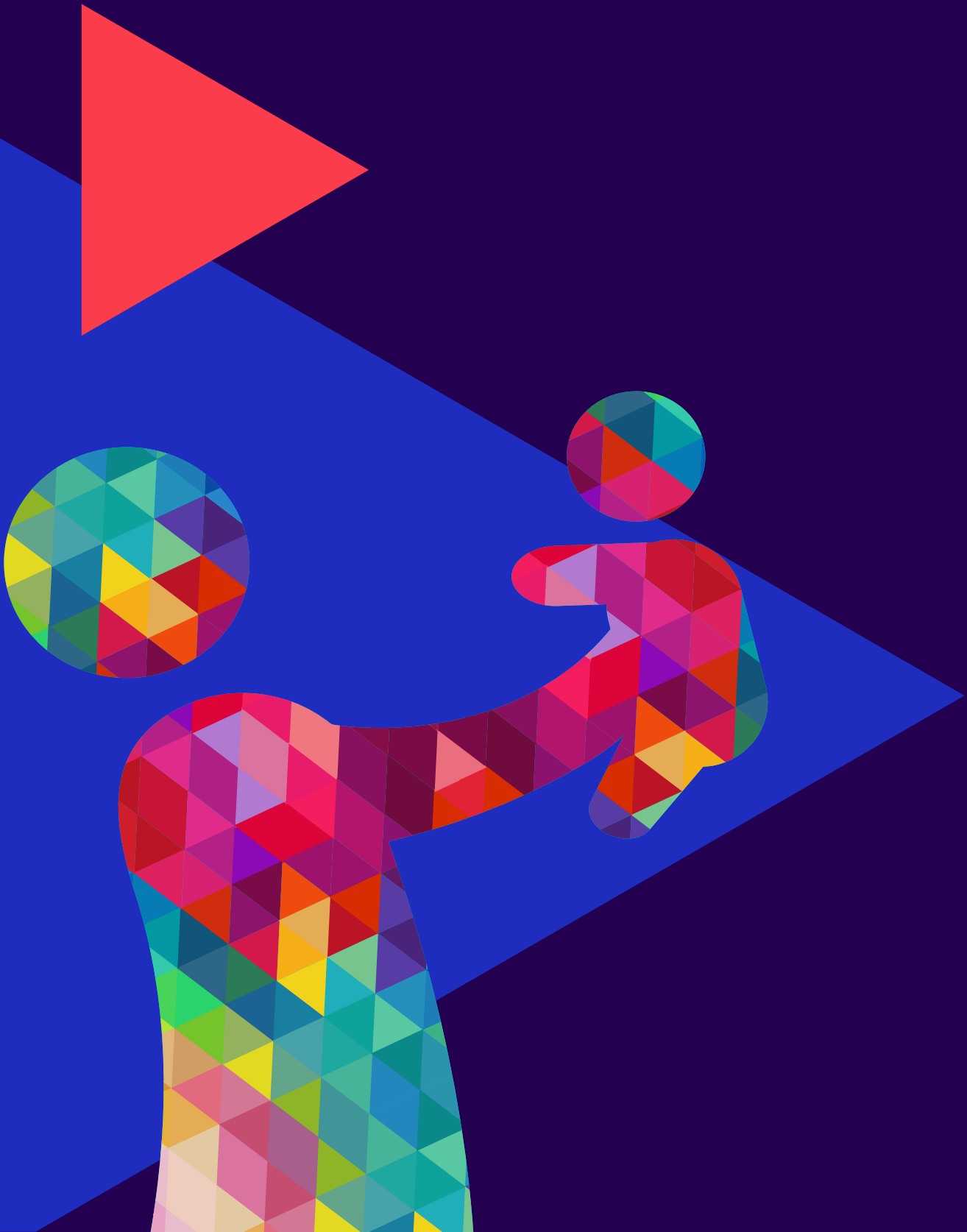
³⁰ The ILO defines social dialogue as including all types of negotiation, consultation or simply the exchange of information between, or among, representatives of governments, employers and workers, on issues of common interest related to economic and social policy.

All people need some form of care during their life cycle. This need presents differently depending on a person's stage in the life cycle, physical abilities, socio-economic and income status, and geographical location, among other factors. For this reason, although policy must be universal in its orientation, it must not fail to acknowledge that there are structural inequalities affecting the care needs of different populations, and the prospects of their needs being met. Progressivity and universality should be the guiding criteria here, acknowledging that while childcare is a universal human right, the criteria of progressivity – based on the prioritization of the needs of different people – can be followed in enforcing universality. In particular, those who are permanently or temporarily dependent children, especially the most vulnerable, and paid and unpaid care workers should be viewed as priority populations when creating mechanisms for progressivity in access to care policies.

The bottom line is a simple one: **nations in Asia and the Pacific should consider childcare as a common good**. In a rapidly ageing population, it is expected that children who receive care at an early age will be more able to care for, and be cared for, in the different stages of their lives, while sharing this responsibility with others. Although these recommendations are mainly intended for policymakers, they are useful and valuable for everyone with a stake in the vital task of caring for children.

Section 9

National case studies



▶ 9

National case studies

▶ 9.1. Georgia

Country overview

Georgia is a lower-middle-income country in the South Caucasus with a population of about 3.7 million (52 per cent women and 48 per cent men), a median age of 37 years old, and 58.31 per cent of the population living in urban areas (Georgia, National Statistics Office 2021a). The country is ethnically and linguistically diverse, and its major minority populations of Azerbaijanis and Armenians represent 6 per cent and 5 per cent of the population, respectively.



Women in Georgia represent the largest share (62 per cent) of the elderly population, while men and boys account for the majority of young persons. Traditional and cultural aspects of gender discrimination remain at the core of son preference, especially among ethnically Azerbaijani and Armenian families. Women's labour market participation is restricted due to limited access to economic opportunities compared to men, despite women having high educational achievements (World Bank 2021). There is a large gender gap of 21 percentage points in labour force participation between men (78.4 per cent) and women (57.3 per cent). Approximately 40 per cent of women workers are employed in agriculture, and one-quarter are employed in health and education services, compared to 4 per cent of men.

In line with global trends, responsibility for unpaid care work in Georgia falls disproportionately on women and girls, especially those from socially disadvantaged groups. A study by UN Women highlights that, on average, women perform more than three times the unpaid care work performed by men, rising to more than five times in poor rural areas (UN Women 2020). With regard to SDG 5 and SDG target 5.4, Georgia has made progress on different dimensions of care policies, including parental leave, care-related cash transfers and the provision of care services, especially those focused on early childhood care and development. However, unpaid care work remains one of the main obstacles to women's economic participation. Therefore, achieving SDG 5 and target 5.4 requires further effort and policy action to recognize, reduce and redistribute unpaid care in the country.

The Georgian childcare system has undergone fundamental changes over the last two decades. Following the structural and liberal reforms that occurred after 2003, alongside intensive privatization, most large cities face a shortage of kindergartens. Before mandatory monthly fees for state-funded services were removed in 2013, these costs limited access, especially for socially vulnerable groups. After their removal, enrolment rates reached almost 70 per cent of children between 2 and 6 years old (154,602 children out of a population of 218,932 attended as of the end of 2021), and there was a 23 per cent increase in the number of operational public kindergartens – rising from 1,259 in 2012 to 1,648 in 2021 (Georgia, National Statistics Office 2021b).

Demand for private childcare has gradually increased. Mainly located in large cities and catering to middle- and high-income families, private childcare services tend to provide better quality services with more flexible care arrangements for working parents. Beyond these, there are unregistered, private child-minders operating in home-based settings responsible for a limited number of children, usually between 6 and 12 children. No data is available on this form of childcare due to insufficiencies in the regulatory framework.

The State guarantees the accessibility and free provision of modern quality preschool education. The Law on Early and Preschool Education, adopted in 2016, triggered a reform of the system and created baseline standards for service provision. Local self-government bodies (municipalities) are responsible for organizing the provision of free preschool education. At the institutional level, most public preschools are not independent. In most municipalities, these are managed by specially created legal entities called nursery and kindergarten units.

The COVID-19 pandemic further amplified the gendered effects of pre-existing structural inequalities in Georgia, exacerbating women's vulnerabilities and putting more stress on them to ensure their households' survival. It affected women and men differently in terms of access to healthcare, social services, employment and economic activity.

As women are more likely to be employed in part-time, lower-paid and informal jobs, they were more likely to face unemployment (CRRC-Georgia 2020). During the pandemic, women, especially those in families with children who were working remotely, were more likely to experience the impact of increased family labour, devoting more time to childcare, cleaning and cooking than usual. Studies show that women spent three times more time on household chores than men during the isolation period (UNDP, UNFPA and UN Women 2021).

In the context of the pandemic, men spent more time managing household-related issues, including shopping, recreation, taking care of pets and playing with children, while women spent time preparing, tidying, managing household chores, caring for children and assisting children with their studies. Due to the increased demand for care work, existing gender inequalities in the division of household chores led to increased time poverty among women.

Keys strengths, gaps and challenges for the childcare sector

Accessibility

The accessibility of preschool education and care is heavily influenced by territorial (urban-rural), socio-economic, child health (in the case of physical impairments and special needs), and ethnic background factors. Although enrolment in preschool education has significantly increased over the last decade, this rate is lower in rural areas, among children from disadvantaged backgrounds, children in Azerbaijani and Armenian speaking families, and for children with special needs.

The unavailability of childcare infrastructure or long distances to public kindergartens, especially in rural and mountainous areas, obliges parents to organize transportation themselves, which is costly and often prohibitively expensive for those living in poverty. In urban areas, especially in big cities, waiting lists for public kindergartens still exist, which mean that some families cannot be accommodated. Due to high demand and a lack of infrastructure, such as afternoon nap rooms, services often give priority to older and school preparatory groups of children between 4 and 6 years old.

Bilingual preschool education classes in areas with ethnic minorities are not sufficiently developed and these programmes often struggle to meet demand. Children with disabilities continue to suffer from stigma and inadequate access to buildings, as most kindergartens do not meet universal accessibility standards. Both public and private kindergartens lack specialized staff capable of caring for children with special needs, especially in rural areas. COVID-19 has considerably impaired accessibility, and the slight decrease in the number of children enrolled in public kindergartens reflects general preference among Georgian families to raise their children at home due to the pandemic.

Affordability

Public nurseries and kindergartens are fully subsidized by local municipalities, which cover staff salaries and utilities. Private centres charge between 300 and 1,000 Georgian lari per month per child, equivalent to US\$100–US\$350. Across both public and private facilities, parents have to bear the costs of educational resources, such as stationery. In nurseries, parents are also responsible for providing basic hygiene products, such as diapers and wipes. This increases the labour and time costs to parents of accessing public nurseries and kindergartens.

Quality

Regional disparities are growing in Georgia, as are urban and rural differences, and inequalities of opportunity between children from families with diverse levels of income. These factors have a significant effect on quality. Overcrowded groups in kindergartens, as a result of the shortage of places, means that the number of children per classroom regularly exceeds the national standard of 25 children per group between 2 and 3 years old, and 30 children per group between 3 and 6 years old, especially in the capital city, Tbilisi. This complicates the delivery of individualized education for children and pushes the focus of childcare pedagogues towards routine interactions, such as group hygiene and meals, rather than developmental education.

Caregivers lack relevant competencies and mechanisms to improve the quality of the care they provide. Professional training is not sufficiently provided or subsidized by local municipalities, and no preparation in this regard is provided by higher education institutions. Initial training courses for caregivers last 66 hours, which is insufficient, particularly because training focuses on theoretical knowledge without practice-based learning. Respondents interviewed for this study report that municipalities lack resources for retraining and qualification enhancement, and it is not possible for public or private caregivers to attend such courses independently because their salaries are very low.

Private kindergartens have a maximum of 15 children per group to facilitate quality learning and caregiving. However, the quality and nature of professional practice at such institutions does not differ significantly from public kindergartens. In terms of infrastructure, most public kindergartens lack appropriate wash basins and towel hooks, as well as hygienically designed furniture and toys. The arrangement of toilets is often not aligned to children's needs, especially of children with disabilities, and ensuring hot water supplies is problematic. Some kindergartens do not have gardens or safe surroundings, and play areas are not organized according to children's needs and safety. Georgia also lacks sufficient specialists to enable the integration of services for children with special needs and disabilities.

Decent work for childcare workers

The social status of caregivers working is extremely low in both public and private establishments. The average monthly salary of a full-time caregiver is three times lower than the overall average monthly salary. This leads to disengagement from work and affects the overall quality of service provision.

There are no universal qualification requirements for caregiver pedagogues, and other carers lack well-defined career structures. Contracting mechanisms are also poorly developed and administered. Workloads and shifts are challenging for caregivers, especially in urban areas where high numbers of children are enrolled. As public kindergartens are required to meet the requirements of the Labour Code, most institutions struggle to meet the needs of working parents given that standard are between 9 a.m. and 6 p.m., and dropping off and collecting children has to be aligned to these timings. A two-shift system is rarely practised in public kindergartens due to the lack of financing required to employ additional caregivers. No proper social protection system is available for early childhood care and education staff in either public or private settings, for instance, a system covering unemployment benefits or unemployment insurance. Professional unions are either non-existent or weak, and are unable to effectively advocate for the rights of caregivers or address their needs.

► 9.2. Indonesia

Country overview

Indonesia is the fourth most populous country in the world, with a total population of over 270 million, and a population density of 141 people per square kilometre (Indonesia, Badan Pusat Statistik 2020). There are 4–5 million births every year, with an additional 400–500,000 incremental births each year (Selwyn 2020).



Women's labour force participation remains a serious concern and is severely hampered by childcare responsibilities.

This trend is consistent with the literature, which notes that caring for family members often forces women to opt for flexible working arrangement and lower salaries compared to men (Sohn 2015). The gender division of labour in Indonesia is significantly informed by the concept of *kodrat*, which dictates that it is women's biological duty, destiny or role to be primarily – and often exclusively – responsible for caregiving. Therefore, efforts to enhance women's labour force participation must expressly aim to alleviate women's disproportionate care burden. The current childcare landscape in the country is, however, ill-equipped to facilitate this.

The key ministries engaged in funding and regulating Indonesia's childcare sector are the Ministry of Education, Culture, Research and Technology, and the Ministry of Social Affairs. These provide technical guidance for the operation of childcare centres based on their own functions and mandates, which are early childhood education, and child welfare protection, respectively.

The Ministry of Women Empowerment and Child Protection is mandated by the President to set care and nurturing standards for various institutions that provide childcare services. Together, these ministries are responsible for setting up the regulatory framework at the national level. The operational implementation of day care is under the remit of local (provincial and district) governments. The Ministry of Education, Culture, Research and Technology categorizes childcare centres as part of non-formal early childhood education that serves children between 0 and 3 years old, focusing on the principles of *Asah, Asih, Asuh* (educate, nurture, care). The Ministry of Social Affairs prioritizes the need to care, nurture and protect children aged 0–8, especially those who experience difficulties with family care. It situates childcare services as a form of 'substitute service' for parental care, especially when parents are absent for work or other reasons. Most childcare services cater to children from poor families.

Childcare centres registered under the Ministry of Education, known as *Taman Penitipan Anak* (TPA), and centres that are part of the Ministry of Social Affairs' community childcare services, known as *Taman Anak Sejahtera* (TAS), did not open during the COVID-19 pandemic. The pandemic impacted these centres severely, as they lost income from registered children and were forced to lay off some of their workers. Some TAS centres also operate other services in addition to social services for children under the Ministry of Social Affairs' guidance, often in order to access more funds from the ministry. Any private individual or institution can establish a TPA by following the Minimum Standard for the Establishment of TPA set by the Ministry of Education. Once they have met this standard, verified by their local education office, the institution can register itself as a legal entity and operate under the Ministry of Education. TAS centres are considered a social service, often regarded as a 'surrogate family' for children under 5 years old from poor, disadvantaged or undocumented families.

Key strengths, gaps and challenges for the childcare sector

Accessibility

Childcare in Jakarta fares quite well in terms of accessibility, especially with regard to centres' hours of operation and locations. Most childcare services open before and after office hours (7 a.m. to 5 p.m.), with some flexibility in terms of extra hours for an additional fee. Middle- and high-income families are the predominant users of private childcare centres or TPA, while lower-income families access community childcare centres under the TAS. Users of private childcare centres and TPA are usually employees of private companies, government officers, business practitioners and entrepreneurs, while users of community childcare services, including TAS, tend to be from poorer economic backgrounds and informal workers.

Both TPA and TAS facilities are often located within housing complexes relatively close to users' homes. Parents consulted for this study have a generally favourable opinion of the location of childcare centres, despite their varied demographic and socio-economic backgrounds and use of both TPA and TAS facilities. These are usually situated 5–10 kilometres from users' homes. Both TPA and TAS facilities welcome all children from different backgrounds, in terms of race, religion, age group and gender. Some TPA centres provide basic religious (Islamic) teaching, such as prayer rituals, but they also welcome non-Muslim children. However, both TPA and TAS centres are not well-equipped to meet the needs of children with disabilities. No children with disabilities attend the centres visited as part of this study.

Affordability

All childcare centres have access to funding support from the respective ministries under which they are registered. Assistance for TPA facilities amounts to 600,000 Indonesia rupiah per child per year (equivalent to US\$40.81) in the form of operational assistance for learning (*Bantuan Operasional PAUD*). For TAS facilities, assistance may reach 1,200,000 rupiah per child per year (US\$81.62), including budgets for supplying nutritious food. However, financial assistance to TAS facilities is often irregular, and centres may not receive funds every year due to the Ministry of Social Affairs' limited budget. As such, the ministry often funds TAS centres on a rotational basis.

TAS and TPA facilities also secure resources through fees. Private childcare centres under the TPA arrangement are popular with wealthier families, while more reasonably priced TPA facilities cater to middle-income earners. However, most TPA centres charge more than the minimum wage for the province of Jakarta, making them unaffordable for poorer families.

TPA subsidies of 60,000 rupiah per year per student (US\$4.08) are a small fraction of the fees charged. For instance, fees at the Sasana childcare centre examined as part of this study are 3,500,000 rupiah per month (US\$238). In addition to payments from parents and funding support from the Government, childcare centres depend on funding from their owners – foundations, companies or private individuals – and donors.

Quality

Both TPA and TAS centres must meet standard requirements to access government assistance. These include indicators on the number of students enrolled, infrastructure and facilities, and teachers' educational background and accreditation. At the national level, the Ministry of Education has designed a learning curriculum for all educational levels, including early childhood education. All institutions registered under this ministry must follow Regulation No. 146 of 2014 concerning *Kurikulum 2013* (the 2013 academic year) as the *Standar Nasional Pendidikan Anak Usia Dini* (National Standard for Early Childhood Education or PAUD). Overall, TPA facilities have smaller carer-to-child ratios, more spacious physical facilities, and more qualified teachers and carers compared to TAS facilities. For instance, the carer-to-child ratio at the TPA facilities examined for this study is a very favourable 1:2 for children under 2 years old, and 1:5 for children over 3 years old.

TAS teachers and carers have different qualifications and role titles than TPA teachers and carers. TAS carers have often only completed high school, while TPA teachers, carers and teaching assistants have higher educational qualifications, usually a bachelor's degree. While TAS centres focus on providing safe and secure facilities to children from poor background, TPA centres focus on favourable learning and development outcomes. As such, the quality of care is better at TPA centres than at TAS facilities.

Decent work for childcare workers

The teachers and caregivers interviewed as part of the study report inadequate wages, no pension schemes and no health insurance despite working in conditions that routinely expose them to infection. One TAS teacher reported earning just 400,000 rupiah per month (equivalent to US\$27.20), which barely covers her electricity bills. Some workers at privately-owned childcare centres earn twice the wages of those employed by government-funded TPA centres, whose salary is set at the provincial minimum wage, although they remain ineligible for state pension and insurance schemes. Some TPA workers can supplement their income by working overtime, but this is not an option for TAS workers. Childcare workers also report unclear terms of employment, including a lack of transparency around annual leave entitlements.

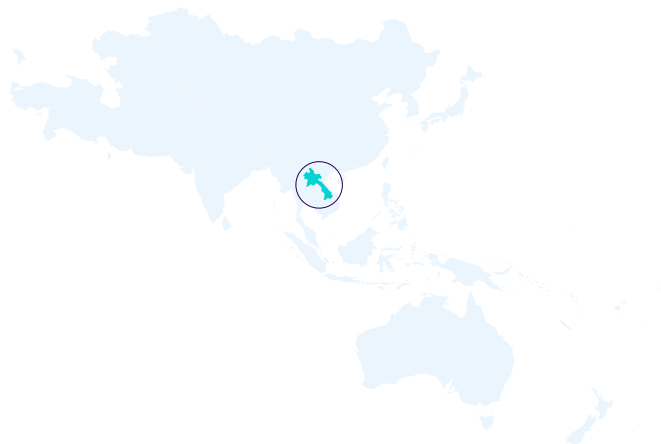
During the COVID-19 pandemic, most childcare workers experienced a severe loss of salary and livelihood options during the substantial period that childcare centres remained closed. In some cases, childcare workers were compensated with food allowances rather than salaries. They also report limited opportunities for upskilling and career advancement. Many remain in the childcare sector due to a lack of alternatives, despite the low pay and poor conditions.

There are few avenues for the collectivization and mobilization of childcare workers. HIMPAUDI, the association of National Standard for Early Childhood Education (PAUD) teachers in Indonesia, offers some opportunities for training and some support for safeguarding teachers' rights. However, it does not expressly cater to childcare workers. According to this study's respondents, HIMPAUDI has neglected childcare workers in its outreach. There is little to no awareness about HIMPAUDI among childcare workers. Those who are aware of the association are often unable to afford the membership fees required to access training and other forms of support.

► 9.3. Lao People's Democratic Republic

Country overview

Despite a recent history of strong economic growth, driven primarily by the natural resource and energy sectors, Lao People's Democratic Republic experienced a slower growth rate of 2.3 per cent in 2021 due to the impact of the COVID-19 pandemic. This has led to depressed government spending on the childcare sector.



The country has an ethnically diverse, largely rural population of about 7.4 million in 2021, 50.1 per cent of whom are women and girls (World Population Review 2022). The country is among the youngest in Asia, with a median age of 23. Most young people, roughly 70 per cent, reside in rural areas. Of the female population, 42.9 per cent are young women and girls (Lao People's Democratic Republic, Lao Statistics Bureau and UNICEF).

The right to gender equality and non-discrimination are set out in the Constitution and national legal and policy frameworks. The country has also ratified relevant international frameworks, including the SDGs, the Convention on the Elimination of Discrimination Against Women in 1981, the Beijing Platform for Action in 1995 and the Convention on the Rights of the Child in 1991. The Government continues to harmonize national laws, policies and programmes to align them with its international commitments. However, implementation lags behind and required periodic reporting is overdue.

Two key national policies on childcare are the National Strategy and Action Plan on Reproductive, Maternal, Newborn, Child and Adolescent Health 2016–2025, which seeks to improve mothers' and children's health, and the National Strategy and Action Plan on Early Childhood Education 2021–2025, which aims to increase the enrolment rate of 3–5-year-olds. There are no targets and unclear policies on early childhood education for 0–2-year-olds. The Ministry of Education and Sports, the World Bank and UNICEF are key players engaged in developing national policies and promoting early childhood education. The Department of Early Childhood Education, under the Ministry of Education and Sports, is mandated to guide, encourage and promote early childhood education. The Lao Women's Union (LWU) is a mass organization mandated to represent, promote and empower women and children. It has an extensive network across the country, with membership spanning the central, provincial, district and village levels. At present, however, the Lao Women's Union is not involved in policy around childcare.

Key strengths, gaps and challenges for the childcare sector

Accessibility

About 5.2 per cent of children between 0 and 2 years old, and 50.7 per cent of 3–4-year-olds are enrolled in kindergartens. This leaves a large share of childcare to individual households, and usually to mothers. Although the participation of children from the poorest 20 per cent of households has increased, most enrolments in kindergarten and pre-primary classes are concentrated in urban areas and select rural areas with good road access and transport links.

There remains a significant unmet demand for childcare provision, particularly for socio-economically disadvantaged groups. There are also significant geographical disparities. For example, 91 per cent of primary entrants in Vientiane capital have experience of early childhood education, compared to 57 per cent in the province of Saravan.

Transport remains a serious impediment to enrolment, especially in rural areas since most kindergartens are located in urban areas close to district towns. In some rural areas, there are no kindergartens, pre-primary classes or other childcare services at all.

Pre-primary classes are usually annexed to a primary school. Of the nine childcare centres examined for this study, the average distance travelled to access a centre was 3,480 metres, the shortest distance was 652 metres and the longest was 12,666 metres. Several parents interviewed highlight transport as a key challenge to accessing. Centre timings are flexible, and paid overtime provisions are in place which allow parents to pick up their children after working hours for a fee. However, some parents find these extra fees excessive.

Affordability

None of the surveyed childcare centres in Lao People's Democratic Republic receive sufficient funding to provide free services, and all charge fees. Most receive a small amount of US\$300–500 per year from the state budget to cover basic necessities, such as electricity and water supply costs. The average school fee is US\$20, accounting for 5 per cent of an average family's income. There is a very limited subsidy allowance available – of around US\$3.4 – as a children's support fee, attached to the father's salary if he is a government employee.

Quality

According to the Ministry of Education and Sports' national guidelines, the childcare worker-to-child ratio should be 1:8 for children aged 0–2. However, 66 per cent of the centres examined for this study do not meet this standard, which affects the quality of care they provide. In terms of physical infrastructure, overcrowding is a significant issue. As noted above, most childcare facilities are attached to a primary or secondary school's premises, and are insufficiently equipped to meet the needs of young children. Some schools do not have handwashing facilities, or clean and convenient toilets. Overall, most of the schools examined have insufficient and poor quality infrastructure with inadequate WASH facilities, particularly in rural areas. Some centres also lack toys for children, as well as specialized equipment and teaching-learning materials. Teachers across facilities also lack adequate training on the new pre-primary curriculum.

Decent work for childcare workers

The childcare sector in Lao People's Democratic Republic is highly feminized. Available data shows that 9,814 teachers are women (99 per cent), while 81 are men (1 per cent) (Lao People's Democratic Republic, Ministry of Education and Sports 2020). According to the same source, 19 per cent of teachers are contracted or volunteer teachers who do not have access to social security schemes. Childcare workers consulted for this study report inadequate opportunities for career progression and a lack of easy access to permanent jobs due to limited quotas for permanent government staff members.

Monthly salaries range from 1,500,000 Lao kip (US\$133) for workers with a few years of experience to 3,000,000 kip (US\$266) for those with more than 15 years of working experience. Teachers' average salary is 2,000,000 kip (US\$178) for permanent staff. For contract or volunteer teachers, salaries range from 400,000–1,100,000 kip (US\$35–97). The average salary of volunteer teachers is 600,000 kip (US\$53). The childcare workers interviewed for this study, especially those who work as volunteers or contract workers, struggle to live on their incomes. They often have to take on additional work, such as agricultural work, to supplement their household income.

Volunteer teachers and contract staff are also ineligible for employer-based social security schemes, although some have access to limited protections extended by individual schools. All teachers, except volunteers, are members of the Lao Federation of Trade Unions. All members are eligible for welfare benefits financed through fundraising by three mass organizations – the Lao Women' Union, the Lao Youth Union and the Lao Federation of Trade Unions.

► 9.4. Mongolia

Country overview

Mongolia has a population of 3.3 million and a population density of 1.9 per square kilometre. The population is unevenly distributed across the country's vast territory, with 46 per cent living in the capital city of Ulaanbaatar (Mongolia, National Statistical Office 2021). This creates a duality in Mongolia's national character, as both a nomadic pastoral society, on the one hand, and a highly urbanized society, on the other.



After the Law on Promoting Gender Equality was adopted in 2011, the Government has pursued a series of tangible measures to implement the law in a systematic manner. However, gender differences persist in labour market participation and decision-making power. Women's labour force participation rate (53.3 per cent) is lower than the rate for men (66.7 per cent).

The number of economically inactive women, and those unable to work due to the lack of the access to childcare services and their burden of childcare duties, is increasing year on year (Mongolia, National Statistical Office 2021). The Government's Country Gender Assessment concludes that, despite policies, laws and programmes in place to promote employment, no major progress has been made in addressing the issues of decent employment for women of reproductive age (Mongolia, National Committee 2019). At the same time, employers are often reluctant to employ women, discriminating against them on the grounds of pregnancy, or having young children, or being in their 30s. Employers have insufficient resources to maintain jobs and pay social insurance, especially during maternity and childcare leave until a child is 2 years old. This has a negative impact on women's employment and long-term workplace retention.

Women in Mongolia spend twice as much time as men on unpaid care (Charmes 2019). The fact that women are largely responsible for unpaid childcare and household chores is a key factor of women's involvement in the informal economy. Due to inadequate access to affordable, quality childcare services outside of the household, young women are often forced to leave work to care for their children at least until they start school. They may remain out of work for long periods of time unless they receive support from their parents or family members. Since 2018, state benefits have been provided to pregnant women, mothers and fathers caring for children under 3 years old, mothers with twins under 4 years old, new fathers, single mothers, and fathers with three or more children.

The key institutions that implement childcare policies in different sectors are the Ministry of Labour and Social Protection, and the Ministry of Education and Science, which is directly responsible for kindergartens and preschool alternatives.

A total of 18,800 state and private kindergartens provide comprehensive care, protection and development services for children aged 2–5, as well as special, sanatoriums, nursing and welfare kindergartens for children with disabilities and orphans that operate in accordance with the law. Private kindergartens account for one-third of all kindergartens, but private institutions do not cater to children with special needs.

To enhance access to kindergarten services, since 2019 the Government of Mongolia has mandated relevant ministries – the Ministry of Finance, the Ministry of Construction and Urban Development, and the Ministry of Education and Science – to undertake measures including additional enrolment through non-state-run kindergartens, and supporting the central and local governments with the establishment of kindergartens by public and private organizations. They are also mandated to advance central and local governments' enforcement of construction norms and standards for kindergarten facilities when issuing construction permits for new residential development projects, and reflecting the rental costs of kindergarten facilities owned by citizens and legal entities in the state budget, based on baseline studies.

The Government Action Plan 2020–2024 includes a number of targets under objective 2.3 (“*The Government will strengthen the system for creation of equitable, inclusive and quality education for all*”). One of these targets is to restore the national system of nursing for 1–2-year-olds, and enable 2–3-year-olds’ enrolment in childcare services, in order to promote women’s employment and social engagement. Other targets include building facilities to create a student-friendly learning environment, as well as increasing access to education opportunities for children with special needs in ordinary schools and kindergartens by commissioning 273 kindergartens and 200 new schools (Mongolia, Ministry of Education and Science 2020).

Childcare centres and non-educational day care services began operating in 2016, but ceased services due to a lack of state funding and the impact of the COVID-19 pandemic. While these centres were operational, children who are 2 years old and older, and children with disabilities regardless of age, who were unable to attend kindergartens had access to care services in a healthy and safe environment, and more than 1,100 new jobs were created. This enabled some employment opportunities for parents and guardians who were unable to work due to the unavailability of caregivers at home. More than 400 childcare centres managed and funded privately (with some variable costs funded by the State) merged to form a unified association to address challenges in the sector.

During the COVID-19 pandemic, funding for public kindergartens was fully maintained. Kindergartens and childcare centres were, however, unprepared for the pandemic and post-pandemic responses, and decisions by authorities were unpredictable. This limited access to childcare services, especially for children between 0 and 3 years old. In the 2021–2022 academic year, a decision was made to only enrol 4–5-year-olds in kindergartens. However, due to the prevalence of COVID-19 infections, only 40–50 per cent of registered children were enrolled.

Key strengths, gaps and challenges for the childcare sector

Accessibility

While conventional ‘fixed’ kindergarten services have grown dramatically over the past two decades, there is still a shortage of kindergartens in the most densely populated cities and towns, especially Ulaanbaatar. Access to childcare services is lower for children in households with limited social networks, where parents have no profession, lower education, low living standards, as well as children with disabilities, children in herder family, and those from *ger* districts³¹ and remote areas.

³¹ *Ger* districts are forms of residential settlements, often marked by a lack of connectivity to water and electricity supplies and sewage systems.

The most common factors that limit access include public transportation which is often inconvenient, waiting for transportation, traffic congestion, and cold mornings and evenings. Thus, it is the location of the kindergarten or childcare centre that is the most significant inhibiting factor for households who live or work far from these centres.

Affordability

Kindergarten and childcare service budget allocations are based on the number of children aged 2–5 enrolled. The State finances variable costs and meals using special purpose transfers. Meals for urban and rural kindergartens are set in the same way, and meals for children in private kindergartens are also funded by the State. The budget for children's lunches is very small, and it is not calculated according to children's age, making it impossible to adequately provide the daily food intake required for all children.

Parents whose children are enrolled in public kindergartens spend an average of 450,000–800,000 Mongolia tugrik (US\$158–281) per year on sanitation and learning materials, while those whose children are in private kindergartens spend 250,000–350,000 tugrik (US\$87.7–123) per month. During the normal operation of childcare centres, parents pay 90,000–150,000 tugrik (US\$32–53) for services. Informal home-based caregivers charge 1,200,000 tugrik (US\$421) or more per month, making it difficult for low-income or unemployed parents to access personal childcare services.

Quality

Class sizes often exceed 40–45 children per class with one teacher (standard of 25 children according to the standard on Early Childhood Education). This instantly doubles the workload but not the wages of teachers, assistant teachers, cooks, cleaners and doctors, and leads to inevitable compromises on quality of care.

Many private kindergartens and childcare centres use rented premises due to the unavailability of owned buildings and facilities, which poses a major challenge. Depending on class sizes, the quality and standards of rental facilities and premises for private kindergartens vary considerably. Large private kindergartens and their branches have far better quality and more convenient facilities and environments than public kindergartens. However, many private kindergartens operating on the first floor of residential apartment blocks do not meet environmental standards. For example, many have no playground and may only have a small bathroom. According to regulatory standards, the area per child should be 2.5 square metres, the carer-to-child ratio should be 1:5, and the dining area should be separate from the children's play area. In reality, there are cases of childcare centres accommodating 40 children in two rooms, while some centres operate in one room with 10 children.

The carer-to-child ratio is usually 1:7 or 1:8, and age groups are often mixed which makes it difficult to meet different children's physical and development needs.

Decent work for childcare workers

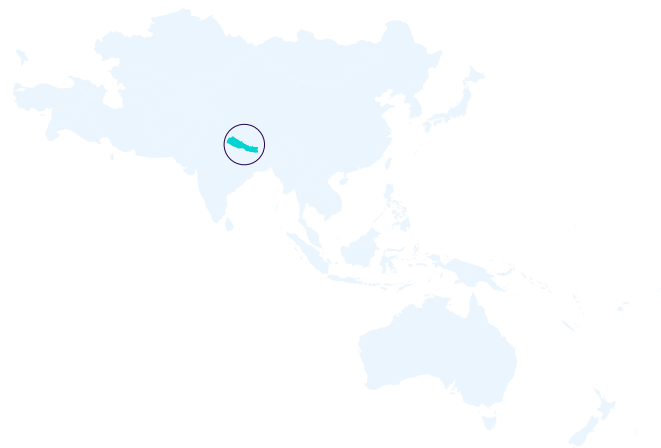
In terms of qualifications, early childhood education teachers and support staff are required to have at least a bachelor's degree, whereas assistant teachers or carers are required to be certified with at least three credit hours of training.

Kindergarten teachers in Mongolia are required to work an average of 10 hours a day, with 8 hours paid as a base salary and the remaining two hours as overtime. However, no overtime pay is allowed for weekends or non-working hours. In most kindergartens, overtime is only paid to teachers, although teachers and assistant teachers work the same basic and overtime hours. Salaries per month are, on average, US\$314 for a teacher, US\$263 for an assistant teacher or carer, and overtime pay of US\$70–105. By contrast, salaries in large private kindergartens are closer to the national average (US\$421–536). There is limited social and employment protection for childcare workers, although they are covered under standard labour provisions, such as on maternity leave.

► 9.5. Nepal

Country overview

Development in Nepal is driven by two main targets: (i) graduating from the status of a 'least developed' country by 2022, and (ii) attaining the status of an 'upper-middle-income' country by 2030. To this end, achieving the SDGs is key (ADB 2021). However, achieving the goals will be challenging due to poverty rates, emerging infectious diseases and pandemics like COVID-19, and social and gender discrimination, among other factors (Nepal, National Planning Commission 2020). Although women's roles and status in Nepali society have undergone a transformation to some extent over the last two decades, social norms continue to dictate that women are primarily responsible for care, especially childcare.



This severely limits women's labour force participation in the country.

Nepal transitioned to federalism with the promulgation of a new Constitution in 2015. It was declared a federal democratic republic with three tiers of governments – federal, provincial and local – with implications across sectors in terms of financing and management, including for childcare. The level of local government is allocated between 63–65 per cent of the total education budget, while one-third is allocated to the federal level and 3 per cent to the provincial level (UNICEF 2020a).

Despite budget allocations at all three tiers of the government, attitudes towards childcare in Nepal are still limited to the clinical and education-related dimensions of care. The country's comprehensive Early Childhood Development Strategy focuses on the educational success and holistic development of children between 0 and 8 years old (Nepal, National Planning Commission 2020). However, the strategy has yet to be implemented. There are three main types of early childhood development centres offering pre-primary classes: (i) state-funded early childhood development centres, (ii) NGO or community-based centres, and (iii) private kindergartens. State-funded centres are supported financially by all three government levels – federal, provincial and local. NGO centres are operated by international or local NGOs and community-based organizations registered with a District Administration Office and affiliated with the Social Welfare Council. Private kindergartens are fully run with funding from private investors and tuition fees from parents and guardians.

All three types of centres considered for this study were severely affected by the COVID-19 pandemic. The pandemic affected students' learning and well-being, as well as the well-being of childcare workers. Many workers, including early childhood development facilitators, were dismissed during the pandemic. The pandemic's impact on centre-based care workers was two-fold – in addition to losing work, they were disadvantaged as most do not have access to benefit, social protection and compensation.

Key strengths, gaps and challenges for the childcare sector

Accessibility

Families from different backgrounds use different types of childcare services. NGO and state-funded centres are usually used by low-income groups, often engaged as daily wage labourers. Families whose children attend private kindergartens usually live in urban centres and are part of middle- to high-income groups. In terms of caste and ethnicity, due to anti-discrimination laws, all childcare centres examined for this study confirmed that they accept students from a variety of backgrounds.

The provision of scholarships for *Dalit* children has had a positive effect on their enrolment. In terms of location, most NGO-based and state-funded centres are within a 10–20 minute walking distance of users' homes. Private centres are usually accessed through private transport. Access is considerably more challenging for the 3,412 state-funded centres in mountainous areas. These lack public transport and it would take children 2–3 hours to reach these centres on foot. All of the centres examined for this study have provisions in place for parents to pick up their children outside of standard operating hours, based on parents' work schedules.

Affordability

NGO and community-based centres largely rely on foreign and domestic donors for funding. For example, one of the centres examined for this study is supported financially, technically and materially by a foundation established by the Nepali community in the Netherlands. State-funded centres receive 500 Nepalese rupees, equivalent to US\$4.5, per child per year from the state. According to this study's respondents, these funds are intended to cover teaching and learning materials, as well as meals. A number of international and national NGOs are also involved in technically and materially supporting state-funded centres. Technical support includes developing information, education and communication (IEC) materials that are easily accessible for teachers, parents, guardians and communities, in order to raise awareness of early childhood development.

As families with children in NGO, community-based and state-funded centres are usually part of low-income groups, the centres often do not charge them fees. However, parents who can afford are requested to support the centres' financially. They tend to contribute 800–1,000 rupees (approximately US\$7–8), which accounts for 5–10 per cent of their household income. Parents and guardians also bear children's healthcare-related costs. The parents and guardians consulted for this study spend 40–50 per cent of their household income on childcare, including both early childhood development centres and home care.

In urban centres like Kathmandu, tuition fees for private centres ranges from 6,000–18,000 rupees per month (equivalent to US\$55–175). Some metropolitan cities such as Itahari in eastern Nepal have set a fee structure, after private schools were categorized into *Ka*, *Kha* and *Ga* groups. Schools in the *Ka* category can charge a maximum monthly fee of 1,800 rupees for nursery classes (US\$17.50), those in the *Kha* category can charge a maximum of 1,550 rupees (US\$15) and those in the *Ga* category can charge 1,200 rupees (US\$11.50). This framework enhances the potential of children in poorer households accessing private centres.

The State provides a child grant to all children under 5 years old in the Karnali region and *Dalit* children under 5 years old across the country, through a cash transfer of 800 rupees (US\$7.5) every four months to their parent or guardian.

This initiative, however, has not been effective largely due to its low coverage, the low benefit value and weaknesses in delivery. Agencies like UNICEF add a 'top-up' to the regular sums of social protection cash grants, particularly during emergencies.

Quality

More than half (59 per cent) of state-funded centres have fewer than 20 students per class, 29 per cent have 21–40 students per class, and 12 per cent have more than 40 students per class. There is at least one caregiver and one facilitator at the centres. Approximately 80 per cent of private kindergartens have more than 40 students. Although enrolment numbers are higher than NGO, community-based and state-funded centres, private centres often run different levels of early childhood care and development classes for different age groups – including playgroup, nursery, lower kindergarten and upper kindergarten. There is usually one teacher or facilitator for each level, and two *didis* (caregivers) to care for children across all levels. The roles of *didis* at all three types of centres include cleaning classrooms and the school in general, and keeping children clean by looking after their hygiene and sanitation-related needs.

A National Minimum Standard is in place for physical infrastructure, including regulations on the size of classrooms, land, buildings, and classroom bookcases, among other matters. However, childcare users and workers consulted for this study indicate that physical infrastructure varies widely depending on the type of centre. It is mandatory for state-funded centres to comply with the National Minimum Standard on physical infrastructure. Over 40 per cent of these centres do not meet these standards. Infrastructure at NGO centres is largely guided by donor agencies' standards. Their land, buildings, and teaching and learning materials are considered relatively adequate.

Monitoring and enforcing quality standards remains a major challenge. Although government guidelines exist on nutritious food, this study's respondents highlight a lack of monitoring to ensure that mid-day meals at childcare centres comply with these guidelines. At private centres, parents are often directly involved in monitoring standards.

There are no set minimum qualifications for caregivers or facilitators at NGO or community-based centres. Services at these centres are often supported by foreign and domestic volunteers, usually students. State-funded centres have set minimum qualifications for facilitators, who must at least be Grade 10 graduates. However, not all facilitators are – almost 39 per cent have beyond the minimum qualification, 54.9 per cent possess the minimum qualification, and 6.4 per cent do not meet minimum qualification requirements. A key quality intervention introduced under the School Sector Development Project 2016–2021 is providing one month of training for early childhood development facilitators. Almost 90 per cent have participated in the 15-day basic training, while the rest have taken part in a full one-month training course.

Primary research for this study indicates that facilitators in private centres usually hold at least a bachelor's degree. However, their degrees are not necessarily related to social work, psychology or other fields that include childcare as a major component. Training on appropriate childcare is not provided by childcare centres in Nepal. This study's respondents – including teachers at a private centre – highlight the lack of opportunities for childcare workers to continually upgrade their skills or take part in training as a key gap.

Decent work for childcare workers

NGO and community-based centres in Nepal pay workers an average of 6,000–10,000 rupees per month (equivalent to US\$55–95). This is not in line with the recently set minimum wage of 15,000 rupees, effective since mid-July 2021. According to one expert interviewed for this study, Nepal lacks a monitoring mechanism to guarantee that childcare workers receive at least the minimum wage.

Facilitators at state-funded centres receive a salary of 6,000 rupees (approximately US\$55). Facilitators are hired by the centres themselves, but must comply with regulations established by the State, including possessing minimum qualifications and participating in one month of training. Some local governments provide financial support to public centres, as a result of which facilitators' salaries have risen to 10,000–15,000 per month (US\$95–145). Such support depends on the available resources of local government units. Salaries for support staff (caregivers/*didis*) at state-funded centres are considerably lower than facilitators' salaries.

At private kindergartens, facilitators earn 15,000–30,000 rupees per month, while *didis* are paid just 6,000–10,000 rupees per month (US\$55–95). This means that the salaries of *didis* at private kindergartens are also not in line with the established minimum wage.

While state-funded and private centres employ staff through formal contracts, NGO and community-based centres usually do not provide employment contracts for workers. According to this study's respondents, one of the incentives for caregivers accepting such conditions of work is that their children can attend the centres. In terms of employment and social protection, state-funded, NGO and community-based centres comply with government rules under the Social Security Act of 2017 to some extent. The Act covers old-age, invalidity and survivor pensions, as well as maternity, sickness and employment injury benefits. However, according to employers at private kindergarten, they do not consider it mandatory to comply with these rules.

► 9.6. The Philippines

Country overview

The Philippines has one of the largest populations in Southeast Asia, with 109 million inhabitants in 2020 (The Philippines, Philippine Statistics Authority 2021). Children between 0 and 4 years old, and those between 5 and 9 years old, account for the largest age group in the population. With an estimated 1.5 million live births registered in 2020, the Philippines'



childcare sector will remain sociologically, politically and economically significant in the years to come (The Philippines, Philippine Statistics Authority 2022).

The delivery of early childhood care and development programmes and services in the Philippines rests on a solid foundation of alignment and commitment to international conventions and treaties. The Constitution guarantees the care, education and holistic development of all children and recognizes the role of women in nation-building. Two notable pieces of legislation provide the legal and political bases for the realization of the twin goals of total human development and gender equality. These are Republic Act 8980, the Early Childhood Care and Development Act of 2000, and the Early Years Act of 2013 (later repealed), which provide a comprehensive, integrative, inclusive and sustainable National Early Childhood Care and Development Systems Framework. The Early Years Act is complemented by three Republic Acts: Republic Act 11148, the *Kalusugan at Nutrisyon ng Mag-Nanay* Act (Health and Nutrition of Mother and Baby); Republic Act 9710, the Magna Carta of Women, the direct translation of the Convention on the Elimination of All forms of Discrimination Against Women (CEDAW); and Republic Act 6972, the *Barangay-Level Total Development and Protection of Child Act* which guarantees the establishment of day care centres in every workplace and *barangay*.³² The Early Years Act of 2013 provides early childhood care and development programmes and services to operate within the purview of Local Government Units, as specified in Republic Act 7160, the Local Government Code of the Philippines of 1991.

³² A *barangay* is the smallest political or administrative unit in the Philippines.

This makes Local Government Units the largest providers of fully-funded early childhood care and development services for children under 6 years old. However, the Department of Interior and Local Government, which has jurisdiction over Local Government Units is not part of the Early Childhood Care and Development Council Governing Board. This governance structure has blurred lines of accountability between governing boards at the national and local levels.

Despite being considered a front-runner in Southeast Asia in creating legislative and policy standards for early childhood care and development (UNESCO and SEAMO 2018), and ranking 19th on the World Economic Forum's 2022 Global Gender Gap Index, childcare reforms in the Philippines have not translated into large-scale, integrated and sustained positive outcomes for children and women. They continue to experience multi-dimensional poverty, discrimination and abuse. Children in geographically isolated and disadvantaged areas, as well as in conflict zones, often lack access to basic services like quality education, adequate nutrition, good healthcare, decent housing, and WASH facilities. Child marriage and adolescent pregnancy remain serious problems, and adolescent pregnancy rates increased during the COVID-19 pandemic (Bello 2021).

Women and girls in the Philippines consistently perform more unpaid care work than men and boys, including during the COVID-19 pandemic. In the National Household Care Survey conducted in early 2021, women reported spending 13 hours per day on unpaid care work,³³ while men reported spending 8 hours, on average, on such work (Sobritchea et al. 2021). The traditional gender division of labour is responsible for the invisibility of unpaid care work at all levels of society, beginning with the household level (Tongson 2019). At the community level, the feminization of the early childhood care and development sector is manifested in childcare worker's association of their services with surrogate mothering, highlighting that their productive work is an extension of their reproductive work at home (also see section 9.6 on the national case study on Indonesia).

Women's labour participation in the Philippines is among the lowest, and gender disparities in the labour market are among the most pronounced, in the ASEAN region (Cabegin and Gaddi 2019). Young mothers are often unable to participate in the labour market given the increasing rate of teenage pregnancy, the median age of marriage for women of 27 years old (The Philippines, Philippine Statistics Authority, 2023), and the lack of reliable and inexpensive childcare services. This challenge is entrenched by the dominant social norm which dictates that mothers should be the primary caregivers of young children responsible for meeting their basic needs throughout their childhood years and preparing them for formal schooling. These tasks take many years to accomplish and even longer for mothers with several children, a manifestation of unsuccessful implementation of the Responsible Parenthood and Reproductive Health

³³ Including primary care, secondary care and supervision activities.

Act of 2012 and ineffective education on sexual and reproductive health and rights in the country.

By the time children are old enough to be independent, their mothers, especially those who are poor and less educated, are considered too old to re-enter the labour market. With an outdated set of skills, these women forfeit opportunities to establish a career, build their social capital and receive social protection. Consequently, these women remain economically dependent on their husbands or partners, making them more prone to violence and abuse that result in low self-esteem and mental health issues. The COVID-19 pandemic has exacerbated the economic vulnerability of many women and girls in the Philippines, and widened gender-related social and economic disparities.

Key strengths, gaps and challenges for the childcare sector

Accessibility

The accessibility of childcare centres in the Philippines is influenced by (i) the socio-cultural and economic location of households, and the intersectional identities and needs of children within them on the demand side, and (ii) the operational environment, funding, location and demand for childcare centres' services on the supply side. Apart from child development centres run by Local Government Units, there are government-owned, employer-run, private and community-based child-minding centres or crèches which families can rely on for half-day and whole-day childcare services. Despite these facilities' limited hours of operation (around three hours per day), their services are recognized to reduce and redistribute the childcare responsibilities of families, especially mothers. While some state-funded childcare centres are near homes and villages, several centres are more than 15 minutes away from children's homes or their parents' workplaces. There are also very few privately-run and private employer-funded crèches. Many have closed since March 2020, displacing many of their childcare workers. In terms of distance, access and proximity, government-owned or employment-based and private childcare centres are more accessible from parents' workplaces.

Government-owned centres are usually located within the premises of government institutions, which allows employed parents to easily drop off and pick up their children. On the other hand, private childcare centres are usually accessed by parents using personal vehicles.

Amidst the COVID-19 crisis, all childcare centres except for privately-run facilities managed to carry out activities for young children by shifting to alternative learning modes such as online or module learning. However, this only occurred in the latter part of 2020, and on average, operations were discontinued for five months.

Field data collection found that enrolment rates decreased by 20 to 40 per cent between 2020 and 2021 because parents were not aware that centres had reopened. Issues like access to computers, weak internet connections and challenges in digital skills have been noted.

Affordability

Existing legal frameworks list various budgets from institutions including, but not limited, to the Department of Education, the Department of Health, the Department of Social Welfare and Development, and the National Tax Allotment, which is distributed based on the computation prescribed under the Local Government Code of 1991 to fund early childhood care and development programmes and services at the level of Local Government Units. In addition to substantial government subsidies, the private sector and parents support programmes through financial contributions and donations of goods, services and time. Based on interview data collected for this study, the total cost per child varies across surveyed childcare centres, with tuition ranging from US\$41 to US\$62 per month in one government-owned centre and approximately US\$167 per month in a private centre. Services are free in another government-owned centre where expenses are charged against the gender and development budget of the responsible government agency.

Despite the free and accessible availability of child development facilities at the *barangay* level, parents from poor and low-income households still struggle to provide for their children's basic needs. Subsidies and funding are also dependent on the perceived value of childcare, and inconsistencies in the frequency and type of subsidies and in-kind assistance have been exacerbated by the COVID-19 pandemic, with most funds diverted to the emergency response. Meanwhile, childcare services in the private community-based centre surveyed by this study do not receive any financial or technical support from the Government or parents' employers.

Quality

Child development centres run by Local Government Units adhere to the Early Childhood Care and Development Council-approved Learning Resource Package.

Privately-run and state university-run crèches have curricula and routines based on their educational philosophies. Regardless of what curriculum they use, childcare workers interviewed as part of this study emphasize the importance of a warm, safe and comfortable environment for children. They value children's play and the development of skillsets necessary for formal education and lifelong learning.

However, questions remain about how childcare workers unpack the Learning Resource Package, and how activities are co-constructed with children, especially during the COVID-19 pandemic where most resorted to online or module learning.

Childcare centres vary in terms of their structures, sizes and locations. They are usually located near the village or *barangay* hall, or in available spaces near houses. The inadequate quality of childcare centres' physical infrastructure has been noted, making them susceptible to seismic shocks, typhoons and heavy flooding. The recommended teacher-to-child ratio of 1:10 for children between the ages of 3 and 4, and of 1:5 for toddlers and infants is not often met in public and privately-run childcare centres.

In terms of the training and certification of childcare workers, the Early Childhood Care and Development Council has devised Competency Standards for Child Development Teachers (CDTs) and Child Development Workers (CDWs). However, the childcare workers interviewed for this study report not having adequate professional training for their roles. The COVID-19 pandemic also resulted in many childcare centres run by Local Government Units being converted into storage areas for relief goods and quarantine facilities.

Decent work for childcare workers

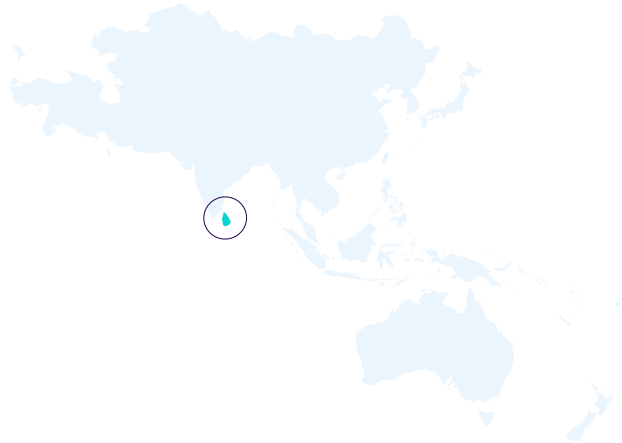
Recognizing the importance of children's formative years, the childcare workers interviewed for this study report feeling inspired and fulfilled when they witness the positive development of children under their care. Maintaining a harmonious relationship with parents, colleagues and supervisors is vital, and achieved by keeping communication lines open. Parents also extend support by volunteering to help childcare workers in the day-to-day operations of child development centres. However, despite caring for hundreds of children daily while their parents are at work, an overwhelming majority of childcare workers lack social protection and their incomes are insufficient to support themselves and their families. The average monthly salary range of childcare workers in Local Government Unit-run and government-run childcare centres interviewed for this study is between US\$157.00 and US\$372.55, with varying social protection benefits. Their employment status is inconsistent. Some report having a regular and permanent post with health insurance, a retirement package, paid leave, 13th-month pay, a clothing allowance and other bonuses. Others are in a contractual position where they do not receive any benefits, and the 'no work, no pay' policy applies to them.

During the COVID-19 pandemic, childcare workers were assigned other tasks, such as distributing relief goods and assisting other sectors, such as older persons and single parents. Childcare workers also report a lack of opportunities for collectivization – those who do not have the security of tenure are considered under the 'no employee-employer relationship scheme' and cannot join unions.

▶ 9.7. Sri Lanka

Country overview

Over the past 20 years, stakeholders in Sri Lanka have been increasingly recognizing the importance of integrating early childhood education with the provision of child day care centres and preschools.³⁴ This is a result of (i) increasing social and policy concerns about children’s vulnerability to abuse and the need to strengthen child protection measures by creating safe and secure environments for children, and (ii) the pressing need to facilitate women’s labour force participation. The inclusion of a target on unpaid care work under SDG 5 is an added impetus for policymakers to invest in childcare measures, in order to redistribute unpaid care work more equitably in Sri Lanka.



Women in the country spend 1.85 times more hours on unpaid care than men (Charmes 2019). The Annual Labour Force Survey 2020 highlights women’s low labour force participation rate, which is increasingly recognized as a challenge to the implementation of development and social policies. Women comprise 33.9 per cent of the economically active population, while men account for 66.1 per cent. Crucially, 60.3 per cent of women categorized as ‘economically inactive’ are in fact ‘engaged in housework’, which includes the care of dependent children. This is a critical factor to consider, given the inadequate provision of childcare facilities in Sri Lanka. Where such services exist, they vary widely in terms of the quality of care, whether in government provisioned free or low-cost centres, or in the fee levying centres run by the private sector. Moreover, most such facilities are concentrated in urbanized areas. While there are limited programmes to support the children of migrant workers, the focus of migration policy has been to restrict women’s overseas employment on the grounds of ensuring child welfare.

Current state investment in childcare focuses on providing services and facilities for children from low-income households, and to government servants in selected areas. The very limited availability of these facilities leaves many families unable to access low-cost or fully-subsidized childcare infrastructure.

³⁴ These findings are summarized based on a detailed national country report.

Private sector day care and preschool costs are high, and this infrastructure caters to middle and upper-class socio-economic groups. As of 2017, only 55 per cent of children between 3 and 5 years old attended preschools.

National policy and programme formulation, and societal expectations around organized childcare, are hindered by the disproportionate socio-cultural responsibility accorded to women as the sole or primary carers of children and other dependent family members. Policy focus and programme development related to caring for children between 0 and 5 years old is relatively new in Sri Lanka. Government institutions that are responsible for child welfare and childcare include the State Ministry of Women and Child Development, Preschool and Primary Education, School Infrastructure and Education Services, the Ministry of Public Administration, Provincial Councils and Local Government, the Ministry of Education, the Ministry of Health, and the Ministry of Community Empowerment and Estate Infrastructure and Development. At the provincial level, Provincial Councils are mandated to monitor the registration and functioning of public and private sector day care centres and preschools. The three key national entities responsible in this regard are the National Child Protection Authority, the Department of Probation and Child Care Services, and the National Secretariat for Early Childhood Development.

In the public sector, responsibility for early childhood care and development is devolved to Provincial Councils. The national budget allocation for the Ministry of Women and Child Affairs is the main source of funds for government investments in children. The Ministries of Health and Education are contributory partners to these budgetary allocations.

The National Secretariat for Early Childhood Development of the State Ministry of Women, Child Affairs and Social Development receives requests and proposals for childcare services from District and Divisional Secretariats. The provision of day care centres depends on the budget approved by the Treasury, rather than demand or requests that reach the secretariat. The Colombo Municipality is entering into public-private partnerships (PPPs) to improve the quality of day care and preschools. The private sector is the main actor in the provision of childcare. There is inadequate monitoring of the operations of private day care and preschool institutions. The analysis below is based on a sample of centres in Colombo run by the Colombo Municipal Council, by the private sector, and by NGOs.

Key strengths, gaps and challenges for the childcare sector

Accessibility

All of the centres visited to inform this study cater to a diverse range of children from the Sinhalese, Tamil and Muslim communities.

However, there are observable differences in accessibility in terms of the location of centres, as some centres are more easily accessible than others. For instance, the Colombo Municipal Council Day Care Centre for Children with Special Needs – which opened in 2018 – is located in a new multi-activity facility in Colombo North. It is accessible by public transport and low-cost trishaws. Children with special needs include those with speech disabilities, mental or emotional development disabilities, autism and Down syndrome. When a child’s condition permits, they are brought to day care centres by parents or guardians using public transport. Alternatively, parents may use trishaws to transport their children to school. According to the Superintendent of the centre mentioned above, *“some kind of transport facilities”* need to be provided for children with special needs. Most parents are day labourers with low and unstable incomes. As such, they are often unable to pay for transport to regularly bring their children to day care centres or clinics.

Standard facilities run by the Colombo Municipal Council focus on accommodating children from low-income households, informed by government social welfare policies. Providing day care services for children under 18 months is not mandated by public sector day care programmes. Women with infants are implicitly required to be homebound. Better resourced private sector facilities, however, accept children between 6 months and 5 years old, based on the payment of designated fees. Private centres also allow children who have attended day care and/or used to attend the private preschool and are now in Grade 1 in mainstream schools, to come in after school until a parent is able to pick them up after office hours. NGO-run centres cannot accommodate children younger than 18 months old due to a lack of resources. Thus, overall, few centres provide facilities – including trained staff and adequate space – for children under 18 months old. Policies and programmes for infants’ inclusion in day care facilities are affected by the lack of care workers with relevant skills, resource constraints and socio-cultural norms. There is an implicit cultural assumption that children under 18 months old should be looked after by their mother or family.

Affordability

State- or government-run establishments focus solely on providing a foundation for early childhood learning for children from low-income households. These do not charge fees. The Colombo Municipal Council uses its own premises or land to construct required infrastructure, invests in equipment for play or for caring for children with special needs, and supplements or provides meals for the children who attend its facilities. The private sector aims to provide professional care facilities for higher income clients who are able and willing to pay for such services. The NGO which runs a facility for the children of women factory workers recognizes the need to operate day care services with low fees, considering these workers’ low wages.

Parents who use facilities run by the Colombo Municipal Council bear out-of-pocket expenses of approximately 100–400 Sri Lanka rupees per day for bus fare or trishaw fare, a child's breakfast, and 2–3 changes of a child's clothing. Since parents overwhelmingly work in the urban informal economy – where paid work is irregular and daily wages are low, ranging from 500 to 1,500 rupees (equivalent to US\$1.56 to US\$4.69) – it is likely that parents spend around 20 per cent of their wages on day care. The out-of-pocket expenses of parents whose children have special needs are higher because they have to pay more for safe transport – such as paying for a trishaw, rather than a public bus. Their out-of-pocket expenses are likely to account for around 20–30 per cent of their income.

There are no standardized fees for private day care centres or preschools. Charges are decided by owners, based on the centre's location, technical facilities, qualified teachers, learning materials and the provision of meals. Fees charged by NGO-run centres take into account the relatively low wages of the women workers they cater to. A woman worker earns approximately 30,000–35,000 Sri Lanka rupees per month (US\$93.84–109.48), and childcare centre fees are 3,000–4,000 rupees per month (US\$9.38–12.51). If two children from the same family attend an NGO-run centre, parents pay 6,000 rupees (US\$6.26). If the parent is an unmarried or single mother who has two children at the day care centre, a lower fee of 2,000 rupees per child is charged.

The NGO-run centre visited for this study currently does not provide food for children. Parents are expected to provide breakfast, lunch, snacks, biscuits, a change of clothes, a towel, soap and any medication required for their child. According to the centre's Warden/Supervisor, the quality of food that parents provide is often insufficiently nutritious – for instance, it is usually rice and one vegetable – and they advise mothers to at least add an egg to meet their children's nutrition needs. Parental expenses on childcare at NGO-run centres are approximately 6,000–9,000 rupees per month (US\$18.77–28.15), which are likely to account for 20–30 per cent of their wages. There are no tax breaks for parents. According to the NGO that runs the centre visited for this study, they use to provide all of the meals for children at the centre in the past, but are unable to do so now due to limited funding. However, they report a high demand from mothers to provide children with at least one cooked meal at lunch time.

Quality

The quality of day care and preschools for children under 6 years old is uneven. Fee levying facilities are better equipped to meet required staff qualifications and infrastructure standards. With the exception of the new, equipped Day Care Centre for Children with Special Needs, day care centres and preschools of the Colombo Municipal Council are poorly resourced in terms of providing space and learning materials for children, and adherence to staff training requirements and other qualifications on early childhood development.

Efforts are being made to standardize its preschool curriculum to enhance teaching methods. The council's commitment to providing services for children from low-income households is central to its institutional vision and staff, but is hampered by the lack of investment in quality care. The NGO-run day care centre visited for this study provides a critical service to mothers employed in the Free Trade Zone. However, it lacks sufficient resources to invest in upgrading the quality of early childhood development inputs, including recruiting or providing required training for teachers and caregivers. The financial constraints facing NGOs impact the quality of the services they provide.

Decent work for childcare workers

There are notable differences in the terms and conditions of employment of staff across the childcare sector in Sri Lanka. Colombo Municipal Council staff members have the most secure conditions of employment, with access to government retirement pensions and other subsidies and benefits. Despite lockdowns requiring the closure of facilities during the COVID-19 pandemic, council employees received their regular salaries. Hence, the attractiveness of government employment appears to outweigh the challenges of working in poor neighbourhoods.

Colombo Municipal Council salaries are in line with government salary regulations. The acting Superintendent of the council's day care centre receives a fixed monthly salary of 35,450 Sri Lanka rupees (equivalent to US\$110.89), the Warden receives 25,000 rupees per month (US\$78.20) and the Office Assistant/care workers are paid 24,750 rupees per month (US\$77.42). In private centres, newly recruited care workers receive a salary of 15,000 rupees (US\$46.92), while those with 7 years of experience receive 32,000 rupees (US\$100.10). Private centre managers receive around 40,000 rupees (US\$125.13). In the NGO-run centre consulted for this study, care workers are paid 13,000–15,000 rupees (US\$40.67–46.92). Workers recruited through private agencies, by contrast, are less secure in terms of wages and employment. Lockdowns during the COVID-19 pandemic resulted in wage cuts, and there were no subsidies to compensate for the loss of income. In the private sector, salaries are based on qualifications established by facility owners, and upward mobility within an institution depends on internal assessments of performance.

Primary research for this study indicates that contributions to the Employee Provident Fund or Employee Trust Fund for staff are paid, and that statutory leave regulations – including maternity leave provisions – are generally followed by the private sector. None of the employees in the facilities visited for this study are members of trade unions. The designation of 'care worker' does not appear to be included in the membership categories of mainstream teachers' unions. There are, however, separate trade unions solely for preschool teachers, such as the Samastha Lanka Pera Pasel Trade Union (All Sri Lanka Preschool Trade Union).

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Annexes

► Annex 1. Sample topic guide adapted for various stakeholders

Section 1	Overview	No.	Questions
1.1	Macroeconomic and policy context	1	What are the main aims and objectives of the early childhood care and development policy?
		2	Is there provision for publicly-funded centre-based day care or crèche services? (Probe for details on the nature of services, type, extent and coverage, etc.)
		3	If public provision does not exist, what is the composition of the childcare sector – private provision, employer-provided, individual-owned centres or community crèche?
		4	What are the emerging trends (demographic, social, political, economic) that affect early childcare policy and care work in the country?
		5	What is the nature of the fiscal space and how much public investment is targeted at centre-based day care provision? Is money spent on other types of childcare programmes (early childhood development, health and nutrition, learning and education)?
		6	What is the outlook for the childcare sector in the country going forward? Where are there areas of opportunities for the Government to get involved in?
		7	How do governments manage the regulation of private, NGO and community-based providers of childcare services?
Section 2	Accessibility criteria	No.	Questions
2.1	Profile of children (intersectional lens of income, class, caste, race, ethnicity, geographical location, disability and special needs)	1	Who are the target beneficiaries of state policy?
		2	What is the income class, race, caste, ethnicity, age, and disability status of the families who are covered by state services?
		3	If there is no state provision, which groups of families are most likely to use centre-based day care services? Why?

Section 2	Accessibility criteria	No.	Questions
2.2	Location (distance and proximity)	4	Where are the centres located and how have these geographical areas been identified?
		5	How far do families have to travel to access centre-based day care facilities?
2.3	Timings (regular and non-standard hours)	6	What are the centres' timings and hours of operation?
		7	What is the reason for these hours of operation? (Probe whether there is thinking on freeing up carers' time to pursue economic or other activities.)
2.4	Enrolment-to-demand ratio	8	How many centres are there in the country in total? (if applicable)
		9	What is the capacity of these centres? (probe how many children are enrolled per centre and how many children in total are covered across the country)
		10	How is demand calculated? Is there a waiting list compared to the intake capacity of centres?
		11	What are your suggestions for improving the accessibility of childcare services?
Section 3	Affordability criteria	No.	Questions
3.1	Total cost per child/centre	1	How is funding provided by the state (wholly covered, shared between centres and regions, partial subsidies, vouchers or allowances for families)?
		2	What is the total cost of care per child incurred by the Government?
		3	Do families need to contribute to centre fees/user charges?
3.2	Families' out-of-pocket expenses	4	Do families have out-of-pocket expenses for any reason, such as food, materials, uniforms, or any other expenses?
3.3	Childcare costs as a share of family income	5	How much are families willing to pay to use day care services? Why?
		6	How much do parents spend on the use of childcare services as a proportion of their monthly income? (If state sponsored provision is not available.)
3.4	Subsidies, tax breaks, vouchers or allowances for families	7	Do families receive any subsidies, childcare allowances, tax breaks or meal vouchers, etc. to offset some of the costs of childcare?
		8	What are your suggestions for improving the affordability of childcare services?

Section 4	Quality criteria	No.	Questions
4.1	Caregiver-to-child ratio (including staff turnover ratios and ratios of childcare attendants, helpers and workers)	1	What is the caregiver-to-child ratio? Is it any national guideline for this? What happens in actual practice?
		2	What happens when caregivers resign from the job? How does it affect the children/how is it factored in for quality purposes?
		3	What happens when teachers or other centre staff resign? How does it affect the children/how is it factored in for quality purposes?
4.2	Physical infrastructure	4	What is the physical infrastructure and environment of a day care centre like?
		5	What facilities and space are available?
		6	Are there any national guidelines on the type and quality of infrastructure?
4.3	Safety and health standards (including nutrition)	7	What are the health, safety and nutrition guidelines that centres' must follow?
		8	To what extent are these met on the ground/ implemented?
4.4	Pedagogical infrastructure and age-appropriate learning inputs	9	What age-appropriate activities are conducted at the centres?
		10	Are early learning and education inputs provided?
		11	What is the availability of pedagogical infrastructure, materials, structures and teachers like?
4.5	Positive interactions with caregivers	12	How do parents rate the positive interactions between caregivers and children? Are centres 'happy' places for children?
		13	What challenges exist to providing high quality care?
		14	What are your suggestions for improving the quality of services?

Section 5	Decent work criteria	No.	Questions
5.1	Employment opportunities (including minimum qualifications, professional skills, monitoring, supervision, and any reservations, etc.)	1	What is the profile of workers employed as childcare workers? (ask separately about caregivers and teachers, if applicable)
		2	Is there a minimum qualification? Who is eligible to apply for a job as a childcare worker?
		3	If any professional skills training provided for caregivers or teachers? (probe whether there is any training on health and safety, nutrition, handling children, or related to education, etc.)

Section 5	Decent work criteria	No.	Questions
5.1	(continued)	4	Are there opportunities for advancement, mentoring or growth in their jobs?
5.2	Adequate earnings (wages)	5	What wages do childcare workers' earn? Are these in line with the national minimum wage?
5.3	Conditions of work (safety, stability, decent timings, work-life balance, equal treatment at work, the provision of care for care workers, etc.)	6	What are the minimum and maximum hours of work?
		7	What type of employment contract(s) do childcare workers have? (Probe whether caregivers and helpers have full-time formal contracts, or casual, part-time, informal or volunteer arrangements.)
		8	How many hours of work do childcare workers perform, and what are their timings of work? (Check whether these differ for caregivers and teachers.)
		9	How are childcare workers treated at work (by colleagues, supervisors and/or parents)?
5.4	Employment benefits and social security	10	What benefits and social security provisions are available to childcare workers (e.g. maternity leave, childcare for their own children, paid leave, health insurance, etc.)?
5.5	Trade union membership and representation	11	Are childcare workers unionized? What issues have unions raised? Do workers collectivize to demand better conditions of work, etc.? What policy frameworks facilitate or inhibit unions' functioning?
		12	What are your suggestions for improving decent work conditions of childcare workers?
Section 6	Other questions	No.	Questions
6.1	Impact of COVID-19	1	How has COVID-19 affect the functioning of childcare centres?
		2	How have childcare workers' jobs been affected by the pandemic?
		3	Has there been a policy response to COVID-19 in terms of childcare?

► Annex 2. Childcare policy gap estimates

The childcare gap refers to a period in which families with young children are unable to benefit from well-compensated childcare leave, or a guaranteed or state-supported place for their children in early childhood education and care.

Economy	Subregion	Starting age of universal and free early childhood care and education, or primary education (years)	Childcare-related paid leave reserved for households (years)	Childcare policy gap (years)
Armenia	Central and West Asia	6.0	2.4	3.6
Australia	The Pacific	5.0	1.4	3.6
Azerbaijan	Central and West Asia	5.0	3.3	1.7
Bangladesh	South Asia	5.0	0.3	4.7
Brunei Darussalam	Southeast Asia	5.0	0.3	4.7
Cambodia	Southeast Asia	6.0	0.3	5.7
Fiji	Pacific	6.0	0.3	5.7
Georgia	Central and West Asia	6.0	0.4	5.6
India	South Asia	6.0	0.5	5.5
Indonesia	Southeast Asia	7.0	0.3	6.7
Japan	East Asia	3.0	2.3	0.7
Kazakhstan	Central and West Asia	6.0	1.3	4.7
Kyrgyz Republic	Central and West Asia	7.0	3.3	3.7
Lao People's Democratic Republic	Southeast Asia	6.0	0.3	5.7
Malaysia	Southeast Asia	6.0	0.2	5.8
Maldives	South Asia	4.0	0.58	5.8
Mongolia	East Asia	2.0		2.0
Myanmar	Southeast Asia	5.0	0.3	4.7
Nepal	South Asia	5.0	0.3	4.7
New Zealand	The Pacific	3.0	0.5	2.5
Pakistan	Central and West Asia	5.0	0.2	4.8

Economy	Subregion	Starting age of universal and free early childhood care and education, or primary education (years)	Childcare-related paid leave reserved for households (years)	Childcare policy gap (years)
Papua New Guinea	The Pacific	6.0	0.0	6.0
China	East Asia	3.0	0.3	2.7
The Philippines	Southeast Asia	5.0	0.4	4.6
Republic of Korea	East Asia	3.0	2.3	0.7
Samoa	The Pacific	5.0	0.1	4.9
Singapore	Southeast Asia	6.0	0.3	5.7
Solomon Islands	The Pacific	6.0	0.2	5.8
Sri Lanka	South Asia	5.0	0.2	4.8
Tajikistan	Central and West Asia	7.0	0.3	6.7
Thailand	Southeast Asia	3.0	0.3	2.7
Timor-Leste	Southeast Asia	6.0	0.2	5.8
Tonga	The Pacific	6.0	0.0	6.0
Turkmenistan	Central and West Asia	6.0	3.3	2.7
Uzbekistan	Central and West Asia	7.0	2.3	4.7
Vanuatu	The Pacific	4.0	0.2	3.8
Viet Nam	Southeast Asia	6.0	0.5	5.5

Source: Addati, Cattaneo and Pozzan 2022, 411–419 (table A.10).

► Annex 3. Maternity and paternity leave policies in economies in Asia and the Pacific

Economy	Subregion	Length of maternity Leave	Amount of cash benefit (% of previous earnings)	Paternity leave	Amount of cash benefit (% of previous earnings)
Armenia	Central and West Asia	20 weeks (140 days)	100% (up to a ceiling)	61 days	0%
Azerbaijan	Central and West Asia	18 weeks (126 days)	100%	14 days	0%
Georgia	Central and West Asia	104 weeks	100% (up to a ceiling of 183 days)		
Kazakhstan	Central and West Asia	18 weeks (126 days)	100% of average revenue (*4.2 - 10% pension contribution)	5 days	0%
Kyrgyz Republic	Central and West Asia	18 weeks (126 days)	100% for the first 10 days, flat rate for the remaining 116 days	5 days	0%
Pakistan	Central and West Asia	12 weeks	100%		
Tajikistan	Central and West Asia	20 weeks (140 days)	100%	7 days	0%
Turkmenistan	Central and West Asia	16 weeks (112 days)	100%		
Uzbekistan	Central and West Asia	18 weeks (126 days)	100%		
Hong Kong, China	East Asia	14 weeks	80%	5 days	80%
Japan	East Asia	14 weeks	66.7% (up to a ceiling)		
Mongolia	East Asia	17 weeks (120 days)	70%		
China	East Asia	14 weeks (98 days)	100%		
Republic of Korea	East Asia	13 weeks (90 days)	100% for 60 days, 100% (up to a ceiling) for the last 30 days	10 days	100%

Economy	Subregion	Length of maternity Leave	Amount of cash benefit (% of previous earnings)	Paternity leave	Amount of cash benefit (% of previous earnings)
Australia	The Pacific	52 weeks (16 weeks paid to primary carer)		10 days	Flat rate
Fiji	The Pacific	14 weeks (98 days)	100%	5 days	100%
New Zealand	The Pacific	26 weeks	100% (up to a ceiling)	14 days	0%
Papua New Guinea	The Pacific	6 weeks	0%		
Samoa	The Pacific	6 weeks	66.7%	5 days	100%
Solomon Islands	The Pacific	12 weeks	25%		
Vanuatu	The Pacific	12 weeks	66%		
Bangladesh	South Asia	16 weeks	100%		
Bhutan	South Asia	8 weeks	100%	5 days	100%
India	South Asia	26 weeks	100%		
Maldives	South Asia	26 weeks (6 months)	100%	30 days	100%
Nepal	South Asia	14 weeks	100% (for 60 days, the rest is unpaid)	15 days	100%
Sri Lanka	South Asia	12 weeks (84 days)	100%		
Brunei Darussalam	Southeast Asia	15 weeks	100% (for 13 weeks)		
Cambodia	Southeast Asia	13 weeks (90 days)	50%		
Indonesia	Southeast Asia	13 weeks (3 months)	100%	2 days	100%
Lao People's Democratic Republic	Southeast Asia	15 weeks (105 days)	80%	3 days	100%
Malaysia	Southeast Asia	9 weeks (60 days)	100%		
Myanmar	Southeast Asia	14 weeks	70%	15 days	70%

Economy	Subregion	Length of maternity Leave	Amount of cash benefit (% of previous earnings)	Paternity leave	Amount of cash benefit (% of previous earnings)
Philippines	Southeast Asia	19 weeks (135 days)	100% for 105 days	7 days	100 for 4 days
Singapore	Southeast Asia	16 weeks	100% for a woman's first and second child	14 days	100% (up to a ceiling)
Thailand	Southeast Asia	13 weeks (maximum 90 days)	100% for 45 days, 50% for the last 45 days		
Timor-Leste	Southeast Asia	12 weeks	100%	5 days	100%
Viet Nam	Southeast Asia	26 weeks (6 months)	100%	5 days	100%

Source: Addati, Cattaneo and Pozzan 2022, 411–419 (table A.10).

► Annex 4. Official age of entry into pre-primary and primary education

Economy	Pre-primary entry age (years)	Primary entry age (years)	Economy	Pre-primary entry age (years)	Primary entry age (years)
Armenia	3	6	Nauru	3	6
Australia	4	5	Nepal	3	6
Azerbaijan	3	6	New Zealand	3	5
Bangladesh	3	6	Niue	4	5
Bhutan	4	6	Pakistan	3	5
Brunei Darussalam	3	6	Palau	3	6
Cambodia	3	6	Papua New Guinea	3	6
Cook Islands	3	5	China	3	6
Fiji	3	6	Philippines	5	–
Georgia	3	6	Republic of Korea	3	6
Hong Kong, China	3	6	Samoa	3	5
India	3	6	Singapore	3	6
Indonesia	5	7	Solomon Islands	3	6
Japan	3	6	Sri Lanka	4	5
Kazakhstan	3	6	Tajikistan	3	7
Kiribati	3	6	Thailand	3	6
Kyrgyz Republic	3	7	Timor-Leste	3	6
Lao People's Democratic Republic	3	6	Tonga	4	6
Malaysia	4	6	Turkmenistan	3	6
Maldives	3	6	Tuvalu	3	6
Marshall Islands	4	6	Uzbekistan	3	7
Federated States of Micronesia	3	6	Vanuatu	4	6
Mongolia	2	6	Viet Nam	3	6
Myanmar	3	6			

Note: Pre-primary refers to preschool education and learning, while primary refers to starting formal schooling. **Source:** Devercelli and Beaton-Day 2020, 58 (Appendix table B.4). Only economies with this data available were catalogued at source, and extracted here.

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Investments in childcare for gender equality in Asia and the Pacific

This study examines the public provision of childcare across 48 economies in Asia and the Pacific through the lens of accessibility, affordability, quality, and decent work for childcare workers. It provides policymakers, development partners, researchers and civil society organizations with an in-depth analysis of the policy and institutional frameworks for childcare for children aged 0-6 years old. It also includes case studies that reflect the voices of parents, childcare providers and childcare workers. These voices offer invaluable insights into the need for childcare services and broader cultural perception of care work in the Asia and Pacific region.

Based on its findings, the study offers recommendations for increased investments in the childcare sector to enable better socio-economic outcomes for women and children, job generation, and decent work for childcare workers, as well as to support a transformative recovery from the COVID-19 pandemic that advances gender equality and sustainable development.

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