



STRENGTHENING AND SUPPORTING
THE EARLY CHILDHOOD WORKFORCE:

Competences
and Standards

Copyright © 2018
Results for Development Institute
1111 19th Street NW, Suite 700, Washington, DC 20036

The Early Childhood Workforce Initiative (ECWI) is a global, multi-sectoral effort to mobilize countries and international partners to support and empower those who work with families and children under age 8. This initiative is jointly led by Results for Development (R4D) and the International Step by Step Association (ISSA), and supported by a consortium of funders including Bernard van Leer Foundation, Open Society Foundations, ELMA Foundation, and Jacobs Foundation.

This report was written by Vidya Putcha, with assistance from Radhika Mitter and Kimberly Josephson, and under the guidance of Michelle Neuman and Mark Roland at Results for Development (R4D). Many thanks are due to the members of the Early Childhood Development Action Network (ECDAN) Task Force on the Workforce for their guidance and input along with several other individuals including: Emily Vargas-Barón (The RISE Institute), Joan Lombardi (Bernard van Leer Foundation), Aaron Emmel (American Academy of Pediatrics), Tina Hyder (Open Society Foundations), Rachel Machefsky (Bernard van Leer Foundation), Melanie Swan (Plan International), Mihaela Ionescu (International Step by Step Association), Amy Bess (Global Social Service Workforce Alliance), Aisha Yousafzai (Harvard University), Stephanie Olmore (National Association for the Education of Young Children), Sheldon Shaeffer (International ECD consultant), and Nurbek Teleshaliyev (Open Society Foundations).

We are grateful to the Early Childhood Program at the Open Society Foundations for their generous support of the Early Childhood Workforce Initiative, including this report.

Suggested citation:

Putcha, V. (2018). *Strengthening and Supporting the Early Childhood Workforce: Competences and Standards*. Washington, D.C.: Results for Development.



Contents

Acronyms	3
Executive Summary	4
Introduction	9
Roadmap for the Report	10
The Early Childhood Workforce	11
What are competences and standards?	12
Why focus on competences and standards?	14
Methodology	15
Study Limitations	16
Key Findings	17
Conclusion and questions for reflection.....	29
Areas for further research	30
References	31
Annex - Typology	36

Acronyms

CHW	Community health worker
ECD	Early childhood development
ECE	Early childhood education
ECEC	Early childhood education and care

Executive Summary

Introduction

There is substantial and growing evidence that early childhood development (ECD)¹ services positively impact children's development. Despite increasing knowledge and awareness of the benefits of ECD, we do not know enough about the early childhood workforce, who play a major role in delivering quality ECD services.

Key questions about the ECD workforce require greater reflection:

- What do early childhood professionals and paraprofessionals need to know and do in order to perform effectively?
- How do requisite knowledge and skills vary across contexts?
- What types of training and support do staff receive?
- How is the early childhood workforce recruited, monitored, and evaluated?

In an effort to address these questions, the Early Childhood Workforce Initiative (ECWI), led by the International Step by Step Association (ISSA) and Results for Development (R4D), was created as a multi-stakeholder effort to support and empower those who work directly with young children. To inform and guide the Initiative, R4D is carrying out a series of *global landscape analyses* to establish the size and scope of the challenges faced by the early childhood workforce, while also highlighting promising practices countries have adopted in response to these challenges. Covering a range of roles including professionals and paraprofessionals, paid and unpaid workers, and frontline workers, trainers, supervisors, and managers from the education,² health and nutrition, social protection and child protection sectors, these analyses aim to provide a comprehensive overview of the current status of the workforce worldwide.³ The four themes⁴ which will be explored in this series include: **competences and standards, training and professional development, monitoring and mentoring,** and **recognition of the profession.** This report, the second in this series, addresses the theme of *competences and standards*.

What are competences and standards?

In this report, *competences* encompass the requirements and expectations for what early childhood professionals and paraprofessionals should know and be able to do. In general, there are two types of competences: (i) competences for professionals and paraprofessionals, which outline what a worker in a specific role should know and be able to do; and (ii) competences for what training and professional development programs should impart. We define *standards* as guidelines and regulations which lay out requirements for entry and continuation in professional/paraprofessional roles. In general, two types of standards are relevant to the early childhood workforce: (i) personnel standards that outline the requirements a worker must meet in order to assume a role (e.g. educational requirements, experience);

¹ The term early childhood development (ECD) is used in this report to refer to services across the education, health and nutrition, and social and child protection sectors. The term early childhood education and care (ECEC) is used to refer to services encompassing early education and care from birth to the transition to primary school.

² When referring to the education sector, we are also including the child care field unless otherwise noted.

³ Table 1 in the full report provides a snapshot of the various roles within this workforce while the Annex provides a more comprehensive analysis.

⁴ These themes were identified in collaboration with a group of experts convened by the Early Childhood Workforce Initiative in September 2015.

and (ii) professional standards which outline a code of ethics and commonly accepted procedures while in a particular role.⁵ The primary focus of this report is on competences for professionals and paraprofessionals within the early childhood workforce.

This report also covers processes such as registration, licensing, certification, recertification, and accreditation, which are related to monitoring and ensuring adherence to competences and standards. For example, personnel standards may indicate that a worker must register with a workforce body or have a license or certification in order to be part of a system. Certification requirements may also be developed based on the competences identified as necessary for a specific role. While the exact definition of these processes depends on the specific system referenced, *certification* is generally considered the process by which a system ensures that someone who meets certain academic qualifications is also professionally competent. *Licensing* is very similar to certification but often involves a standardized examination and registration with a monitoring body. *Accreditation* refers to the process by which training institutions are recognized based on meeting quality standards.⁶ Official *registration* usually refers to the formal listing with the government of an ECD provider employing the workforce; however, in some countries individual members of the early childhood workforce are also required to formally register with the local, regional, and/or national government.

Why focus on competences and standards?

This theme was selected because competences and standards can: 1) increase the relevance of training and professional development, 2) enhance the quality of monitoring and mentoring opportunities, 3) support professionalization of the workforce, and 4) support workforce planning efforts.

While there is substantial evidence that training and professional development opportunities have an impact on the quality of services delivered by members of the workforce, we know that the content of these pre- and in-service opportunities matters greatly.⁷ If training opportunities are closely aligned with what members of the early childhood workforce need to carry out their roles effectively, they have a better chance at improving program quality. To that end, competences for professionals and paraprofessionals, along with competences for training programs can help guide the design and delivery of training and professional development programs. In addition, competences for professionals and paraprofessionals can guide members of the workforce, along with their mentors and supervisors, in identifying areas for improvement and ways of addressing them.

Competences and standards also have the potential to elevate the status of personnel who often receive low remuneration in comparison to their peers and sometimes lack incentives to remain in their roles. By defining competence for roles in the workforce, ensuring their alignment to training and professional development and monitoring and mentoring opportunities, and also elaborating personnel and

⁵ We acknowledge that the terms competences and standards are often used interchangeably. We have chosen to define and use these terms in this way for the sake of clarity in this report.

⁶ Southeast Asian Ministers of Education Organization (SEAMEO) and UNESCO. (2016). *Southeast Asian Guidelines for Early Childhood Teacher Development and Management*. Bangkok: SEAMEO Secretariat and UNESCO Bangkok Office.

⁷ The first report in this series covers the topic of training and professional development. Please see: Mitter, R. & Putcha, V. (2018). *Strengthening and Supporting the Early Childhood Workforce: Training and Professional Development*. Washington, D.C.: Results for Development.

professional standards, there is an implicit recognition of the unique knowledge and skills needed to carry out such roles, which can generate a professionalizing force in the system.

Competences for roles in the early childhood workforce can also support systems to adequately recruit and deploy personnel. When roles within the workforce are unclear and competences are undeveloped, it is difficult for a system to plan for recruitment and deployment, as competences for roles can clarify what different personnel bring to service delivery and can help answer questions about what roles within a system are needed. In serving these important functions, competences and standards ensure consistency and continuity in serving children and families across sectors and roles.

Although there is recognition that competences and standards are important, there have been few efforts to date to systematize the various approaches to developing and implementing them for the early childhood workforce. Therefore, this study aims to begin filling that gap in order to identify common approaches and challenges.

Key Findings

An extensive review of published and grey literature yielded six findings related to the ways in which countries have used competences and standards to support early childhood systems:

- 1. Competences for professionals and paraprofessionals are likely to be in place in systems where there are clearly defined job descriptions. However, where these competences exist, they vary in format and content across roles, sectors, and regions.**

While there have been efforts across several high-income countries to develop competences for professionals and paraprofessionals, there have been fewer efforts in low- and middle-income countries. Since clearly defined job descriptions are the foundation on which competences are developed, competences for professionals and paraprofessionals are more likely to be in a system where such job descriptions exist. However, many countries lack clearly defined job descriptions; for example, of 14 countries where job descriptions were requested for a study on the social service workforce in West and Central Africa, only two countries were able to point to existing ones.⁸ And even where job descriptions are elaborated and competences are in place, there remain variations in terms of what types of competences, whether for professionals and paraprofessionals or for training programs, exist and their content and format.

- 2. There is no common core of competences for the early childhood workforce although competences commonly emphasize the importance of domains such as monitoring and evaluation, and interpersonal and communication skills.**

Although there are a number of common domains that are emphasized, competences for professionals and paraprofessionals vary across roles, sectors, and contexts. A review of competences for early childhood educators across 11 states in the U.S. found that although competences fall under eight broad domains, there is significant variation between states in terms of which domains are included and how these domains are referenced.⁹ Similarly, a review of four national competence

⁸ Canavera, M., Akesson, B., & Landis, D. (2014). *Social Service Workforce Training in the West and Central Africa region*. Conducted for UNICEF by the CPC Learning Network, UNICEF & CPC Learning Network.

⁹ Center for the Study of Child Care Employment. (2008). *Early Childhood Educator Competencies: A Literature Review of Current Best Practices, and a Public Input Process on Next Steps for California*. Berkeley, CA: Center for

statements for the workforce supporting children from birth to age 8 in the U.S. found broad consensus in expectations for professionals in a number of areas; however, there were differences in terms of the types of assessment – observational, formative, summative – that were emphasized as important for practitioners to use in their day-to-day work, as well as how practitioners should work with families. While all of the statements emphasized the importance of working with families, there were differences in how working with families was framed. Three statements emphasized the need for practitioners to help families access other services to support children’s development and well-being while one emphasized engagement with families to specifically support children’s learning and development.¹⁰

3. Competences and standards can enhance the relevance of training and professional development programs to the needs of personnel.

When competences are developed for professional and paraprofessional roles, they can provide an important link to training and professional development programs and their curricula. For example, competences for roles can be used in developing and delivering competence-based training. Several countries have also sought to align competences for roles with competences for training programs to provide guidance and benchmarks on quality. In the U.S., the National Association for the Education of Young Children’s (NAEYC) Standards for Professional Preparation are used by professional development programs to support their planning processes. Standards can also provide benchmarks which can support programs in their effort to deliver high quality training. These standards may lay out requirements for the length of programs, qualifications of educators, and facilities, which may then be monitored through accreditation processes.

4. Competences can support continuous quality improvement by enabling professionals, paraprofessionals, and their supervisors, to more effectively assess performance.

By clarifying what members of the early childhood workforce need to know and be able to do in order to perform well in their roles, competences can support professionals and paraprofessionals in their efforts to continuously improve their practice. If competences are defined at a program or systems level or are used to develop self-assessment tools, members of the workforce can refer to them to evaluate their own performance and identify strengths and areas for improvement. In addition, while monitoring by supervisors may vary in terms of its formality, tools based on established competences can help supervisors assess job performance, provide follow-up support, and track progress over time.

5. Competences and standards can guide recruitment processes if aligned with the skills and profiles of the existing and potential future workforce.

Competences for roles can support recruitment processes and other systems planning efforts. Ministries of Health, for example, often do not have a common understanding of the expected tasks and competences required of community health workers (CHWs), which can make it difficult to

the Study of Child Care Employment, Institute for Research on Labor and Employment, University of California at Berkeley.

¹⁰ Institute of Medicine (IOM) and National Research Council (NRC). (2015). *Transforming the Workforce for Children Birth through Age 8: A Unifying Foundation*. Washington, District of Columbia: The National Academies Press.

identify the mix of skills and therefore, the number of individuals in particular roles needed to effectively deliver necessary services.¹¹ In such cases, clearer job descriptions and a careful review of competences could better support broader workforce planning activities. It is also important that competences are aligned with the existing workforce and potential future workforce. Without such alignment, competences and standards may be difficult to implement and could inadvertently force members of the current workforce out of their positions, and undermine other objectives in recruitment, such as ensuring diversity.

6. Few systems, particularly in low and middle-income countries, have registration, certification, and licensing procedures in place, even though these processes can help recognize and professionalize the workforce and support the delivery of quality services.

Few systems have official registration, licensing and certification requirements in place for the early childhood workforce; where these requirements do exist, they vary across contexts. For example, Kosovo requires that all social workers undergo a licensing process, but does not explicitly require a social worker to hold a degree in social work, while Croatia's *Act on the Social Work Activity* (2011) stipulates that in order to be a licensed social worker, one must possess a B.A. or M.A. degree in social work.¹² Where systems have licensing and certification requirements, these processes can support the professionalization of the workforce by creating consistent requirements which reduce the disparity in qualifications among individuals in a particular role. Different levels of licensure or certification may also help to facilitate career advancement.

Conclusion and areas for further research

Competences and standards provide a critical foundation for preparation and ongoing support for members of the early childhood workforce. In addition, they can help policy planning efforts and unleash a professionalizing force by acknowledging the complexity of what members of the early childhood workforce do. Yet competences and standards are not widespread, especially in low and middle-income countries. As countries consider how best to develop and integrate competences and standards in their systems, they may want to consider identifying whether the foundations are in place for developing them, whether competences and standards for other roles within the early childhood workforce at the country, regional, or global levels can be used to guide their development, and how existing systems to monitor the quality of services provided by members of the early childhood workforce and training programs can be improved through their application.

While this study advances existing knowledge on the early childhood workforce by synthesizing relevant policies and approaches to competences and standards from across sectors, regions, and roles, many major knowledge gaps remain. In particular, there is limited research available on the impact of developing and implementing competences and standards in systems, as well as on how to ensure alignment between competences for different roles. Further research is needed to address these topics in order to contribute to dialogue and policy efforts to strengthen support for the early childhood workforce.

¹¹ Frontline Health Workers Coalition. (n.d.) *A Commitment to Community Health Workers: Improving Data for Decision-making*.

¹² Akesson, B. (2016). *The Social Service Workforce as related to Child Protection in Southeast Europe: A Regional Overview*. Budapest: Child Protection Hub for Southeast Europe.

Introduction

Evidence is growing that early childhood development (ECD)¹³ services have a strong, positive impact on children’s development. Research from diverse contexts shows that interventions which promote nurturing care in early environments significantly improve childhood development and later adult outcomes (Britto et al., 2017). Despite increasing knowledge on the benefits of ECD, however, we still do not know as much about one of the most critical parts of ECD programs: the early childhood *workforce*. Research shows that the workforce is one of the most important factors influencing the quality of ECD services. For example, in the early childhood education sector, evidence indicates that personnel’s level of education and participation in training is a better predictor of program quality than other factors such as child-staff ratios or group size (Burchinal et al., 2010).

While we know that the workforce is important, key questions remain unanswered: What do early childhood professionals and paraprofessionals need to know and be able to do in order to perform effectively? How do requisite knowledge and skills vary across contexts? What types of training and support do staff receive? How is the early childhood workforce recruited, monitored, and evaluated?

In an effort to address these questions, through the Early Childhood Workforce Initiative (ECWI) – a multi-stakeholder effort to support and empower those who work directly with young children led by the International Step by Step Association (ISSA) and Results for Development (R4D) – R4D is carrying out a series of *global landscape analyses* to establish the size and scope of the challenges faced by the early childhood workforce, while also highlighting promising practices countries have adopted in response to these challenges. Spanning a range of roles including professionals and paraprofessionals, paid and unpaid workers, and frontline workers and managers, from the education,¹⁴ health and nutrition, social protection and child protection sectors, these analyses aim to provide a comprehensive overview of the current status of the workforce worldwide.

The four themes¹⁵ which will be explored in this series include:

- **Competences and Standards** – Competences and standards ensure that there are agreed requirements and expectations for what early childhood workers should know and be able to do. They also lay the groundwork for the core principles, regulations, guidelines and procedures guiding work with young children and their families.
- **Training and Professional Development** – Since the early childhood workforce is very diverse, including, for example, many volunteers or staff without formal education, training and professional development opportunities support the acquisition of necessary skills and competences.
- **Monitoring and Mentoring** – Creating systems for monitoring, evaluation/assessment, and continuous feedback and coaching are important for ensuring that workers receive information

¹³ The term early childhood development (ECD) is used in this report to refer to services across the education, health and nutrition, and social and child protection sectors. The term early childhood education and care (ECEC) is used to refer to services encompassing early education and care from birth to the transition to primary school.

¹⁴ When referring to the education sector, we are also including the child care field unless otherwise noted.

¹⁵ These themes were identified in collaboration with a group of experts convened by the Early Childhood Workforce Initiative in September 2015.

that they can use to improve their practice on an ongoing basis and for linking members of the workforce to pathways for career advancement.

- **Recognition of the Profession** – Currently, the level of remuneration, working conditions, and status of the early childhood workforce are poor, even relative to primary teachers, nurses, social workers, and other similar professions. Recruitment challenges, high turnover, and low morale compromise the quality of provision. There is a need to explore ways to improve the attractiveness and perception of the profession and promote ways to give voice to practitioners in their daily work and in policy discussions, including through collective action.

It is hoped that a diverse group of stakeholders working in ECD, including policymakers, researchers, program managers, and practitioners can use the findings of these landscape analyses to generate lessons for countries looking for ways to support and strengthen the early childhood workforce, and enhance existing programs, policies, research, and advocacy efforts concerning the early childhood workforce.

This report, the second in this series, addresses the theme of competences and standards.

Roadmap for the Report

The report begins with a description of the early childhood workforce, which is followed by a discussion of what competences and standards are, followed by a rationale for focusing on competences and standards as a key theme. Following the rationale, the study's methodology and limitations are laid out. Next, an overview of findings regarding competences and standards, which outline both the challenges and ways in which countries have used them to support early childhood systems, is presented. The report concludes with questions for reflection as countries consider how to develop and implement competences and standards along with recommendations of areas for further study.

The Early Childhood Workforce

Table 1: Roles within the early childhood workforce

Primary sector	Roles
HEALTH AND NUTRITION ¹⁶	Roles may include: <ul style="list-style-type: none"> • Auxiliary nurses & auxiliary midwives • Community health workers • Home visitors • Nurses & midwives • Medical doctors • Nutritionists • Health educators & trainers • Health service directors, managers, and supervisors
EDUCATION	Roles may include: <ul style="list-style-type: none"> • Child care workers • Early childhood teachers • Primary school teachers • Social pedagogy professionals • Teacher assistants • Teacher coaches • Teacher trainers • Supervisors • Education service directors/managers
SOCIAL AND CHILD PROTECTION	Roles may include: <ul style="list-style-type: none"> • Social service workers • Community child protection officers and workers • Psychologists • Mental health professionals/specialists • Residential care staff • Social service educators & trainers • Community child protection officers and workers • Social service managers

The early childhood workforce is vast and diverse, spanning the health and nutrition, education, and social and child protection sectors. Although members of this workforce may include volunteers, paraprofessionals, and professionals, they all have in common the objective to promote the healthy growth, development, and learning of young children (under age 8) and families. This diverse workforce is supported by a broad ecosystem of actors, including frontline workers who deliver services to young children and families, as well as those who directly train, supervise, and manage these practitioners. While these workers may share common objectives, the specific sectors and settings in which they work, as well as their functions, training, and remuneration can vary

significantly by context. Table 1 provides a snapshot of the various roles within this workforce while the Annex provides a more comprehensive analysis.

While the early childhood workforce includes several roles across sectors, given knowledge gaps and the diversity of data available across regions, not all roles are explicitly addressed in this report, and some sectors receive more attention than others.

¹⁶ Hygiene is an important aspect of health and roles addressing this area are encompassed in the health and nutrition sector.

What are competences and standards?

In this report, *competences* encompass the requirements and expectations for what early childhood professionals and paraprofessionals should know and be able to do. Beyond outlining knowledge and skills that must be acquired to take on a particular role, competences recognize that learning is an ongoing process and that professionals and paraprofessionals must express an “ability...to use and combine his or her knowledge, skills, personal and ethical competences according to the varying requirements posed by a particular context, a situation or a problem” (European Commission, 2005a). In general, there are two types of competences: (i) competence for professionals and paraprofessionals, which outline what a worker in a particular role should know and be able to do; and (ii) competences for what training and professional development programs should impart. We define *standards* as guidelines and regulations which lay out requirements for entry and continuation in professional and paraprofessional roles. In general, there are two types of standards relevant to the early childhood workforce: (i) personnel standards that outline the requirements a worker must meet in order to assume a role (e.g. educational requirements, experience); and (ii) professional standards which outline a code of ethics and commonly accepted procedures while in a particular role.¹⁷

While this report will reference these four distinct types of competences and standards, the primary focus is on competences for professionals and paraprofessionals within the early childhood workforce.

Table 2 below provides examples of each of the above types of competences/standards.

¹⁷ We acknowledge that the terms competences and standards are often used interchangeably. We have chosen to define and use these terms in this way for the sake of clarity in this report.

Table 2: Common Types of Competences and Standards

Type of Competence/Standard	Example	Example of Competence/Standard Statements
Competence for professionals and paraprofessionals	Pennsylvania Core Knowledge Competencies for Early Childhood and School Age Professionals (Office of Child Development and Learning, 2014)	Assessment: The adult in the early childhood and school-age field should be able to interpret information from child assessment data to scaffold learning, recognize students having difficulty, identify student challenges and strengths, and plan appropriate interventions in collaboration with colleagues.
Competence for a training program	National Association for the Education of Young Children Standards for Early Childhood Professional Preparation (US) (NAEYC, 2012)	Using Content Knowledge to Build Meaningful Curriculum: Candidates prepared in early childhood degree programs use their own knowledge and other resources to design, implement, and evaluate meaningful, challenging curriculum that promotes comprehensive developmental and learning outcomes for every young child.
Personnel standard	Kenya Standards for ECD Service Providers (Government of Kenya, 2006)	ECD teachers/caregivers shall be: above 18 years, possess at least a certificate in ECD offered by the Government or other institutions authorized by the government, registered by the Teachers Service Commission, etc.
Professional standard	South Africa Social Work Ethical Standards (South African Council for Social Service Professions, n.d.)	Integrity of the profession: Social workers contribute to the knowledge base of the profession and share with colleagues their knowledge related to practice, research, and ethics. Social workers should seek to contribute to the profession’s literature and to share their knowledge at meetings and conferences.

Although not the focus of this report, there are other types of competences and standards within the early childhood system to which the above relate. For example, service and program standards outline requirements for various program elements, including infrastructure requirements, enrollment criteria, and standards for working with parents and community members.¹⁸ In addition, programs, particularly in the education sector, may develop standards for children’s learning and development across several sub-domains.¹⁹

This report also covers processes such as registration, licensing, certification, recertification, and accreditation, which are related to monitoring and ensuring adherence to competences and standards.

¹⁸ For examples of program standards, please see: Paul, S. (2017). “Quality standards for early childhood services: examples from South and South East Asia” in *Early Childhood Matters*. The Hague: Bernard van Leer Foundation.

¹⁹ For example, Early Learning and Development Standards (ELDS) which UNICEF has supported in a number of countries provide a framework for what young children should know and be able to do. (UNICEF, 2016).

For example, personnel standards may indicate that a worker must register with a workforce body or have a particular license or certification in order to be part of a system. Certification requirements may also be developed based on the particular competences identified as necessary for a specific role. While the exact definition of these processes depends on the specific system referenced, *certification* is generally considered the process by which a system ensures that someone who meets certain academic qualifications is also professionally competent. *Licensing* is very similar to certification but often involves a standardized examination and registration with a monitoring body. *Accreditation* refers to the process by which training institutions are recognized based on meeting quality standards (SEAMEO and UNESCO, 2016). Official *registration* usually refers to the formal listing with the government of an ECD provider employing the workforce; however, in some countries individual members of the early childhood workforce are also required to formally register with the local, regional, and/or national government.

Why focus on competences and standards?

As access to early childhood development programs has grown, challenges remain with respect to ensuring their quality and supporting them at scale. A number of factors contribute to the quality of early childhood programs, but members of the early childhood workforce on which programs rely are critical. In addition, an enabling and protective policy umbrella, as well as standards and guidelines are among several necessary factors contributing to the sustainability of ECD programs (Vargas-Barón, 2013).

Competences and standards have the potential to support the early childhood workforce and ensure the quality of early childhood development programs at scale. They can: 1) increase the relevance of training and professional development opportunities, 2) enhance the quality of monitoring and mentoring opportunities, 3) support professionalization of the workforce, and 4) support workforce planning efforts. In serving these important functions, competences and standards ensure consistency and continuity in serving children and families across sectors and roles.

While there is substantial evidence that training and professional development opportunities have an impact on the quality of services delivered by members of the workforce, we know that the content of these pre- and in-service opportunities matters greatly.²⁰ If training opportunities are closely aligned with what members of the early childhood workforce need to carry out their roles effectively, they have a better chance at improving program quality. To that end, competences for professionals and paraprofessionals, along with competences for training programs can help guide the design and delivery of training and professional development programs. In addition, competences for professionals and paraprofessionals can guide members of the workforce, along with their mentors and supervisors in identifying areas for improvement and ways of addressing them.

Competences and standards also have the potential to elevate the status of personnel who often receive low remuneration in comparison to their peers and sometimes lack incentives to remain in their roles. By defining competence for roles in the workforce and ensuring their alignment to training and professional development and monitoring and mentoring opportunities, and also elaborating personnel and

²⁰ The first report in this series covers the topic of training and professional development. Please see: Mitter, R. & Putcha, V. (2018). *Strengthening and Supporting the Early Childhood Workforce: Training and Professional Development*. Washington, D.C.: Results for Development.

professional standards, there is an implicit recognition of the unique knowledge and skills needed to carry out such roles, generating a professionalizing force in the system.

Competence for roles in the early childhood workforce can also support systems to adequately recruit and deploy personnel. When roles within the workforce are unclear and competences are undeveloped, it is difficult for a system to plan for recruitment and deployment, as competences for roles can clarify what different personnel bring to service delivery and can help answer questions about what roles within a system are needed.

Although there is recognition that competences and standards are important, there have been few efforts to date to systematize the various approaches to developing and implementing them for the early childhood workforce. This study aims to begin filling that gap in order to identify common approaches and challenges. In an effort to understand these diverse approaches, the study seeks to answer the following questions:

- What are competences and standards and how have they been used to strengthen early childhood systems?
- Why are competences and standards important for the early childhood workforce?
- What skills, knowledge, and attitudes are reflected in the competences required of early childhood workers?
- How can competences be defined to align with the broader early childhood system and the current and future vision of the workforce?
- What processes are in place to help ensure that competences and standards are met?

This is the first attempt to review global literature and experiences across early childhood sectors and roles. In identifying shared experiences, challenges, and approaches regarding the early childhood workforce, it is hoped that this study will support efforts to strengthen the development of competences and standards for the early childhood workforce in order to support training and professional development, monitoring and mentoring, and facilitate workforce planning and the professionalization of the workforce.

Methodology

As a first step, the research team reviewed a select number of global studies on the early childhood workforce from across the education, health and nutrition, and social and child protection sectors. A framework was used to organize the data around the four previously identified themes - competences and standards, training and professional development, monitoring and mentoring, and recognition of the profession – and to identify key questions for further exploration in each of the four planned landscape analyses.

Guided by the key questions identified through this initial review, a call for evidence was circulated to early childhood researchers and practitioners to collect the latest research and evidence on the early childhood workforce. In addition, a targeted database search was carried out to identify published and grey literature specific to competences and standards for the early childhood workforce across sectors. Once literature was collected, the team reviewed it to understand the policies surrounding training and professional development, as well as their availability, format, structure, and delivery. Data were then reviewed to identify key themes, which are presented in the findings.

In addition, case studies were prepared to illustrate the specific challenges and approaches to competences and standards highlighted in the findings. Countries and programs were selected in order to reflect diverse sectors, regions, and roles within the early childhood workforce. A desk review was carried out on each of the selected cases.

Study Limitations

This study reviewed literature from countries across all national income levels. However, there is limited evidence from low and middle-income countries due to the absence of competences and standards in these countries and limitations due to language and data availability. As such, at times, there is reliance on data from high-income countries, which may not reflect the experiences of low and middle-income countries.

In addition, although the study reviews roles across sectors in the early childhood workforce, some findings draw more heavily from literature in a particular sector than others. For example, given that many roles in the health and nutrition sector are not specifically or only focused on the early childhood period, there is less representation from this sector.²¹

²¹ For further information on competences and standards in the health and nutrition sector, the *Global Health Workforce Alliance* has developed and curated a number of resources, including, for example, “The promise of competency-based education in the health professions for improving global health” (Gruppen et al, 2012).

Key Findings

- 1. Competences for professionals and paraprofessionals are likely to be in place in systems where there are clearly defined job descriptions. However, where these competences exist, they vary in format and content across roles, sectors, and regions.**

While there have been efforts across several high-income countries to develop competences for professionals and paraprofessionals, there have been fewer efforts in low and middle-income countries. Since clearly defined job descriptions are the foundation on which competences are developed, competences for professionals and paraprofessionals are more likely to be in a system where established job descriptions exist. However, many countries lack clearly job descriptions for members of the early childhood workforce. For example, of 14 countries where job descriptions were requested for a study on the social service workforce in West and Central Africa, only two countries were able to point to existing ones (Canavera, et. al., 2014). Where job descriptions and competences are unavailable, global and regional efforts can be helpful (See Box 1 on the Southeast Asia Guidelines

Box 1: Developing the Southeast Asian Guidelines for Early Childhood Teacher Development and Management

In systems where competences are not articulated, their development can be supported by generic competences developed through global and regional efforts. For example, in 2014, UNESCO and the Southeast Asian Ministers of Education Organization (SEAMEO) launched the “Early Childhood Teacher Development in Southeast Asia” project to generate a more comprehensive understanding of the experiences and challenges faced by ECEC personnel in Southeast Asian countries, including on topics such as educational levels, qualifications, and professional development of early childhood teachers. In order to understand the status of early childhood teachers in individual countries within the region, a questionnaire was circulated to the 11 SEAMEO member countries, and workshops were held among member country representatives. Using data collected from questionnaires along with ideas surfaced during workshops, *Southeast Asian Guidelines for Early Childhood Teacher Development and Management* were developed, which aimed to support relevant Ministry officials across SEAMEO countries to professionalize early childhood teachers and promote better working conditions for them. The Guidelines include a set of competences and also cover the following topics: 1) Qualification, certification and licensing or accreditation, 2) Recruitment to the profession, 3) Pre-service teacher education, 4) Deployment and retention, 5) Continuous professional development, 6) Competencies and professional ethics, 7) Monitoring and quality assurance for performance appraisal, 8) Employment terms and working environments, and 9) Governance. The section on Competencies and Professional Ethics includes a set of competence categories for countries to consider when developing their own. Although the Guidelines provide recommendations for systems in the region on future teacher development and management, they were developed to reflect the practices and approaches already taken in different countries, for example the development of teacher standards in Viet Nam and the National Competency Based Teacher Standards in the Philippines. Although this effort demonstrates the potential for generic competences to support individual countries’ efforts to develop competences for professionals and paraprofessionals, it is important to acknowledge that in order to be effective, such efforts should recognize that there are diverse needs across contexts.

Source: SEAMEO and UNESCO. 2016. “Southeast Asian Guidelines for Early Childhood Teacher Development and Management.” Bangkok: SEAMEO Secretariat and UNESCO Bangkok.

for Teacher Development and Management).

However, where job descriptions are elaborated and competences are in place, there are variations in terms of what types of competences, whether for professionals and paraprofessionals or for training programs, exist. A study of 15 European countries found four scenarios for core practitioners

in education and care roles, where there were either: 1) nationally/regionally valid competence profiles for both the profession and professional education/training, 2) nationally/regionally valid competence profiles only for the profession, 3) nationally/regionally valid competence profiles for professional education only, and 4) no nationally/regionally valid competence profiles for either the profession or professional education/training (Urban, et.al, 2011).

In addition, where competences for professionals and paraprofessionals do exist, they are referenced in different ways, are varied in content and format, and articulated in different policies and strategies. For instance, a study in EU countries found that English practitioners refer to competences as standards while Danish and German practitioners refer to them as processes (Cameron, 2007). Similarly, a study of 15 European countries found that required competences may be written in terms of tasks, standards, outcomes, concepts, principles, attitudes, skills and/or knowledge, or functions (Urban, et.al., 2011). Competences may also be defined at various levels in order to account for different levels of fluency within a particular role, and done in a number of ways including, for example, according to stage of career, job category, or education level. Within the U.S., the state of Illinois' *Early Childhood Career Lattice* only includes one level of competence, whereas, Nevada's *Core Knowledge Areas and Core Competencies for Early Care and Education Professionals* (2007) defines competences at three levels: beginning, intermediate, and advanced, and Kentucky's *Early Childhood Core Content* defines competences for five levels (Initial level, Child Development Associate Credential, Associate Degree, Bachelor's Degree, and Above Bachelor's Degree) (Center for the Study of Child Care Employment, 2008). Due to the variation in format, it is often difficult to directly compare the content of competences across roles and contexts.

In addition, competences may not exist for all roles within the early childhood system. For example, with respect to early childhood care and education roles, a study of European countries found that they are more commonly articulated for core practitioners rather than for assistants. Slovenia, the Netherlands, and France are the only European countries that have professional and training competences for assistants (Urban, et. al., 2011).

2. There is no common core of competences for the early childhood workforce although competences commonly emphasize the importance of domains such as monitoring and evaluation, and interpersonal and communication skills.

Although there are a number of common domains that are emphasized, competences for roles vary across roles, sectors, and contexts. Table 3 outlines examples of competence domains for roles across the education, health and nutrition, and social and child protection sectors using selected regional and global competences for professionals and paraprofessionals. Across the competences for roles in the education and social and child protections sectors, monitoring and evaluation skills, and interpersonal and communication skills are emphasized.

Table 3: Domains Captured in Competence Profiles Across Sectors and Roles

Sector	Workforce Role	Competence Domains	Geographic Scope	Source
Social and Child Protection	Paraprofessional Social Service Workers	<ol style="list-style-type: none"> 1. Communication skills 2. Direct work with children, youth and families 3. Applies knowledge related to client needs 4. Community work 5. Collaboration skills 6. Organizational leadership 7. Monitoring and evaluation 8. Developing self and others 	Global	Global Social Service Workforce Alliance Interest Group on Para Professionals. (2015). <i>Para Professionals in the Social Service Workforce: Guiding Principles, Functions, and Competencies</i> .
Education	Early Childhood Teachers	<ol style="list-style-type: none"> 1. Subject Knowledge Competences 2. Pedagogical Competences 3. Assessment and Evaluation Competences 4. Language and Cultural Competences 5. Competences in using information and communication technologies 6. Ability to deal with emergencies 7. Social competencies, including inter-personal and communication skills 	Southeast Asia	SEAMEO and UNESCO. 2016. "Southeast Asian Guidelines for Early Childhood Teacher Development and Management." Bangkok: SEAMEO Secretariat and UNESCO Bangkok.
Education	Educators	<ol style="list-style-type: none"> 1. Interactions 2. Family and Community 3. Inclusion, Diversity, and Values of Democracy 4. Assessment and Planning 5. Teaching Strategies 6. Learning Environment 7. Professional Development 	Central and Eastern Europe	International Step by Step Association. (2010). <i>Competent Educators of the 21st Century: Principles of Quality Pedagogy</i> . Leiden, Netherlands: ISSA.
Health and Nutrition	Community Health Workers	<ol style="list-style-type: none"> 1. Working with the community on health promotion, education and counselling 2. Attitudes for promoting and providing sexual, reproductive, maternal, newborn, child and adolescent health (SR/MNCAH) care 3. Effective management to allow the efficient promotion and provision of quality SR/MNCAH care 	Global	WHO and UNFPA. (2015). <i>Strengthening the capacity of community health workers to deliver care for sexual, reproductive, maternal, newborn, child and adolescent health</i> .

These trends are apparent within sectors as well. For example, a review of competences for early childhood educators across 11 states in the U.S. found that although competences fall under eight broad domains, there is significant variation between states in terms of which domains are included and how these domains are referenced (Center for the Study of Child Care Employment, 2008). Similarly, a review of four national competence statements for the workforce supporting children from birth to age 8 in the U.S. found broad consensus in expectations for professionals in a number of areas, including in their ability to support children’s holistic development and engage with them in developmentally appropriate ways. However, there were differences in terms of the types of assessment – observational, formative, summative - that were emphasized as important for practitioners to use in their day-to-day work, as well as how practitioners should work with families. While all of the statements emphasized the importance of working with families, there were differences in how working with families was framed. Three statements emphasized the need for practitioners to help families access other services to support children’s development and well-being while one emphasized engagement with families to specifically support children’s learning and development (IOM and NRC, 2015).

3. Competences and standards can enhance the relevance of training and professional development programs to the needs of personnel.

When competences are developed for particular roles, they can provide an important link to training and professional development programs and their curricula (See Box 2 on Pennsylvania’s experience developing competences for early childhood professionals). For example, competences for roles can be used in developing and delivering competence-based training which helps learners focus on specific areas based on their individual needs and the knowledge and skills identified as being important for their job performance.

Several countries have sought to align competences for roles with competences for training programs. For example, in Flanders, the northern part of Belgium, colleges that educate pre-primary and infant-toddler professionals develop competences for training which are required to align with competence requirements for relevant roles. This supports the facilitation of exchanges between training institutions and pre-schools as well as support for graduates in their transition to employment (Urban, et.al., 2011). Moreover, such competences for training programs can provide guidance and benchmarks on quality. For example, in the U.S., the National Association for the Education of Young Children’s (NAEYC) Standards for Professional Preparation are used by professional development programs to support their planning processes. A study of higher education ECE programs in the U.S. found that 77% of programs at the associate and baccalaureate levels use NAEYC standards, which define high-quality preparation in terms of the competences that well-prepared graduates should possess, for guidance in improving or maintaining the quality of programs (Hyson, et.al. 2009).

Box 2: Pennsylvania’s Core Knowledge Competences and Big Ideas Framework

In Pennsylvania, a Career Development Committee, which represented stakeholders from across the state, including institutions of higher learning, Head Start, child care centers, family child care providers, school-age programs, special education, the Department of Education, and advocates came together to develop the Core Body of Knowledge document (which later became known as the Core Knowledge Competences document) which laid out core competences for early childhood and school-age personnel. Although the Core Knowledge Competences (CKCs) have been revised over the years, today they are encompassed in eight knowledge areas - child growth and development, curriculum and learning experiences, families, schools, and community collaboration and partnerships, assessment, communication, professionalism and leadership, health, safety, and nutrition, and program organization and administration – and are organized in three levels of understanding. The document also includes specialized competences for program administrators and directors.

In order to support the use and operationalization of the CKC, the Big Ideas Framework (formerly known as the Professional Development Record) was also developed. As a companion to the CKC document, the Big Ideas Framework links professional development planning to competences for early childhood professionals. Each “big idea” in the framework synthesizes competences articulated under a particular knowledge area in the CKC document and is accompanied by several essential questions to help guide staff and their supervisors to assess competence and identify areas for focused professional development. Once practitioners answer the essential questions, they are guided in creating an Individual Professional Development Plan (IPDP) which provides space for goals related to the CKCs, required professional development, and other professional development such as college courses.

In order to further support practitioners in accessing professional development opportunities, a professional development registry was developed and all opportunities included in it are coded to reflect the CKCs to which they are connected. Offline support has also been delivered to help practitioners navigate the registry and other aspects of professional development – for example, practitioners are encouraged to call hotlines if they have questions or want further information about professional development opportunities, and professional development events have been hosted to increase knowledge and awareness of the CKCs.

The CKCs, Big Ideas Framework, and professional development registry are all integrated in the Pennsylvania Keys program. This program works with Pennsylvania's Office of Child Development and Early Learning (OCDEL) to provide state and regional leadership in the development of an integrated and coordinated system of program quality improvements and professional development supports for early childhood education. In addition, the CKCs are linked to the Keystone STARS (Standards, Training/Professional Development, Assistance, Resources, and Support) Performance Standards for preschool and childcare programs.

Pennsylvania’s experience demonstrates the importance of connecting competences to professional development planning and opportunities. State officials involved in the initial process described how the operationalizing of the CKCs through the Big Ideas Framework and the professional development registry were critical to gaining “buy-in” of practitioners who were consequently able to see themselves as professionals.

Sources: Center for the Study of Child Care Employment. (2008). *Early Childhood Educator Competencies: A Literature Review of Current Best Practices, and a Public Input Process on Next Steps for California*. Berkeley, CA: Center for the Study of Child Care Employment, Institute for Research on Labor and Employment, University of California at Berkeley.; Office of Child Development and Learning. (2014). *Pennsylvania Big Ideas Framework and Professional Development Plan for Early Childhood & School-Age Professionals*. Pennsylvania Department of Education and Department of Public Welfare.; Office of Child Development and Learning. (2014). *Pennsylvania Core Knowledge Competences for Early Childhood & School-Age Professionals*. Pennsylvania Department of Education and Department of Public Welfare.; Office of Child Development and Learning. (2012). *Pennsylvania Professional Development Framework for Early Care and Education* Pennsylvania Department of Education and Department of Public Welfare.; Commonwealth of Pennsylvania’s Governor’s Office. (2015). *Race to the Top Early Learning Challenge Grant 2014 Annual Performance Report*.; Pennsylvania Early Learning Keys to Quality Website - www.pakeys.org

Standards can also provide benchmarks which can support programs in their effort to deliver high quality training (See Box 3 on Global Standards for Education and Training of Social Work Profession). These standards may lay out requirements for the length of programs, qualifications of educators, and facilities which may then be monitored through accreditation processes. For example, in Malaysia, the Malaysian Qualification Agency has implemented an accreditation policy for diploma, pre-service and postgraduate programs for early childhood care and education personnel (SEAMEO and UNESCO, 2016).

Box 3: Global Standards for Education and Training of Social Work Profession

In 2000, the Global Minimum Qualifying Standards Committee was formally established as a joint initiative of the International Association of Schools of Social Work (IASSW) and the International Federation of Social Workers (IFSW). This Committee set out to develop global standards for the education and training of the social work profession for a number of purposes including to protect the end users of social work, benchmark national standards against international standards, and enable IASSW and IFSW to support training institutions lacking resources to meet such guidelines.

As the Committee considered the development of international standards to be a complex task that required efforts to ensure the relevance to countries across regions and income levels, there were several steps taken to ensure representation from different regions of the world on the Committee and facilitate as much consultation and inclusion in the process as possible.

The global standards provide guidance to training institutions in the following areas:

- core purpose/mission statement
- program objectives/outcomes
- program curricula including for field education
- student recruitment and advising
- structure, administration, governance, and resources
- cultural and ethnic diversity and gender inclusiveness,
- values and ethics

In order to prevent the guidelines from being overly prescriptive in nature, the standards do not include specific guidelines, such as the number of years of training a social work student should receive or required core competences. Instead, the standards outline the ideal situation for social work education and training in broader terms. For example, in the area of field education, the standards outline the need for “making available, to fieldwork instructors or supervisors, a field instruction manual that details its fieldwork standards, procedures, assessment standards/criteria and expectations.” In providing general guidance to institutions, the global standards provide institutions with key information to consider in their planning efforts but allow institutions the opportunity to contextualize the guidelines based on their own needs and resource availability. Although there have been a number of debates surrounding these global standards and how they risk imposing Western modes of social work, there have been some reported successes, including that the global standards document has supported some countries’ efforts to advocate for greater funding to their institutions.

Source: Global Standards for the Training and Education of the Social Work Profession (http://cdn.ifsw.org/assets/ifsw_65044-3.pdf)

4. Competences can support continuous quality improvement by enabling professionals, paraprofessionals, and their supervisors, to more effectively assess performance.

By clarifying what members of the early childhood workforce need to know and be able to do in order to perform well in their roles, competences can support professionals and paraprofessionals in their efforts to continuously improve their practice. If competences are defined at a program or systems level or are used to develop self-assessment tools, members of the workforce can refer to such competences to evaluate their own performance and identify strengths and areas for improvement. For example, alongside the International Step by Step Association's (ISSA)²² Pedagogical Standards, which were developed among members of the ISSA network and provide a framework for professional development and quality assessment in the field of early childhood education, several other tools were developed, including a standards observation form for teacher self-assessment. These tools were disseminated to NGOs in the ISSA network and a study on their impact found that they played an important role in supporting self-evaluation among practitioners as an input into their individual professional development (ISSA, 2010).

In addition, while monitoring by supervisors may be performed in a number of ways that can be both formal and informal in nature, tools based on established competences can help supervisors assess job performance, provide follow-up support, and track progress over time (See Box 4 on New Zealand's experience). For example, in the health and nutrition sector, WHO packages for community health workers on "Caring for the Newborn at Home," "Caring for the Child's Healthy Growth and Development," and "Caring for the Sick Child," as well as the UNICEF/WHO "Care for Child Development" package, include monitoring checklists for supervisors supporting providers which are based on the competences required to deliver support for children and families outlined in these packages (WHO, 2015; UNICEF and WHO, 2012).

²² ISSA is a regional network of 70 members from across Europe and Central Asia and includes NGOs, schools and kindergartens, and higher education and academic institutions, which facilitates a learning community where members share their knowledge and work in order to develop best practices in early childhood development.

Box 4: Using Competences to Support Induction and Mentoring in New Zealand

In New Zealand, the Ministry of Education plays an important role in setting policies, regulating quality standards and providing quality assurance of ECE services. In 2000, the government established a 12-year initiative (2000-2012) to develop a range of qualification courses for ECE teachers, benchmark qualifications for the diploma level, and set quality standards for teacher education courses and professional standards for teacher registration and certification. The New Zealand Qualification Authority and the New Zealand Teachers Council were formed to support the development of teacher education and accreditation processes, along with certification and registration processes.

The initiative originally set a goal to have all ECE teachers fully qualified by 2012; however, this goal was adjusted to 80%. In order to be qualified, teachers were required to complete a diploma in teaching. While at least one year of study is required, teachers can request that prior education and experience be counted toward the diploma requirements, which can shorten the length of study. Once teachers are qualified, they must register with the Teacher's Council to receive a provisional practicing certificate which lasts for three years. In order to receive a full practicing certificate, a teacher is required to participate in an induction and mentoring program supported by a fully certified mentor teacher for at least two years. In this induction and mentoring program, mentors are encouraged to use practicing teacher criteria or quality standards for teaching in order to provide feedback and support to mentees. Practicing teacher criteria are organized in two broad domains – professional relationships and values and professional knowledge in practice - and include key indicators to help assess whether a teacher meets particular criteria. Once teachers meet these criteria, they are eligible to apply for a full practicing teacher certificate that must be renewed every three years. Criteria for recertification include displaying good character, completing satisfactory professional development and recent teaching service, and having been assessed against practicing teacher criteria.

A survey of provisionally registered teachers and their mentees found frequent use of the practicing teacher criteria in induction and mentoring, with nearly 93% of mentors noting use of the criteria in assessing progress of mentees. However, provisionally registered teachers have noted that it is time consuming to provide evidence of competence according to the criteria which detracts from teaching time. This experience suggests that although competences are useful in supporting induction and mentoring of teachers, more support may be needed for teachers to find easier ways to integrate their use in day-to-day practice.

Source: Taguma, M., Litjens, I., & Makowiecki, K. (2012). *Quality Matters in Early Childhood Education and Care: New Zealand*. Paris: OECD.; Ministry of Education's website on Working in ECE - <https://education.govt.nz/early-childhood/teaching-and-learning/working-in-ece/>; NZ Teacher Council; Study on Use of Practicing Teacher Criteria

5. Competences and standards can guide recruitment processes if aligned with the skills and profiles of the existing and potential future workforce.

Competences for particular roles can support recruitment processes and other systems planning efforts. For example, in the health and nutrition sector, Ministries of Health often do not have a common understanding of the expected tasks and competences required of community health workers (CHWs), which can make it difficult to identify the mix of skills and therefore the number of individuals in particular roles needed to effectively deliver services (Frontline Health Workers Coalition, n.d.). Therefore, in such cases, clearer job descriptions and a careful review of competences could better support broader workforce planning activities.

However, it is important for competence profiles and qualification requirements to be aligned with the existing workforce and the potential future workforce, otherwise they may be difficult to implement. (See Box 5 on the competences for facilitators acting as home visitors under the Cunas Más program in Peru). In the U.S., there has been debate around whether or not early childhood

educators should be required to have a bachelor's degree, with the argument for early childhood educators to have bachelor's degrees elevated by a recent report (IOM and NRC, 2015). Such a change would substantially alter the existing workforce, as in 2012, only 45% of teachers and caregivers working with children ages 3-5 in center-based early childhood settings had a bachelor's degree (NSECE Project Team, 2013). This change would have many implications, including on the required number of training institutions and faculty at the four-year bachelor's level. For example, it was estimated that in 2001, in order to ensure that all current early childhood educators had a bachelor's degree, the number of faculty would need to be increased by 76% to meet the demand for training (Early & Winton, 2001).

Box 5: Competences for Home Visitors in Peru

In Peru, facilitators or *facilitadoras* provide home visiting support to families in primarily rural communities through the Cuna Más program. Facilitators are volunteers nominated by their communities to work with participating families.

Program documents and training plans identify facilitators' expected competences. These competences are outlined across several functional categories which are further detailed in terms of the specific tasks required of the facilitators. For example, facilitators are expected to possess competences in the areas of planning and organization, with specific competences related to organizing and planning for home visits and related activities, and responding to the needs of children in an appropriate way. The table below describes the functional and specific competences expected of facilitators.

Functional	Specific
Planning and organization	Organize and plan for home visits and related activities, responding to the needs of the children in an appropriate way
Empowerment (ability to promote the development of others' skills, making decisions and solving problems with assertiveness and creativity)	Promote learning among pregnant women and families with young children (around early care and education practices) via the program curriculum, demonstrating initiative, creativity, and responsibility
Teamwork/cooperation (leading groups and being able to achieve expected results as a group in a respectful environment)	Work together with other facilitators to plan for home visits/activities, respecting the role of their supervisor
Observation	Observe/remain alert to be able to identify risks or situations that could disrupt learning/development

In principle, these competences are used during interviews and exams in the selection process to identify candidates from the community who can serve as facilitators. These competences are also used in determining the training and support facilitators need. For example, supervisors of facilitators often role-play certain activities that need to be carried out during home visits so that facilitators can understand how to support families and promote learning. These competences are also used to support bimonthly planning meetings among groups of facilitators from the community, who along with their supervisor, discuss progress with their families thus far, what activities they have been carrying out, and plans for upcoming visits.

However, while competences have been outlined to support recruitment, training and supervision processes, not all communities have a large population of candidates from which to identify potential facilitators, creating challenges for the integration of competences. In some cases, facilitators are identified and selected simply because they meet the minimum requirements for entering into the role which are having completed primary education, being over the age of 21, and being a mother. The Peru experience suggests that it is important to set realistic competences and to address other barriers to recruitment (e.g., compensation, status, workload).

Sources: Josephson, K., Guerrero, G., and Coddington, C. (2017). *Supporting the Early Childhood Workforce at Scale: The Cuna Más home visiting program in Peru*. Washington, D.C.: Results for Development.; PNCM. (2015a). *Manual para la Selección de Facilitadoras/es del Servicio de Acompañamiento a Familias*. Lima: Ministerio de Desarrollo e Inclusión Social.; PNCM. (2015b). *Plan Operativo Institucional (POI) 2016 (Reformulación): Resumen Ejecutivo – Programa Nacional Cuna Mas*. Lima: Ministerio de Desarrollo e Inclusión Social.; PNCM. (2013c). *Acompañamiento a Familias: Guía para el facilitador y la facilitadora*. Lima: Ministerio de Desarrollo e Inclusión Social.

At the same time, if standards which lay out qualification requirements are out of line with the existing workforce, they can force members of the current workforce out of their positions, and undermine other objectives in recruitment, such as ensuring diversity. For example, in the U.S., many have voiced concerns around recommendations to require early childhood educators to have bachelor's degrees, suggesting that such requirements could reduce the diversity of the workforce, which is important for meeting the needs of children from culturally and linguistically diverse backgrounds (Chang, 2006).

Furthermore, it has been argued that qualifications may be costly to attain and may not serve to professionalize the workforce, particularly if they are not accompanied by simultaneous increases in pay (McCarthy, 2017)

Therefore, it is important to phase in any requirements which could impact current members of the workforce and identify ways to recognize and incorporate past education and work experience into new requirements. Various systems have established career ladders and systems for allowing personnel to take a certain number of years to achieve required training levels, thereby acquiring paraprofessionals to become professionals. For example, in Australia, where new national standards were being enforced, previously unqualified early childhood and care workers were not automatically ineligible for their current roles, but were required to be working toward a Certificate III in Children's Services (or other equivalent qualification). In addition, provisions were made for the recognition of prior learning (RPL), which involves using a student's existing skills and knowledge as credit towards a qualification. In order to support efforts to recognize prior learning in a consistent way, RPL assessment tools were developed and assessors trained in their application (Productivity Commission, 2011). Other systems may also provide scholarships, improved salary scales or other incentives to personnel requiring additional training.

6. Few systems, particularly in low and middle-income countries, have registration, certification, or licensing procedures in place, even though these processes can help recognize and professionalize the workforce and support the delivery of quality services.

Few systems have official registration, licensing and certification requirements in place for the early childhood workforce; where these requirements do exist, they are varied in nature. For example, a regional study of the social service workforce in Southeast Europe found diversity in the existence and stringency of licensing policies for the child protection workforce. While Bosnia and Herzegovina has no laws regulating the licensing of social service workers, Kosovo requires all social workers to undergo a licensing process, but does not require a social worker to hold a degree in social work. On the other hand, Croatia's *Act on the Social Work Activity* (2011) goes further and stipulates that in order to be a licensed social worker, one must possess a B.A. or M.A. degree in social work, be a member of the Chamber of Social Workers, pass a national exam, possess Croatian citizenship and be proficient in the Croatian language (Akesson, 2016).

Where systems have such requirements in place, regulatory bodies support their management. For example, in Indonesia, the Indonesian Association of Professional Social Workers along with the Ministry of Social Affairs, Indonesian Social Work Education Association, and the National Council of Social Welfare, joined together to establish a social work certification body and exam for social workers which built on a code of conduct, standard competences, and a national curriculum (GSSWA, 2015). Similarly, in Southeast Asia, many countries have dedicated licensing bodies in early childhood education and care, as is the case in Singapore, where the Early Childhood Development Agency oversees all aspects of children's development for children below the age of six and in the Philippines, the Professional Regulation Commission oversees the administration of the Licensure Examination for teachers (SEAMEO and UNESCO, 2016). However, the existence of such bodies is not widespread; for example, in the area of child protection, a study found that of 15 countries reviewed, only 3 had

social work registration bodies in place (GSSWA, 2015). There is, however, variation in whether such bodies exist across sectors and regions.

These processes can support the professionalization of the workforce by creating consistent requirements which reduce the diversity in qualifications among individuals in a particular role (See Box 6 on the experience of Child and Youth Care Workers in South Africa). In addition, these processes

Box 6: Regulating Child and Youth Care Workers in South Africa

Due to the consequences of poverty, poor health, and the HIV/AIDS epidemic, 16.9% of children ages 0 to 18 in South Africa were orphans in 2012. Children who are orphans are more likely to have to take responsibility for taking care of other children in their families and face difficulties caring for themselves and others without adult support. In response to these challenges and the lack of support services in rural areas, Child and Youth Care Workers (CYCWs), who traditionally worked in residential care settings, have seen an expansion in their roles in South Africa to support orphans and vulnerable children.

However, as CYCWs' roles have expanded, they have faced a number of challenges. A study found that due to a lack of clarity and understanding of their role in communities where they work, many CYCWs have found themselves at odds with other stakeholders with whom they interact. CYCWs' work and success relies on working with other personnel, including social workers, doctors, nurses, psychologists, and teachers. However, not having a clear understanding of what CYCWs do, other personnel with whom CYCWs work might not share information that CYCWs need, including for example, psychological assessments. The lack of clarity in the CYCW role has also created unrealistic expectations around what CYCWs can do, leading to frustration when they are unable to meet their clients' expectations. In addition to role ambiguity, lack of consistent job requirements has also contributed to the challenges faced by CYCWs. CYCWs come from diverse backgrounds both professionally and educationally, and child and youth care programs have used different criteria in identifying, recruiting, and deploying CYCWs. Some CYCWs have felt that this diversity in background and experience contributed to low status, as those with higher qualifications are equated with those who have much more limited training and experience.

However, in 2014, regulations were put forth by the government of South Africa to address some of these challenges around lack of recognition and low status by requiring CYCWs to register with the South African Council for Social Service Professions (SACSSP). Recognizing the diversity among CYCWs, the regulations laid out three categories - learners, auxiliaries, and professionals – and corresponding requirements at each level. For example, professional CYCWs are required to have a bachelor's degree while auxiliary CYCWs are required to attain the Further Education and Training Certificate (FETC). As these regulations have laid out training requirements, they have increased demand and participation in training programs offering the FETC. A recent study which sought to understand the experiences of CYCWs who were enrolled in such training programs found that CYCWs felt more empowered and knowledgeable after entering them. However, they were challenged by language constraints (many programs are offered in English although that is not the native language of many participants), as well as the time off and funding required to participate in them. In addition, many CYCWs who have low literacy levels experienced difficulty with the training programs. Although the experience of CYCWs in South Africa reflects how important official recognition within a system can be for supporting early childhood workers, it suggests that putting in place such requirements and processes is complex and requires attention to a number of factors, including access, quality, and relevance of corresponding training programs.

Sources: Website of the South African Council on Social Service Professionals <https://www.sacssp.co.za/>; Molepo, L., Delpont, C. (2015). "Professional Challenges Experienced by Child and Youth Care Workers in South Africa." *Children and Youth Services Review*. Vol 56, pp. 149-160.; Western Cape Street Children's Forum. (2015). *Training Challenges for Child and Youth Care Workers in the Western Cape*.; Jamieson, I. (2013). *Child and Youth Care Workers in South Africa: A Technical Brief*. Washington, D.C.: USAID.

may facilitate career advancement through identifying different levels of licensure or certification. For example, in Romania, the *Social Work Law, Licensure and Accountability, and Code of Ethics: The Social Work Law (466/2004)* created four levels of licensure to designate career status within the social work

profession, which include the following categories: debutante, practicum, specialist, and principal social workers. The categories of licensure provide a career path, allowing a social worker to hold different roles within the workforce with increased levels of experience. For example, only someone with five years of experience and holding the status of principal social worker can serve as a trainer (USAID, 2008). Also, licensure, certification and recertification requirements can incentivize members of the workforce to participate in professional development opportunities and thus support career advancement (Global Health Workforce Alliance, 2010).

While these processes can support professionalization and career advancement, they can be difficult to implement and monitor for roles where there is limited formal training and where systems rely on a non-formal paraprofessional workforce. For example, in Zimbabwe, the Council of Social Workers is challenged by a lack of sufficient resources to fully enforce requirements and monitor the workforce, particularly considering the vast number of paraprofessionals who are employed (McCaffery and Collins, 2013). In addition, if these processes are initiated without simultaneously increasing pay or other incentives, they may not be effective in professionalizing the workforce (McCarthy, 2017).

Conclusion and questions for reflection

Competences and standards provide an important foundation for training and professional development for members of the early childhood workforce, and also codify expectations that can support monitoring and mentoring efforts. In addition, they can help policy planning efforts and generate a professionalizing force by acknowledging the complexity of what members of the early childhood workforce do. Yet, competences and standards are not widespread, especially in low and middle-income countries. While this report highlights some examples from which others can learn as they seek to develop and implement competences and standards, this is an emerging area of focus for the early childhood workforce, and experience is limited.

As countries consider how best to develop and integrate competences and standards in their systems, a number of questions might guide this process, including the following:

- Are there appropriate competences and standards across sectors and within professions? Are they aligned with the needs of the current and future workforce?
- Where there are gaps, what are the reasons and how do major stakeholders perceive them? In addition, are the foundations in place for developing such competences and standards? For example, are there job descriptions for relevant roles within the early childhood workforce and are they being used to inform recruitment?
- Are there examples of competences and standards for other roles within the early childhood workforce which practitioners and policymakers can leverage to develop their own? Are there opportunities to learn from the experience of other countries or regions?
- Is there a need for a core set of competences for early childhood workers across roles and sectors? Which are the most critical domains to be covered?
- Where there are competences and standards, are they being employed to support monitoring and mentoring and spur overall quality improvement?

Areas for further research

This study advances existing knowledge on the early childhood workforce by synthesizing for the first time relevant policies and approaches to competences and standards from across sectors, regions, and roles. Yet many major knowledge gaps remain. There is limited evidence from low and middle-income countries, and since competences and standards are defined in various ways across countries, it is difficult to make comparisons across contexts. Also, given that many roles in the health and nutrition sector are not specifically or only focused on the early childhood period, there is less specific knowledge from this sector. In addition, there is limited research available on the impact of developing and implementing competences and standards in systems which could provide valuable lessons for other countries, as well as how to ensure alignment between competences for different roles, including those that are interdisciplinary, as well as between traditional and emergent roles. Further research should address these topics in order to contribute to dialogue and policy efforts to strengthen support for the early childhood workforce.

References

- Akesson, B. (2016). *The social service workforce as related to child protection in south-east Europe: A regional overview*, Child Protection Hub.
- Better Care Network and Global Social Service Workforce Alliance. (2014). *Working Paper on the Role of Social Service Workforce Development in Care Reform*. Washington, DC: IntraHealth International.
- Britto, P., et al. (2016). "Nurturing care: promoting early childhood development." *The Lancet*, 389 (10064), 91-102.
- Bunkers, K., Bess, A., Collins, A., McCaffery, J., & Mendenhall, M. (2014). *The Composition of the Social Service Workforce in HIV/AIDS-Affected Contexts*. CapacityPlus & USAID.
- Burchinal, M. R., Cryer, D., Clifford, R. M., & Howes, C. (2002). "Caregiver training and classroom quality in child care centers." *Applied Development Science*, 6(1), 2-11
- Burchinal, M., Howes, C., & Kontos, S. (2002). "Structural predictors of child care quality in child care homes." *Early Childhood Research Quarterly*, 17(1) 87-105.
- Cameron, C. (2007). *New Ways of Educating: Pedagogy and Children's Services*. Thomas Coram Research Unit, Institute of Education University of London.
- Canavera, M., Akesson, B., & Landis, D. (2014). *Social Service Workforce Training in the West and Central Africa region*. Conducted for UNICEF by the CPC Learning Network, UNICEF & CPC Learning Network.
- Center for the Study of Child Care Employment. (2008). *Early Childhood Educator Competencies: A Literature Review of Current Best Practices, and a Public Input Process on Next Steps for California*. Berkeley, CA: Center for the Study of Child Care Employment, Institute for Research on Labor and Employment, University of California at Berkeley.
- Chang, H. (2006). *Getting ready for quality: The critical importance of developing and supporting a skilled, ethnically and linguistically diverse early childhood workforce*. Oakland, CA: California Tomorrow.
- Commonwealth of Pennsylvania's Governor's Office. (2015). *Race to the Top Early Learning Challenge Grant 2014 Annual Performance Report*.
- Davis, R. (2009). *Human Capacity Within Child Welfare Systems: The Social Work Workforce in Africa*. Washington, DC: USAID.
- Denboba, A., Sayre, R., Wodon, Q., Elder, L., Rawlings, L., & Lombardi, J. (2014). *Stepping up Early Childhood Development: Investing in Young Children for High Returns*.

Early, D. & Winton, P. (2001). "Preparing the Workforce: Early Childhood Teacher Preparation at 2- and 4- year Institutions of Higher Education." *Early Childhood Research Quarterly*. Volume 16, Issue 3, pp. 285-306.

Economic Policy Institute. (2005). *Losing Ground in Early Childhood Education: Declining Workforce Qualifications in an Expanding Industry, 1979-2004*.

European Commission (2005a). Towards a European Qualifications Framework for lifelong learning. Commission Staff Working Paper. Retrieved 28/01/2011. from http://ec.europa.eu/education/policies/2010/doc/consultation_eqf_en.pdf

European Commission/EACEA/Eurydice/Eurostat. (2014). *Key Data on Early Childhood Education and Care in Europe: 2014 Edition*. Luxembourg: Publications Office of the European Union.

Frontline Health Workers Coalition. (n.d.) *A Commitment to Community Health Workers: Improving Data for Decision-making*.

Global Health Workforce Alliance. (2010). *Global Experience of Community Health Workers for Delivery of Health Related Millennium Development Goals: A Systematic Review, Country Case Studies, and Recommendations for Integration into National Health Systems*.

Global Social Service Workforce Alliance (GSSWA). (2015). *The state of the social service workforce 2015 report: A multi-country review*. Washington, D.C.: GSSWA.

Global Social Service Workforce Alliance Interest Group on Para Professionals. (2015). *Para Professionals in the Social Service Workforce: Guiding Principles, Functions, and Competencies*. Washington, D.C.: GSSWA.

Global Standards for the Training and Education of the Social Work Profession (http://cdn.ifsw.org/assets/ifsw_65044-3.pdf)

Government of Kenya. 2006. *Early Childhood Development Service Standard Guidelines for Kenya*. Nairobi: Government of Kenya.

Gruppen, L., Mangrulkar, R., & Kolars, J. (2012). "The promise of competency-based education in the health professions for improving global health." *Human Resources for Health* vol. 10:43.

Hyson, M., Tomlinson, H., & Morris, C. (2009). "Quality Improvement in Early Childhood Teacher Education: Faculty Perspectives and Recommendations for the Future." *Early Childhood Research and Practice, Vol 11, No. 1*.

Institute of Medicine (IOM) and National Research Council (NRC). (2015). *Transforming the Workforce for Children Birth through Age 8: A Unifying Foundation*. Washington, District of Columbia: The National Academies Press.

Institute of Medicine & National Research Council. (2012). *The Early Childhood Care and Education Workforce: Challenges and Opportunities: A Workshop Report*. Washington, DC: The National Academies Press.

- International Labour Organization. (2012). *International Standard Classification of Occupations: Structure, group definitions and correspondence tables. ISCO-08/Volume I*. Geneva: ILO.
- International Step by Step Association. (2010). *Competent Educators of the 21st Century: Principles of Quality Pedagogy*. Leiden, Netherlands: ISSA.
- International Step by Step Association (ISSA). (2010). *Study on the Implementation of the ISSA Pedagogical Standards and Their Impact on ECDE Policies and Practices in the Region of ISSA's Network and Beyond (2001-2008)*. Leiden: ISSA.
- Isner, T., et al. (2011). *Coaching in Early Care and Education Programs and Quality Rating and Improvement Systems (QRIS): Identifying Promising Features*. Washington, DC: Child Trends.
- Jamieson, I. (2013). *Child and Youth Care Workers in South Africa: A Technical Brief*. Washington, D.C.: USAID.
- Josephson, K., Guerrero, G., and Coddington, C. (2017). *Supporting the Early Childhood Workforce at Scale: The Cuna Más home visiting program in Peru*. Washington, D.C.: Results for Development.
- Korfmacher, J. & Hilado, A. (2008). *The Competent Early Childhood Mental Health Specialist* (Research Brief). Chicago: Herr Research Center for Children and Social Policy at Erikson Institute.
- McCaffery, J. & Collins, A. (2013). Under recognized cadres of HRH in Africa: *Professionalizing the social service workforce (DRAFT)*, USAID.
- McCarthy, M. (2017). *Rethinking Credential Requirements in Early Education*. Washington, D.C.: New America.
- Mitter, R. & Putcha, V. (2018). *Strengthening and Supporting the Early Childhood Workforce: Training and Professional Development*. Washington, D.C.: Results for Development.
- Molepo, L., Delport, C. (2015). "Professional Challenges Experienced by Child and Youth Care Workers in South Africa." *Children and Youth Services Review*. Vol 56, pp. 149-160.
- National Association for the Education of Young Children (NAEYC). (2012). *2010 NAEYC Standards for Initial & Advanced Early Childhood Professional Preparation Programs*. Washington, D.C.: NAEYC.
- National Association of Social Workers & Association of Social Work Boards. (2013). *Best Practice Standards in Social Work Supervision*.
- Neuman, M.J, Josephson, K., & Chua, P.G. (2015). *A Review of the Literature: Early Childhood Care and Education (ECCE) Personnel in Low- and Middle-Income Countries*. Early Childhood Care and Education Working Paper Series, 4. Paris: UNESCO.
- National Survey of Early Care and Education Project Team (NSECE). (2013). *Number and Characteristics of Early Care and Education (ECE) Teachers and Caregivers: Initial Findings from the National Survey of Early Care and Education (NSECE)*. OPRE Report #2013-38. Washington DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

Oberhuemer, P., Schreyer, I., & Neuman, M.J. (2010). *Professionals in early childhood education and care systems: European profiles and perspectives*. Barbara Budrich Publishers.

Office of Child Development and Learning. (2014). *Pennsylvania Big Ideas Framework and Professional Development Plan for Early Childhood & School-Age Professionals*. Pennsylvania Department of Education and Department of Public Welfare.

Office of Child Development and Learning. (2014). *Pennsylvania Core Knowledge Competences for Early Childhood & School-Age Professionals*. Pennsylvania Department of Education and Department of Public Welfare.

Office of Child Development and Learning. (2012). *Pennsylvania Professional Development Framework for Early Care and Education*. Pennsylvania Department of Education and Department of Public Welfare.

Paul, S. (2017). "Quality standards for early childhood services: examples from South and South East Asia" in *Early Childhood Matters*. The Hague: Bernard van Leer Foundation.

Pennsylvania Early Learning Keys to Quality Website - www.pakeys.org

PNCM. (2015a). *Manual para la Selección de Facilitadoras/es del Servicio de Acompañamiento a Familias*. Lima: Ministerio de Desarrollo e Inclusión Social.

PNCM. (2015b). *Plan Operativo Institucional (POI) 2016 (Reformulación): Resumen Ejecutivo – Programa Nacional Cuna Mas*. Lima: Ministerio de Desarrollo e Inclusión Social.

PNCM. (2013c). *Acompañamiento a Familias: Guía para el facilitador y la facilitadora*. Lima: Ministerio de Desarrollo e Inclusión Social.

Productivity Commission. (2011). *Early childhood development workforce: Productivity commission research report*, Commonwealth of Australia.

Southeast Asian Ministers of Education Organization (SEAMEO) and UNESCO. (2016). *Southeast Asian Guidelines for Early Childhood Teacher Development and Management*. Bangkok: SEAMEO Secretariat and UNESCO Bangkok Office.

South African Council for Social Service Professions (n.d.) *Policy Guidelines for Course of Conduct, Code of Ethics, and the rules for Social Workers*.

Taguma, M., Litjens, I., & Makowiecki, K. (2012). *Quality Matters in Early Childhood Education and Care: New Zealand*. Paris: OECD.

UNESCO & ILO. (2008). *The ILO/UNESCO Recommendation concerning the Status of Teachers (1996) and the UNESCO Recommendation concerning the Status of Higher-Education Teaching Personnel (1997)*. Paris: UNESCO.

UNICEF (2016). *Early Learning and Development Standards and School Readiness: Evaluation Synthesis*. New York: UNICEF.

USAID (2008). *Social work education and the practice environment in Europe and Eurasia*.

Vargas-Barón, E. & Sermeño, S. (April, 2016). *Our General Introduction: Continuum of Care, Development and Learning* [PowerPoint presentation].

Vargas-Barón, E. (2013). "Building and Strengthening National Systems for Early Childhood Development." In Britto, P., Engle, P., and Super, C. (Eds.), *Handbook of Early Childhood Development Research and its Impact on Global Policy*. Oxford: Oxford University Press.

Website of the South African Council on Social Service Professionals <https://www.sacssp.co.za/>

Western Cape Street Children's Forum. (2015). *Training Challenges for Child and Youth Care Workers in the Western Cape*.

WHO and UNFPA. (2015). *Strengthening the capacity of community health workers to deliver care for sexual, reproductive, maternal, newborn, child and adolescent health*.

World Health Organization. (2006). *The World Health Report 2006: Working Together for Health*. Geneva: WHO.

World Health Organization. (2012). *WHO Recommendations: Optimizing Health Worker Roles to Improve Access to Key Maternal and Newborn Health Interventions Through Task Shifting*. Geneva: WHO. UNICEF and WHO. (2012) "Care for Child Development Package." https://www.unicef.org/earlychildhood/index_68195.html Accessed on May 20th, 2017.

Annex - Typology

The Early Childhood Workforce

Definition

The early childhood workforce consists of the volunteers, paraprofessionals, and professionals who promote the healthy growth, development, and learning of young children (under age 8). This diverse workforce, which is supported by a broad ecosystem of actors, is defined as the frontline workers who deliver services to young children and families, as well as those who directly train, supervise, and manage these practitioners.²³ Whether employed by government or non-state actors, this workforce operates within and across a variety of sectors, including health and nutrition, education, and social and child protection. While these workers may share common objectives, the specific sectors and settings in which they work, as well as their functions, training, and remuneration can vary significantly by context.

Typology

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
HEALTH AND NUTRITION²⁶	Auxiliary nurses & auxiliary midwives	Auxiliary nurses and midwives are paraprofessionals with more limited training than their professional counterparts. They are typically trained at the secondary level, have basic nursing skills and/or midwifery competencies, and assist in the provision of maternal and newborn health care.	<i>Nurse's assistants or aides</i>

²³ Except when fulfilling the role of trainer or supervisor, policymakers/government actors and academics are not explicitly included in this definition or typology, despite a recognition of their essential role in developing and supporting early childhood systems that employ this workforce. In addition, while invaluable to the day-to-day operations of early childhood development services, those who provide secondary support (such as cleaners and cooks) are not covered here.

²⁴ "Primary sector" refers to the sector where a professional or worker traditionally receives training and is often, though not always, employed. Many of these professionals/workers are employed in secondary or allied sectors (e.g. nurses or psychologists in preschool settings) or are cross-sectoral in nature (e.g. early intervention specialists, increasingly home visitors).

²⁵ Where available, "Role" refers to existing terms established by international bodies, such as the International Labour Organization, the Global Health Workforce Alliance, and the Global Social Service Workforce Alliance. As such, these may not be the exact titles used in many countries or regions, but rather are umbrella terms for similar roles and professions (variations in these titles are included in the last column, "Other titles").

²⁶ Health workers, including all roles listed here, often provide care throughout the life course. In many places, health workers are the caregivers most likely to interact with pregnant women and children during the earliest years of life, when brains are being formed and appropriate interventions can contribute to school readiness, resilience to toxic stress, good nutritional status, and lifelong health and wellbeing.

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
	Community health workers	Community health workers (CHWs) help link local communities with the formal health system by increasing access to essential health and social services. CHWs are typically adults educated at the primary or secondary level that are selected from and work in the community from which they come. Depending on the context, they provide a range of health promotion, disease prevention and treatment interventions to the residents of the communities in which they work. In most contexts CHWs focus on young children and mothers and, with respect to ECD, provide orientation to families (through group education and home visiting) promoting key family practices for maternal, newborn and child health and nutrition (such as exclusive breastfeeding, immunizations), as well as refer young children and pregnant women with signs of severe illness or complications to the formal health system. In some contexts, CHWs are responsible for community case management of illness and acute malnutrition. CHWs have also been supported to work with parents to promote early stimulation and to implement community-based therapeutic interventions for women with mental health problems.	<i>Health extension workers, lay health workers, community health promoters, traditional birth attendants, village health workers</i>
	Home visitors	Home visitors/parent educators may be paraprofessionals educated at the secondary level or professionals trained at the university level (in many contexts nurses or CHWs may work as home visitors). They make frequent and regular visits to at-risk families (often the primary caregiver) and young children (often under 3 years) to promote positive parenting practices and healthy child development within the home environment. Home visitors have often focused on maternal and child health and nutrition, but increasingly incorporate parenting practices, care, and early childhood stimulation activities. In addition to health services and programs, home visitors can be employed by social services, education programs, etc.	<i>Parent educators, caregiver educators, health visitors</i>
	Nurses & midwives	Nurses and midwives are registered professionals who play a core role across all tiers of formal health systems (including extension services, health posts and primary hospitals, and the tertiary level). Nurses provide a continuum of health services but, specific to ECD, nurses and midwives may provide antenatal, essential obstetric, and postnatal care to women and newborns; support well-child visits, immunization, growth monitoring, and case management of acute illnesses; and counsel parents on key family practices for their children's healthy development.	<i>Registered nurses, nurse practitioners, health visitors²⁷</i>

²⁷ Similar titles (e.g. health visitors) may be used for slightly different functions, depending on the context.

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
	Medical doctors (generalists, specialists such as pediatricians, neonatologists)	Doctors are registered professionals that work at all levels of the formal system and, in many countries, they also help to define systems of care and provide training to health workers at all levels. With respect to ECD, they are responsible for providing antenatal care, essential and emergency obstetric and newborn care, and for the treatment of acute illness. They are often responsible for well-child visits and may use these as opportunities to counsel parents on responsive care and early stimulation. They also conduct developmental screenings and refer children at risk of developmental delay and/or disability for specialized early intervention services, where these exist. In many contexts they are part of child protection mechanisms, and are trained to identify and refer children victims of abuse, neglect or domestic violence. They may also provide mental health services, including for maternal and paternal depression.	<i>Physicians, dentists, clinicians</i>
	Nutritionists	Nutritionists are experts in the field of nutrition and food that advise what people should eat to be healthy. With respect to ECD, nutritionists may conduct nutrition assessments or support child growth monitoring; provide counselling to parents on maternal nutrition and infant and young child feeding (including exclusive breastfeeding, complementary feeding, and the consumption of micronutrients); provide technical oversight to therapeutic feeding programs for children with acute malnutrition as well as pre-school feeding programs. Nutritionists may be employed by health services, and are increasingly incorporated into early education and multi-sectoral ECD programs. Depending on the country context, a nutritionist can often be an accredited or registered professional.	<i>Feeding specialists, dieticians, growth monitoring specialists, lactation specialists/consultants</i>
	Health educators & trainers	Many of the health workers listed above provide health education as part of their work. Health educators, as a specific category, are professionals who deliver individualized services and group sessions in higher education settings, as well as in and outside of health facilities. These individuals may also prepare educational and training materials.	
	Health services directors, managers, and supervisors	Health services directors, managers, and supervisors oversee the operations of health facilities or programs, and supervise early childhood personnel in these settings.	
EARLY CHILDHOOD INTERVENTION AND INCLUSIVE EARLY EDUCATION²⁸	Early intervention specialists	Early intervention specialists may be professionals trained at the pre- or post-graduate level who work in integrated early childhood intervention services that function at the intersection of the health, education, and protection sectors to provide individualized and intensive services to parents and infants/toddlers with developmental delays or disabilities, often through home visits. Early intervention specialists, among others, conduct developmental screenings and refer children to early intervention services. With the participation of parents/caregivers, they conduct comprehensive assessments, individualized family service plans to identify eligible children, conduct regular visits, and prepare transition plans to inclusive preschool and primary education.	<i>Child development specialists, professional home visitors</i>

²⁸ Early Childhood Intervention (ECI), while multi-sectoral in nature, is included here as its own sector to capture some of the roles that are unique to these services. However, roles within ECI are not included in the landscape analysis due to data gaps.

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
	Resource specialists for inclusive education for children with disabilities and delays	A wide variety of professional therapists, rehabilitation specialists and special educators may assist with inclusive education at the preschool and primary school level. In addition, non-professionals, working under the guidance and supervision of professionals, support children, parents and teachers in the school environment. However, increasingly teachers and caregivers in preschools and primary schools are being trained in essential elements of working effectively with children with developmental delays, disabilities or various disorders, such as autism spectrum disorder.	<i>Special needs assistants, inclusion specialists,</i>
	Special education teachers	Special education teachers are education professionals who work at preschool and primary school levels where they teach children with developmental delays, disabilities, and behavioral disorders. This classification includes teachers who provide specialized therapeutic sessions as well as teach basic academic and life processes skills to the mentally impaired.	<i>Special educators</i>
	Therapists (e.g. speech/language, physical, occupational)	Early childhood intervention programs can employ an array of therapists trained at the post-graduate level who, with early intervention specialists, provide a range of ECI services and also supervise trained ECI home visitors and others who work at the paraprofessional level.	
	ECI, IE and IECD program supervisors and directors/managers	ECI program supervisors, directors and managers oversee, monitor and train the operations, professional and paraprofessional staff of integrated ECI programs and ECD centers. These centers may offer multi-sectoral services from preconception to transition to primary education.	
EDUCATION	Child care workers	Child care workers provide non-parental care to young children, which allows for parents (and mothers in particular) to work during the day. These services provide comprehensive care and early learning opportunities including stimulation and play activities, promotion of good hygiene practices, provision of nutritious meals. While child care workers often care for the youngest children (0-3), depending on local needs, they may care for children until they enter primary school. Child care workers may be employed in community- or center-based settings (often called child care centers, crèches, nurseries, or playgroups) or in groups in family homes. In many countries, child care workers have limited education or training in child development, though in European countries these workers may have a health background.	<i>Daycare workers, childminders, caregivers, playgroup workers, paraprofessionals, nursery workers, crèche workers, child health workers</i>
	Early childhood teachers	Early childhood teachers work directly with young children in early learning settings to foster their cognitive, physical, language, and socioemotional development, and prepare children and parents for a successful transition to formal primary schooling. These teachers usually work with children from 36 months to primary school entry, but may cater to children under 3 as well. Teachers may be employed by center-, community-, or faith-based programs, crèches, preschools, pre-primary programs or kindergarten/ preparatory year classrooms. In many contexts, these teachers are trained separately and often less than primary school teachers, though it is increasingly recognized that these teachers play similar roles in fostering the initial development and learning of young children.	<i>Pre-primary teachers, preschool teachers, ECE teachers, ECEC teachers, ECD teachers, kindergarten teachers, early childhood educators, infant teachers, nursery teachers</i>

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
	Primary school teachers	Primary school teachers are often educated at the post-secondary level. Within early childhood development, these teachers are responsible for children in the early years of primary school (often grades 1 through 3). While the starting age for primary school varies by country, these teachers normally work with children 5 to 8 years old.	<i>Elementary school teachers, early grade teachers</i>
	Social pedagogy professionals	Social pedagogy professionals are, in most cases, educated or trained at the higher education level to work with young and school-age children, youths, and – in some cases – adults. In ECD, social pedagogy professionals may work in child care, early education and care, or school settings. Social pedagogy professionals, mostly prevalent in Europe, adopt a holistic approach to education and care, primarily focusing on social pedagogy or social work outside of the school system.	<i>Social pedagogues</i>
	Teacher assistants	Teacher assistants are adults who work under the direct supervision of a teacher, and perform some duties that are instructional in nature. Teacher assistants can work independently in a teacher's absence, but for the vast majority of the time work directly with the teacher in the same space and with the same group of children. Some provide extra assistance to children with developmental delays or disabilities.	<i>Teacher aides, pedagogues, auxiliary teachers/staff, classroom aides, instructional aides</i>
	Teacher coaches	Teacher coaches provide specialized, intensive support to an individual or group of teachers in early education and care settings to develop specific skills and practices. The coaching process is collaborative and often takes place on-site, over a series of sessions.	<i>Instructional coaches</i>
	Teacher trainers	Teacher trainers are qualified professionals or individuals, usually trained at the post-secondary level, who provide pre-service and/or in-service training to teachers and educators. In many settings, teacher trainers are employed by institutions of higher education (such as universities or colleges) where students prepare to become early childhood or primary school teachers.	<i>Teacher educators, teacher preparers, master teachers</i>
	Education service directors/ managers	Individuals typically responsible for the day-to-day planning and directing of an ECD program or center, preschool, primary school, daycare or child care center, etc. These individuals may also supervise other workers, such as teachers. In some cases, local government workers (such as district education officials) or school boards may also be closely involved in the registration, oversight, or management of these services.	<i>ECD program managers/directors, child care managers/directors, school directors, principals</i>
SOCIAL AND CHILD PROTECTION	Social service workers	The social service workforce is an overarching term for the workforce comprised of a variety of workers – paid and unpaid, governmental and nongovernmental – who staff social service systems and contribute to the care, support, promotion of rights and empowerment of vulnerable populations.	<i>Case workers, child welfare officers, social welfare officers, children's officers, child protection coordinators, child protection specialists, counselors, para social workers, social worker, auxiliary social worker, social</i>

Primary sector ²⁴	Role ²⁵	Description of role and settings (specific to ECD)	Other titles
			<i>services worker, community child workers, community caregivers, community mediators</i>
	Community child protection officers and workers	A subset of the social service workforce that focuses on promoting well-being and preventing and responding to a variety of risks, including violence, abuse, exploitation, neglect, family separation, and foster care.	<i>Child welfare officers, social welfare officers, children's officers, child protection coordinators, child protection specialists</i>
	Mental health professionals/specialists	Professionals who have received formal post-graduate training in psychology or social work and may be employed within education (e.g. schools), health (e.g. hospitals), or social service systems. Within early childhood, these specialists work with young children and families who are experiencing or at risk for emotional or behavioral challenges.	<i>Psychologists, psychiatrists, psychiatric nurses, clinical social workers, counselors</i>
	Residential care staff	Residential care staff members provide 24-hour, day-to-day support to children without parental care living in non-family-based group settings, on a short- or long-term basis. These staff may work alongside or support psychologists, doctors, social workers, or other professionals. Staff may be employed in a variety of institutions, such as residential child care centers or facilities, orphanages, or children's homes. Increasingly they are serving and supporting deinstitutionalized children and the families or transitional small group caregivers who have received them.	<i>Carers, caregivers, child care staff</i>
	Social services educators & trainers	Social work educators and trainers are trained at the graduate level. They serve as trainers of trainers, supervisors and monitors in social and child protection services.	
	Social service managers	Social service managers supervise practitioners and provide direction to the supervisee to enable them to apply theory, standardized knowledge, skills, competency, and applicable ethical content in the practice setting.	<i>Program managers, social work managers/supervisors, child welfare managers/supervisors</i>