Re-imagining the ECD Landscape in Kenya Sustaining and Scaling up Change

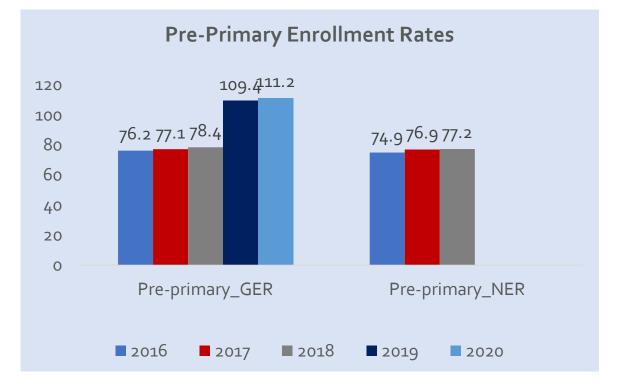
ECD Learning Event 23rd of July 2024

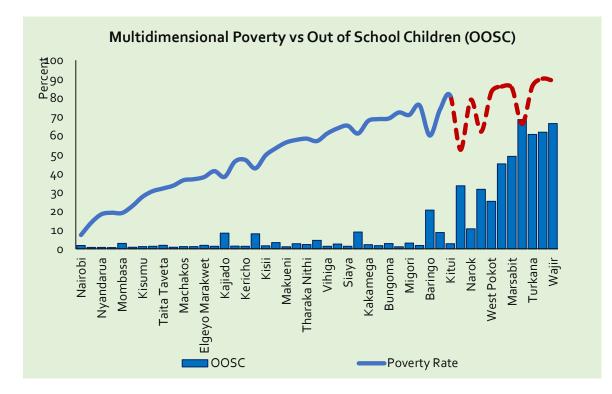
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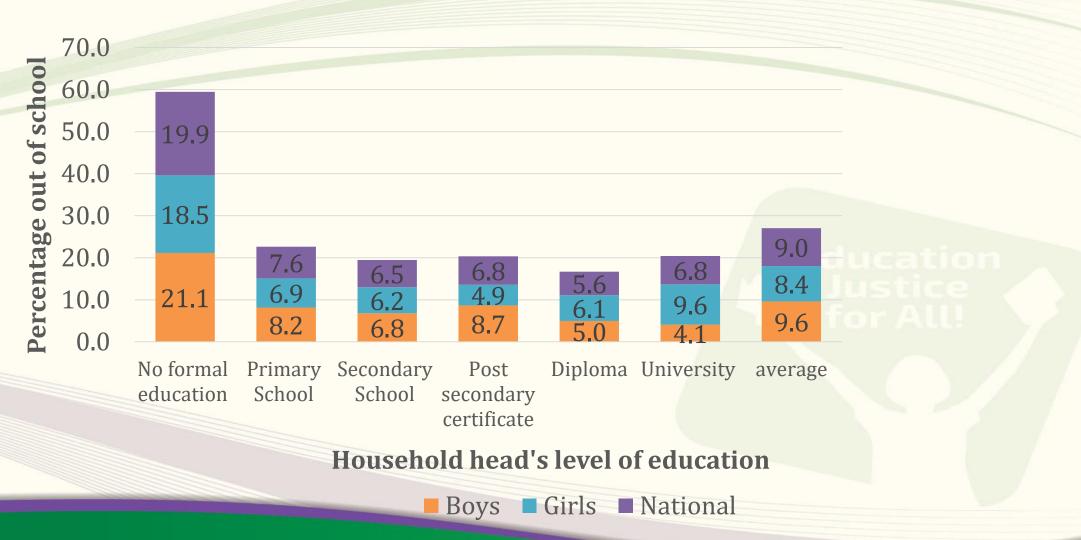
The ECD situation in Kenya: Indicators

- Gross enrollment rates for pre-primary increased between 2016 and 2020
- More children are out of school in the poorest counties compared to the non-poor counties
- The number of Out-of-school children in 2019 was 2.5 million with Mandera, Garissa, Wajir, Turkana, and Marsabit accounting for 50% of OOSC. Girl contribute 53% of OOSC.





School-aged children out of school by the education level & the gender of the household head and the child.



#EducationJustice4All

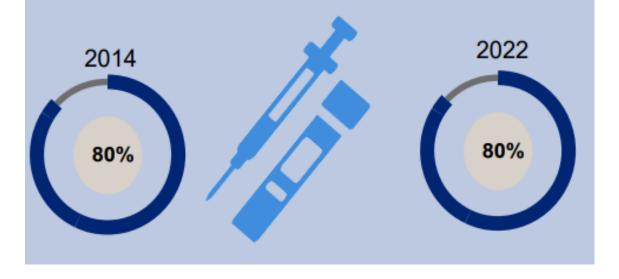
Evidence Innovation Engagement

The ECD situation in Kenya: Indicators

- Vaccine coverage rates have been increasing in the past two decades
- Between 2014 and 2022, there was a slight increase in the percentage of fully immunized children from 79.4% to 80%
- In 2022, there were 2% zero dose children
- Children born to mothers with no education have least chance of being immunized.

Vaccination Rates

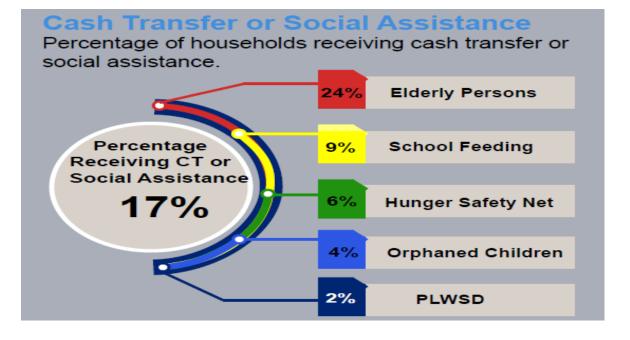
Percentage of children aged 12-23 months who have been fully vaccinated with all basic antigens.

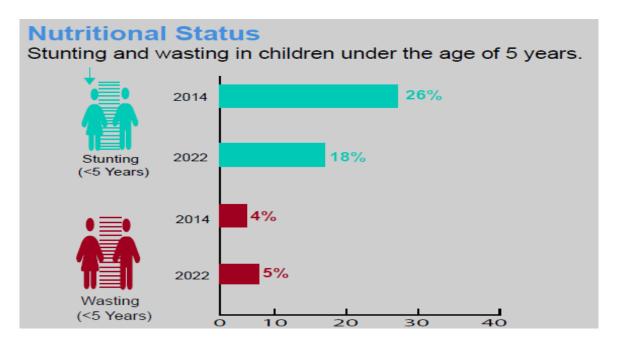


Skilled Delivery Percentage of live births assisted by skilled providers.

The ECD situation in Kenya: Indicators

- 1.3 million households benefit from government social cash transfers while 4.5 million households live in monetary poverty. About 1.4 million children live in households receiving social assistance, comprising 30% of all beneficiaries.
- CTOVC (a programme that primarily targets vulnerable children) constitutes 21.7% of the beneficiaries and has been declining over time.
- For every 1 USD invested in nutrition interventions can generate 22 USD in returns for Kenya. Child undernutrition in Kenya is causing a loss of about Ksh 373.9 billion, translating to 6.9 percent of Kenya's total economic output.





The ECD situation in Kenya: Financing

Level of ECD spending

Sources of ECD funds

Public finance management

Timeliness of allocation



ECD spending per child 0-8 is about USD 81 per child – well below the ESAR average of USD 138.

93% of ECD spending comes from domestic sources.

30% of ECD resources failed to reach the facilities.



40% of facilities reported not having or seen their approved annual work plan for ECD activities.



About half of ECD facilities in the survey reported experiencing delays of at least 6 months in disbursement of approved funds.



27% of facility respondents confirmed receiving timely information on the budget allocation.





Only **25%** of ECD institutions had any kind of qualified PFM staff.

The ECD situation in Kenya: Considerations

The good even with limited financing

- ✓ Child poverty decreasing
- ✓ Stunting reducing
- ✓ Skilled delivery going up
- ✓ ECD policy or strategic framework in place

The bad

- ✓ Poor quality of services
- \checkmark Multisectoral coordination is complex
- ✓ Policies not accompanied by money
- ✓ Limited data and weak information systems

Key considerations for ECD agenda going forward include:

- Increase funding for ECD services -accelerate the development and implementation of the ECD financing plans
- Continue to regularly measure and monitor investments in ECD to improve the impact of spending on ECD services.
- For all diagnostics (budget briefs, PERs, PETs, costing exercises, investment cases, etc.), develop and implement advocacy action plans
- Keep the agenda alive and impactful by maintaining multistakeholder dialogues; these do not need to be expensive and can range from the boardroom to breakfast meetings.

Thanks!

