Implementation of Early Childhood Care and Development (ECCD) Program and the Challenges Faced by Child Development Workers (CDWs): Basis for Intervention

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ABSTRACT

This study determined the level of implementation of ECCD and the challenges faced by CDWs in Daet, Camarines Norte. Specifically, it addressed: 1) the profile in terms of age, sex, civil status, educational attainment, honoraria, number of years teaching and attended relevant trainings; 2) the level of implementation of ECCD in Daet in terms of health and safety; physical environment and safety; interactions and relationships between staff and children; staff qualifications and continuing education; curriculum and assessment; family and community involvement; and leadership and support; 3) the significant relationship between the profile of the respondents and the level of implementation of ECCD Program; (4) the challenges faced by the Child Development Workers in the implementation of the program along with the aforementioned variables; 5) the significant relationship between the level of implementation of ECCD Program and the challenges faced; and 6) a proposed intervention to enhance the implementation of the ECCD program. The study involved 41 CDWs and 25 barangay education committee chairpersons in Daet. It used a quantitative, descriptive-correlational design and a survey questionnaire based on ECCD Council guidelines. The respondents were mostly 46 and above, female-dominated, mostly married, mainly college graduates in any field, earns above ₱6,500, with 0 to 10 years of teaching experience, and attended trainings. The ECCD is generally well-implemented and meets most standards, but some issues still need attention. Specific profiles are in significant relationship to the level of ECCD implementation, while others showed no significant effect, meaning not all influence implementation. Despite strong implementation, the program is still moderately challenging because of limited resources, training gaps, inconsistent family involvement, and management constraints. The challenges faced by CDWs are not directly linked to implementation levels, indicating despite full implementation, challenges still occur. To raise awareness on the challenges faced by CDWs, a brochure is developed and proposed.

Keywords: Early Childhood Care and Development, implementation, Child Development Workers, challenges

INTRODUCTION

Early childhood refers to the developmental stage that lasts from birth until about age eight. Rodd (2020) stated that care and education have historically been separated by an artificial dichotomy, but this is starting to change as early childhood training programs and awards are restructured and as more countries move toward providing coordinated, integrated, multi-professional services for children and families.

On the other hand, staff shortages, underappreciation, perceived challenging student behavior, and a lack of resources are the main issues facing early childhood educators. Hence, the three themes that emerged to defense these challenges were Structure for Organizational Effectiveness, Support for Professional Development, and Advocacy for Sustainability, collaborated to develop committed, involved, competent, and fulfilled early childhood educators (Heyne, 2024).

The Republic Act 8980, also known as Early Childhood Care and Development Act (2000), indicates that the State will establish a comprehensive, integrative, and sustainable National System for Early Childhood Care and Development (ECCD) that involves multi-sectoral and inter-agency collaboration between the government, service providers, families, and communities at the national and local levels, as well as between the public and

private sectors, non-governmental organizations, professional associations, and academic institutions. This system will support respect for cultural diversity and encourage the inclusion of children with special needs.

In addition, the Republic Act No. 6972, enacted in 1990, is a law creating daycare facilities in each barangay, implementing a program for the overall development and safety of children, allocating funds for it, and for other reasons. This necessitates the construction of a childcare facility in each barangay in the Philippines, which offers early childhood care and development services to children under six, guarantees their safety and overall development, and fosters their cognitive, emotional, and physical development.

Therefore, to improve and update the capabilities of service providers and their supervisors to comply with quality standards for various ECCD programs, and to raise the quality standards of public and private ECCD programs by means of, but not limited to, a registration and credential system for ECCD service providers and facilities, as stated in Section 3 on the Objectives of the National ECCD System. In this regard, the Guidelines for Public and Private Child Development Center Registration, Permit Granting, and Recognition (CDCs)/Learning Centers (LCs) Offering Early Childhood Program for zero (0) to four (4) Years old Filipino children are formed (ECCD Council, 2015).

The ECCD Program plays a vital role in promoting the holistic growth and well-being of young children by providing quality education, health, nutrition, and social services. However, the effectiveness of its implementation greatly depends on the capacity and well-being of Child Development Workers (CDWs), who serve as the frontliners in delivering these services. Despite their critical role, many CDWs encounter various challenges such as inadequate resources, limited training opportunities, low compensation, and lack of community or parental support. These issues hinder the full realization of ECCD goals and affect the quality of service provided to children. Therefore, assessing the level of ECCD program implementation and identifying the challenges faced by CDWs are essential steps in formulating appropriate interventions that can enhance program delivery, strengthen support systems, and improve outcomes for both workers and the children they serve.

The purpose of this study is to determine the level of implementation of Early Childhood Care and Development (ECCD) Program and the challenges faced by the Child Development Workers (CDWs) in Daet, Camarines Norte, leading to knowing the most feasible intervention that would best help the CDWs provide the needed care and education to daycare pupils to be ready in the formal schooling.

METHODOLOGY

This study employed quantitative method with descriptive-correlational design to examine the profile of the respondents, the level of implementation of the program, and the challenges faced by child development workers as basis for intervention. Correlation research was also carried out to determine whether a variable is in a relationship to another variable. This study also examined if there is a significant relationship between the profile of the respondents and the level of implementation of Early Childhood Care and Development Program in Daet, Camarines Norte, and between the level of implementation of Early Childhood Care and Development Program and the challenges faced by Child Development Workers.

Population, Sample Size, and Sampling Technique

The respondents of this study are the ECCD staffs in the barangay level which are the 41 child development workers in the child development centers of Daet, Camarines Norte in the school year 2024-2025, and the 25 Barangay Education Committee Chairpersons in the 25 barangays of the same municipality, with a total number of 66. The study used total enumeration, which entails looking at the entire population that possesses a certain set of features, and knowledge.

Data Gathering Procedure

The data were gathered with the use of a validated survey questionnaire adapted and modified from the ECCD Council's issued "Guidelines on the Registration and Granting of Permit and Recognition to Public and Private

Child Development Centers/ Learning Centers Offering Early Childhood Programs for 0 to 4 Years Old Filipino Children". It had undergone various statistical treatment to determine, validate and assess the statistics.

Statistical Treatment of Data

This study used various statistical tools to analyze the data. To analyze the profile of the respondents, frequency count and percentage were used. To determine the level of implementation of the ECCD Program in Daet, Camarines Norte, the weighted mean was applied. To validate the significant relationship between the profile of the respondents and the level of implementation of the ECCD Program, Somers' Delta Correlation Coefficient (d) was used, and the Statistical Package for the Social Sciences (SPSS) Software Version 21 was utilized for the computation. To assess the significant relationship between the level of implementation of ECCD program and the challenges faced, Pearson Product Moment Correlation was used. Lastly, to identify the challenges faced by child development workers in the implementation of the program, weighted mean was used.

RESULTS AND DISCUSSIONS

Profile of the Respondents

The study identified the profile of the respondents. It aimed to determine the age, sex, civil status, educational attainment, honoraria, number of years teaching and number of attended relevant trainings.

Age. Table 1 shows the age profile of the respondents involved in the study. The data indicate that the majority of the respondents, 38 out of 66, are in the age group of 46 and above, and the lowest representation from the 25 to 31 age group, with only 4 respondents.

Table 1. Age Profile of the Respondents

Age	Frequency	Percentage (%)
25-31	4	6.1
32-38	6	9.1
39-45	18	27.3
46 and above	38	57.6
Total	66	100.0

The highest frequency from the 46 and above age group shows that the respondents are recruited locally. Conversely, the very low representation of younger respondents, particularly the 25 to 31 age group, indicates that the ECCD workforce is not always highly attractive to younger generations or fresh graduates. Corroborated by Nachon et al. (2025), who revealed that most CDWs are older members of the population where 8 out of 11 CDWs are specifically in the 40 and above age range, while only 3 people are between the ages of 26 and 35. This takes into consideration the EDCOM 2's findings that a large number of CDWs are aging.

Sex. Table 2 presents the sex profile of the respondents. The data reveals a strong gender imbalance, with female respondents overwhelmingly dominating the sample. Out of 66 respondents, 58 are female, while only 8 are male. This clearly identifies females as the highest in frequency, with males showing the lowest values.

Table 2. Sex Profile of the Respondents

Sex	Frequency	Percentage (%)
Male	8	12.1

Female	58	87.9
Total	66	100.0

This pattern is consistent with broader trends in the early childhood care and education sector, which is traditionally female-dominated. The predominance of women reflects societal perceptions that caregiving and nurturing roles are more suited to females, particularly in early childhood settings. While this can contribute positively to the ECCD program through the nurturing approach often associated with women, it also points to a lack of gender diversity in the field. However, the low participation of male indicates that men are often expected to pursue professions that shows masculinity such as leadership, technical skills or manual labor. Hence, this leads to missed opportunities for children to experience a more diverse range of role models during their formative years. It also limits the ECCD program's potential to promote gender inclusivity and balance. Moreover, the underrepresentation of males shows barriers to entry or a lack of encouragement for men to pursue careers in early childhood development. The is corroborated by Sorhe (2024), who revealed that human resource factor, social-cultural factors and personal attributes had a significant influence on gender disparity in the early childhood education profession.

Civil Status. Table 3 presents the civil status profile of the respondents. The data show that the vast majority of respondents are married, with 51 individuals. This is followed by single respondents at 10 individuals, widowed respondents with 4 individuals, and the lowest being separated, with only 1 respondent.

The high number of married respondents shows that many CDWs manage both family and work responsibilities. This can help the ECCD program because married staff often understand family and child-related needs. However, balancing home and work can also create challenges, such as limited time, fatigue, and competing priorities, which may affect their full commitment to ECCD tasks, especially those requiring extra hours. Hence, the low number of separated (1) and widowed (4) respondents shows that these civil statuses are less common in the group. Although fewer, CDWs in these categories may face emotional or financial challenges that can affect their work. Single staff, while more in number, may have more flexibility for professional growth but could also feel less secure if they lack family support.

Table 3. Civil Status Profile of the Respondents

Civil Status	Frequency	Percentage (%)
Single	10	15.2
Married	51	77.3
Widowed	4	6.1
Separated	1	1.5
Total	66	100.0

Okeke et al. (2023) found that age and marital status do not significantly affect the professional development opportunities available to ECCE practitioners. This means these factors do not limit their chances for growth. Therefore, authorities should make use of practitioners' awareness of their own needs and their willingness to improve their skills. This was supported by Srinivasacharlu (2024), who found that factors like marital status, teaching experience, and place of residence do not affect pre-primary teachers' awareness of ECE. These teachers already understand children's characteristics, learning needs, and appropriate teaching and assessment methods.

Educational Attainment. Table 4 illustrates the educational attainment of the respondents. The table shows that a vast majority, 65 respondents, are college graduates. Thirty-three of them have a baccalaureate degree in elementary education, fourteen of them in secondary education which majors in social studies, English,

mathematics, and computer programming, which one of them has 18 unit in Masters in Mathematics. The rest are marine engineering, customs administration, computer science, history, psychology and biology. Meanwhile, others didn't specifically state their courses. Hence, the ECCD qualification for CDWs is bachelor's degree in any field. In contrast, only 1 respondent is a high school graduate, under education committee chairperson respondents. This indicates that the highest frequency lies with college graduates, while the lowest is with high school graduates.

Table 4. Profile of the Respondents as to Educational Attainment

Educational Attainment	Frequency	Percentage (%)
High School Graduate	1	1.5
College Graduate	65	98.5
Total	66	100.0

The data show that the ECCD workforce is generally well-educated, which supports strong program implementation. Having college-level education provides workers with the knowledge and skills needed for effective, age-appropriate early childhood care and teaching. It also shows their commitment to professional standards and the demands of working with young children. In contrast, the small number of high school graduates suggests that barangays or LGUs prefer hiring applicants with higher education, such as college degrees or units in education. Because most applicants are college graduates, high school graduates become less competitive and have fewer opportunities to join the ECCD workforce. This finding aligns with Sibal-Tumbali (2023), who noted that teachers with higher education are more likely to have the knowledge and skills needed to create effective learning experiences for young children.

Honoraria. Table 5 presents the profile of the respondents based on the amount of honoraria they receive. The honoraria of the CDWs and Education Committee Chairpersons, though both ECCD staffs, differs in amount and source, depending on the local budget allocation. The total honoraria of CDWs come from four sectors given per month per CDW. The provincial government represented by the Provincial Social Welfare and Development Office (PSWDO) has an allocation of Php 1, 000. The Local Government Unit of Daet has an allocation of Php 2, 200. The barangay ranges from Php 1, 800 to Php 6, 500, depends on the budget allocation, and the parents contributes Php 100. On the other hand, the Education Committee Chairpersons' honoraria depends on the Internal Revenue Allotment (IRA) of the barangay. This honorarium has no deductions from SSS, GSIS, and such.

Table 5. Profile of the Respondents as to Honoraria

Amount (in Php)	Frequency	Percentage (%)
500-2,500	20	30.3
2,501-4,500	6	9.1
4,501-6,500	13	19.7
Above 6,500	27	40.9
Total	66	100.0

The data show that most respondents, 27 out of 66, mainly Education Committee Chairpersons, receive an honorarium above Php 6,500. This is followed by 20 respondents earning Php 500 to 2,500, 13 earning Php 4,501 to 6,500, and only 6 receiving Php 2,501 to 4,500. The results revealed a wide pay gap, with many respondents at both the highest and lowest income levels. While it is good that several receive more than Php

6,500, the fact that almost one-third earn Php 2,500 or less is concerning. This disparity may be due to differences in LGU funding, employment status, or years of service.

Hunter and Bierman (2021) noted that low honoraria can lower CDWs' morale, motivation, and performance, which may weaken ECCD Program implementation. Those who receive very little pay may feel undervalued, leading to dissatisfaction, high turnover, or less participation in training and program activities. In contrast, CDWs with higher honoraria often have more stability and resources, supporting better ECCD outcomes. Similarly, Eksteen (2022) found that job satisfaction is shaped by factors such as compensation, management, work environment, job nature, emotional strain, and opportunities for growth. However, when basic needs are not met, these factors can cause dissatisfaction rather than satisfaction.

Number of Years in Teaching. Table 6 shows the respondents' number of years of teaching experience. Most respondents, 40, have 0 to 10 years of experience, while only 3 have more than 30 years. Thus, the largest group is the 0 to 10 years category, and the smallest is those with over 30 years of teaching.

Table 6. Profile of the Respondents Number of Years in Teaching

Years in Teaching	Frequency	Percentage (%)
0-10	40	60.6
11-20	14	21.2
21-30	9	13.6
Above 30	3	4.5
Total	66	100.0

This distribution shows that the ECCD workforce is predominantly composed of relatively new or early-career educators. On the other hand, the small number of very experienced staffs, above 30 years, shows that the ECCD workforce faces challenges related to retaining seasoned professionals. Quileste and Pagara (2022) noted that students' learning outcomes are strongly influenced by teachers' actual teaching experience. This means CDWs with fewer years in service may need more supervision, mentorship, and training to meet the demands of early childhood development. Sibal-Tumbali (2023) also emphasized that effective monitoring by social work offices, strong parent involvement, community support, and dedicated educators all contribute to the success of Child Development Centers.

Number of Attended Relevant Trainings. Table 7 presents the number of relevant trainings attended by the respondents. The data show that the highest frequency is among those who have attended 0 to 10 trainings, with 30 respondents, while the lowest frequency was among those who have participated in 21 to 30 trainings, comprising only 13 respondents.

Table 7. Profile of the Respondents as to Number of Attended Trainings

Number of Relevant Trainings	Frequency	Percentage (%)
1-10	30	45.5
11-20	23	34.8
21-30	13	19.7
Total	66	100.0

The data show that although many respondents have attended some relevant training, most have joined fewer than 10 sessions. This raises concerns about whether professional development opportunities are sufficient and accessible. Limited training can hinder ECCD program implementation, especially since early childhood education requires updated skills and knowledge. However, the fact that more than half have attended over 10 trainings indicates some effort to build CDWs' capacity. Still, the small number of respondents with extensive training, 21 to 30 sessions, suggests that continuous professional development may not be consistent or sustained. Corroborated by Omdal and Roland (2020), to strengthen the skills of ECEC teachers and leaders and improve outcomes for children, future research should continue promoting innovations in the ECEC system. Ongoing training, peer support, and structured professional development are essential for empowering educators and improving the overall effectiveness of the ECCD program.

Level of Implementation of Early Childhood Care and Development (ECCD) Program

This section shows the level of implementation of the ECCD program. This is composed of seven indicators consisted of health, nutrition, and safety, physical environment and safety, interactions and relationships between staff and children, among children and other adults, staff qualifications, staff development and continuing education, curriculum, instruction and assessment; family involvement and community linkages, and leadership, program management and support.

Health, Nutrition, and Safety. Table 8 presents data on how effectively ECCD programs are being implemented in these key areas. The overall weighted mean is 4.56, signifying a high level of compliance and implementation across the board.

Table 8. Level of Implementation of ECCD Program in terms of Health, Nutrition and Safety

Indicators	Weighted Mean	Interpretation
1. The staff at the Center is aware of and considers the child's written health record, which is kept as part of the child's specific file.	4.70	FuI
2. Malnourished children, especially those with specific needs (underweight, stunted, and wasted), are cared for according to the Center's documented procedure until they are able to recover or return to their normal state.	4.33	FuI
3. The Center promotes and implements proper hand washing practices for children and staff, and hand washing messages are properly displayed in dining and toilet facilities.	4.64	FuI
4. A source of clean and sanitary drinking water is available to young children, and if the public or private well is used, the Center provides evidence that the water source has been inspected and approved by an authorized agency.	4.47	FuI
5. Foods are properly prepared in a clean facility, stored in clean covered containers and served safely; if transported, these should be in appropriate sanitary containers.	4.68	FuI
6. The Center and its surrounding area maintain a smoke-free environment.	4.64	FuI
7. Disaster management, including but not limited to, fire and/or earthquake drills for young children are provided at least twice a year.	4.48	FuI
8. The Center has a procedure for reporting injuries, accidents or problems that may occur that require rapid response on the part of the staff.	4.44	FuI

9. A first aid kit is available at all times in the Center and is replenished as often as necessary.	4.62	FuI
10. The Center facilitates the conduct of child-protection seminars related to child abuse and neglect, with the participation of parents and authorized caregivers. Written procedures are available for protecting children against abuse and neglect.	4.61	FuI
Overall Weighted Mean	4.56	FuI

Rating Scale: Descriptive Interpretation:

        4.20-5.00   -   Fully Implemented (FuI)

        3.40-4.19   -   Frequently Implemented (FrI)

        2.60-3.39   -   Sometimes Implemented (SI)

        1.80-2.59   -   Partially Implemented (PI)

        1.00-1.79   -   Not at All Implemented (NAI)

The highest weighted mean is 4.70, rated as Fully Implemented (Ful), which corresponds to Indicator 1, "The staff at the Center is aware of and considers the child's written health record, which is kept as part of the child's specific file." This shows that the center places a strong emphasis on maintaining and utilizing individual health records, reflecting an organized, child-centered approach to health monitoring and care. This also highlights excellent staff accountability and record management, which are foundational for effective early childhood health interventions.

On the other hand, the lowest weighted mean is 4.33, rated as Fully Implemented (Ful), seen in Indicator 2, "Malnourished children, especially those with specific needs (underweight, stunted, and wasted), are cared for according to the Center's documented procedure until they are able to recover or return to their normal state." Although this still falls under the fully implemented category, it represents the weakest performance among the indicators. This shows challenges in managing malnutrition, due to resource limitations, complexity in handling special nutritional needs, or inconsistencies in implementing care protocols.

The results are corroborated by Barnes et al. (2021) who emphasized that early childhood education and care (ECEC) facilities should adopt evidence-based healthy eating policies and practices. This promotes children's healthy diets.

Physical Environment and Safety. Table 9 outlines the assessment of ten indicators related to the physical setup and safety conditions of early childhood education centers. The overall weighted mean is 4.00, which falls under the Frequently Implemented (Frl) category, indicating that while the standards are generally met, there is room for improvement to reach full implementation.

The highest weighted mean is 4.36 noted as Fully Implemented (Ful), corresponding to Indicator 6, "All areas are well lit and ventilated." This shows strong compliance with basic environmental standards that ensure children's comfort and safety.

In contrast, the lowest weighted mean is 3.56 noted as Frequently Implemented (Frl), seen in Indicator 2, "Play area and equipment are inspected and regularly maintained in good condition and in good repair." This indicates a weaker area in terms of ensuring the upkeep and safety of play equipment, which could pose potential hazards to children if not addressed.

The result is corroborated by Aina and Bipath (2022), who revealed that practitioners are aware of how using educational resources can enhance the development and growth of young children. Though they are aware of the advantages of using such equipment to promote high-quality ECCE, the lack of contemporary and age-appropriate play equipment suggested that practitioners are unable to use it because of limited infrastructure resources. As a result, access to high-quality ECCE is uneven.

Table 9. Level of Implementation of ECCD Program in terms of Physical Environment and Safety

Indicators	Weighted Mean	Interpretation
1. The Center maintains or has access to an outdoor play area accessible to young children, including those with special needs. Adequate space is provided with play equipment, and sufficient quantity and variety appropriate to the needs and ages of the young children.	3.59	FrI
2. Play area and equipment are inspected and regularly maintained in good condition and in good repair.	3.56	FrI
3. Play area is clearly visible to staff members at all times. There is a shaded area or protection from direct sunlight in the outdoor play area and pathways are clear for emergency evacuation and accessible to individuals.	3.85	FrI
4. The classroom environment is safe, clean and maintained free from pests.	4.30	FuI
5. There is an adequate space for classroom activities exclusive of lockers, bathrooms, closets and areas regularly used for other purposes.	3.95	FrI
6. All areas are well lighted and ventilated.	4.36	FuI
7. Equipment or materials for fire prevention and management (e.g. fire extinguishers, bags of sand, covered pails of water) are available.	3.89	FrI
8. Indoor play areas are defined clearly by spatial arrangement.	3.91	FrI
9. The Center uses materials/toys that are appropriate to children's age and stage of development, reflecting a wide variety of family backgrounds.	4.24	FuI
10. The Center has hygiene, toilet and hand washing facilities for teaching and learning proper hygiene and cleanliness so children could experience the development of health habits through demonstration.	4.29	FuI
Overall Weighted Mean	4.00	FrI

Rating Scale: Descriptive Interpretation:

4.20-5.00   -   Fully Implemented (FuI)

3.40-4.19   -   Frequently Implemented (FrI)

2.60-3.39   -   Sometimes Implemented (SI)

1.80-2.59   -   Partially Implemented (PI)

1.00-1.79   -   Not at All Implemented (NAI)

<u>Interaction and Relationships between Staff and Children, among Children and other Adults.</u> Table 10 evaluates ten indicators measuring the quality of social interactions and relational dynamics in early childhood education settings. This has an overall weighted mean of 4.46 noted as Fully Implemented (Ful), indicating a strong and effective implementation of relationship-building and communication practices within the program.

The highest weighted mean, 4.61, is observed in Indicators 3 and 10, both noted as Fully Implemented (Ful). These indicators highlight, 3) the staffs treat children and adults with equal respect, regardless of gender, race, age, language, religion, culture and family background; and 10) the Center encourages self-discipline among children and parents, following the Center's arrangement and daily schedule, and allowing children to resolve their own conflicts as appropriate. These consistently high scores reflect a nurturing and developmentally appropriate environment that prioritizes children's autonomy, engagement, and emotional security such as activities in partners or by groups that foster effective socialization and fun-responsible play. This also show that the center's staff maintains positive, respectful, and developmentally supportive relationships with children and fosters strong peer interactions.

This result is corroborated by Sibal-Tumbali (2023) which highlighted the importance of safe attachments in promoting healthy relationships and learning results between educators and students. Moreover, it was affirmed by Bartolome et al. (2020) that strong parent-school partnerships lead to better child outcomes.

Table 10. Level of Implementation of ECCD Program in terms of Interaction and Relationship between Staff and Children, among Children and Other Adults

Indicators	Weighted Mean	Interpretation
1. Young children are given opportunities to choose and interact with a variety materials and activities in which they can play independently or with other peers, with or without the supervision of the teacher/Child Development Specialist or other staff members.	4.36	FuI
2. The staffs encourage children to delve into activities, share experiences, ideas and feelings, and assist them in dealing with emotions such as anger, sadness and frustration, by comforting and helping them to solve their problems.	4.48	FuI
3. The staffs treat children and adults with equal respect, regardless of gender, race, age, language, religion, culture and family background.	4.61	FuI
4. The staffs provide all children, including those with special needs, with equal opportunities to take part in their activities to be able to interact according to their capabilities.	4.42	FuI
5. The staff provide opportunities for children to develop self-help, problem-solving and decision-making skills, such as dressing and undressing, personal hygiene and using eating utensils appropriately with adjustment for children with special needs, fine and motor skills, cognitive, aesthetic arts and language development.	4.48	Ful
6. The Center provides developmentally appropriate materials and equipment, arranged in a manner that is visible and readily accessible to children so that children including those with special needs may select, remove and replace the materials independently or with minimum assistance.	4.17	Frl
7. The program has written statements defining the rules, policies and procedures for the behavior management of three (3) to four (4) year old	4.48	Ful

children, directed towards the goal of maximizing their growth and development, and protecting the group and individuals within it.		
8. The Center have rules and procedures posted in a noticeable place and provided to and discussed with parents during Parents Teachers Meetings Association/Parents Teachers and Community meetings.	4.55	Ful
9. The program uses positive behavior management techniques, such as setting reasonable and positive expectations, offering choices and providing children an opportunity to verbalize their feelings, which encourage children to develop self-control through understanding.	4.47	Ful
10. The Center encourages self-discipline among children and parents, following the Center's arrangement and daily schedule, and allowing children to resolve their own conflicts as appropriate.	4.61	Ful
Overall Weighted Mean	4.46	Ful

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Fully Implemented (FuI)

    3.40-4.19   -   Frequently Implemented (FrI)

    2.60-3.39   -   Sometimes Implemented (SI)

    1.80-2.59   -   Partially Implemented (PI)

    1.00-1.79   -   Not at All Implemented (NAI)

Conversely, the lowest weighted mean, 4.17 noted as Frequently Implemented (Frl), is noted in Indicator 6, the Center provides developmentally appropriate materials and equipment, arranged in a manner that is visible and readily accessible to children so that children including those with special needs may select, remove and replace the materials independently or with minimum assistance. As the lowest frequency indicator, this statement reflects a basic, minimal level of compliance with quality early childhood practices. While the centers aim to provide developmentally appropriate and accessible materials, this setup is not consistent or fully integrated into daily routines.

The result was affirmed by Buchner et al. (2023), stating that work-related reflexive sessions, as well as sessions dealing with the implementation of exercise tools into daily practice were rated as fundamental parts in the training which gives focus on emotional self-reflection and detailed hands-on exercises for specific situations managing the learners in an innovative way.

Staff Qualifications, Staff Development and Continuing Education. Table 11 presents the ten indicators that assess the qualifications, training, and ongoing professional development of Child Development Workers (CDWs). The overall weighted mean is 4.50, which further supports the conclusion that the program has a well-established and effective system for ensuring staff competency and continuous improvement.

The highest weighted mean, 4.67, appears in Indicator 2. This involves CDWs completing basic training or seminars related to early childhood education. This shows the program's success in ensuring that its staff not only meets entry-level requirements but is also engaged in further learning to enhance their capabilities. Moreover, this shows that the center or local government unit have a system that support and encourage employee growth and reward. In this aspect, Visser et al. (2021) attested the importance of joining bigger organizations and established communities of practice in order to expand access to and availability of practitioner training and resources leading to delivery of high quality ECE.

On the other hand, the lowest weighted mean is 4.35, found in Indicator 10, which pertains to opportunities for advancement position and compensation. While still at fully implemented, this indicator shows that while advancement and pay increases are technically possible, they occur infrequently or are not clearly structured and consistent. Staff rarely see tangible growth in their roles or salaries, leading to low motivation and potential dissatisfaction. This shows improvements or administrative efforts that strengthened compliance even though challenges may still exist in practice.

The result was affirmed by Omdal and Roland (2020) as they described the necessity of concentrating on preventive innovations in both the school and early childhood education and care settings in order to guarantee a top-notch learning environment. Thus, addressing this aspect creates a more balanced and supportive work environment for early childhood educators.

Table 11. Level of Implementation of ECCD Program in terms of Staff Qualifications, Staff Development and Continuing Education

Indicators	Weighted Mean	Interpretation
1. The Child Development Worker (CDW) has a Bachelor's Degree in any field.	4.64	Ful
2. The Child Development Worker (CDW) has completed basic trainings or seminars related to Early Childhood Care and Development or Early Childhood Education.	4.67	Ful
3. The Child Development Worker (CDW) has skills in community mobilization and effective oral communication.	4.52	Ful
4. The Child Development Worker (CDW) has a Barangay Certificate/NBI Clearance with three (3) Character References.	4.52	Ful
5. The other important requirements for the staffs should preferably be between 18-45 years of age and/or has the necessary required physical stamina to attend to early learners.	4.52	Ful
6. The other important requirements for the staffs should have good physical and stable emotional condition.	4.58	Ful
7. There is a regular and continuous training program based on a training needs assessment, which provides CDTs/CDWs opportunities to enhance their skills and strengthen their values that include but are not limited to: working with children and families with and special needs; conducting assessment and appropriate intervention for children's progress; mentorship of parents on the care and education of young children; laws on child protection and development; and current trends and strategies in early childhood education.	4.41	Ful
8. The management provides opportunities for CDTs/CDWs to gain professional and personal growth in a variety of modes (e.g. enrollment in colleges, online training, special courses, etc.) and through mentoring, classroom observations, visits to Early Childhood Education programs, and attendance at conferences and workshops, among other events, and documentation on these are kept on file.	4.42	Ful
9. There is a regular performance appraisal conducted by the supervisor that follows a standard procedure such as quarterly meetings or observations of	4.36	Ful

actual instruction to follow up program implementation and provide technical assistance.		
10. There are opportunities for advancement position and compensation.	4.35	Ful
Overall Weighted Mean	4.50	Ful

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Fully Implemented (FuI)

    3.40-4.19   -   Frequently Implemented (FrI)

    2.60-3.39   -   Sometimes Implemented (SI)

    1.80-2.59   -   Partially Implemented (PI)

    1.00-1.79   -   Not at All Implemented (NAI)

<u>Curriculum, Instruction and Assessment.</u> Table 12 evaluates ten indicators related to the design, delivery, and monitoring of educational content in early childhood settings. The overall weighted mean is 4.30, which falls under the Fully Implemented (Ful) category, suggesting a generally strong implementation of curriculum and instructional strategies across the program.

The highest weighted mean, 4.47 noted as Fully Implemented (Ful), found in indicator 6 stated as "The curriculum integrates concepts that promote healthy life among young children, such as but not limited to water, sanitation, hygiene and safety.". At the highest frequency, this emphasizes that the curriculum consistently and intentionally incorporates concepts promoting a healthy lifestyle into daily learning experiences. This also reflects a strong commitment to fostering lifelong health habits in young children through regular, embedded instruction. It highlights the center's proactive role in prioritizing health education as a foundational part of early childhood development leading to prevention from sickness resulting to regular attendance to school making educational achievements. The result is corroborated by Sharma (2023), who highlighted that the impact of school water, sanitation, and hygiene (WASH) facilities on students' academic performance, attendance, and general health was found to be statistically significant. Students who have access to better school WASH facilities are more likely to attend class, have fewer absences, and perform better academically than their counterparts.

Table 12. Level of Implementation of ECCD Program in terms Curriculum, Instruction and Assessment

Indicators	Weighted Mean	Interpretation
1. The curriculum is based on information derived from a variety of sources about children in the three (3) and four (4) years age group in the six domains: physical health, well-being and motor development, social-emotional development, character and values development, cognitive and intellectual development, language development, and creative and aesthetic development.	4.44	Ful
2. Curriculum goals, objectives and activities are based on the individual needs and interests of the young children, allowing for a range of activities that provide them early stimulations for active involvement in the learning process through play, concrete experiences and the exploration of the environment whether in individual, small group or whole group settings.	4.35	Ful

3. Group time and activity center plans indicate adaptations/modifications necessary for facilitating young children with disabilities or children with special needs to meet their learning goals and objectives.	4.36	Ful
4. Activity areas are provided to accommodate and encourage activities that are congruent with the curriculum, and are equipped with manipulative and interactive materials and equipment that are readily accessible to promote concrete and interactive learning, and to encourage peer interactions.	4.24	Ful
5. Both indoor and outdoor time and space are available for active physical and motor activities, quiet play and play that fosters development of values such as respect, empathy, care, cooperation and self-esteem.	4.23	Ful
6. The curriculum integrates concepts that promote healthy life among young children, such as but not limited to water, sanitation, hygiene and safety.	4.47	Ful
7. Experiences are provided for language and literacy development, development of mathematical concepts, development of scientific concepts, self-expression in art, music, movement and dance, and dramatic play.	4.36	Ful
8. Data from assessments are also used to adapt curriculum, activities, practices, routines and settings to meet the needs of young children.	4.26	Ful
9. The program maintains at least a minimum teacher-child ratio of 1:10, and if it reaches the maximum of 1:25, there is a teacher-aide/assistant/trained parent or trained adult volunteer.	4.14	Frl
10. There is a minimum of two adults trained in health care, nutrition and emergency procedures.	4.17	FrI
Overall Weighted Mean	4.30	Ful

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Fully Implemented (FuI)

    3.40-4.19   -   Frequently Implemented (FrI)

    2.60-3.39   -   Sometimes Implemented (SI)

    1.80-2.59   -   Partially Implemented (PI)

    1.00-1.79   -   Not at All Implemented (NAI)

On the other hand, the lowest weighted mean is 4.14 noted as Frequently Implemented (Frl), observed in Indicator 9, "The program maintains at least a minimum teacher-child ratio of 1:10, and if it reaches the maximum of 1:25, there is a teacher- aide/assistant/trained parent or trained adult volunteer." At the lowest frequency, this indicates that the majority of the centers meets only the basic required teacher-child ratio standards.

With the lowest weighted mean recorded, Hunter and Bierman (2021) affirmed that maintaining a small teacher-to-child ratio makes it difficult for teachers or staffs to deliver regular, high-quality programming. Operating at

or near the upper limits can strain staff and reduce opportunities for responsive, developmentally appropriate engagement, suggesting a need for more proactive staffing strategies to support optimal learning environments.

Family Involvement and Community Linkages. Table 13 evaluates ten indicators that measure how well early childhood education centers engage with families and collaborate with external stakeholders. The overall weighted mean is 4.32, which falls under the category of Fully Implemented (Ful). This indicates a generally strong implementation of consistent family and community partnerships across the program.

The highest weighted mean, 4.45 noted as Fully Implemented (Ful), is observed in Indicator 1, which assesses the center's practice of orienting parents or guardians about its programs and activities. This shows that communication at the beginning of the school year or enrollment is well established where parents have committed their presence, support and understanding.

Table 13. Level of Implementation of EECD Program in terms Family Involvement and Community Linkages

Indicators	Weighted Mean	Interpretation
1. The Center provides a clear orientation on child protection programs and services to parents/families/guardians and on health, nutrition, early learning and social services.	4.45	Ful
2. Written information about the delivery of programs and services, and policies of the Center are provided to parents upon the admission of their young children to the Center. There should be signed agreements with parents in relation to the rules and regulations of the Center.	4.33	Ful
3. Opportunities are given to parents/authorized guardians/caregivers to participate in the Parent education or Responsible Parenthood (e.g. Parent Effectiveness Services Seminar (PESS), Empowerment Reaffirmation of Paternal Abilities Training (ERPAT), reinforcing/promoting positive behavior, alternative discipline); Family Support Program; Curriculum review and development of instructional materials; Children's assessment of their growth and development; and Trainings on First Aid, Disaster Preparedness, PABASA sa Nutrisyon, and Nutrition in Emergencies; to enhance their knowledge and skills for the development of the full potential of their young children.	4.36	Ful
4. Family members and guardians are given written instructions to attend the organization of Child Development Center Parents' Organization/Committee.	4.41	Ful
5. Family members and guardians are given written instructions to attend the CDTs/CDWs, Parents and Barangay officials conduct of regular meetings to develop the Center's Improvement Plan (CIP) and its implementation, and to evaluate the implemented activities.	4.26	Ful
6. The Center's program is sustainable through the parents' support by ensuring continuity of the significant activities being done in the Center (e.g. hand washing, tooth brushing, etc.).	4.35	Ful
7. The Center's program is sustainable through the parents' support by promoting parents/authorized guardians/caregivers to become active volunteers of the Center and the community.	4.30	Ful

8. The Center mobilizes the community during outreach programs and other Center activities.	4.21	Ful
9. Curricular activities include educational community trips to improve young children's exposure to community facilities and resources for them to be aware of one's culture, and environmental care, protection and conservation.	4.17	Frl
10. The Center links/networks with partners/stakeholders to contribute, develop and sustain programs that will, among others, promote the safety and protection of young children from abuse and neglect.	4.33	Ful
Overall Weighted Mean	4.32	FuI

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Fully Implemented (FuI)

    3.40-4.19   -   Frequently Implemented (FrI)

    2.60-3.39   -   Sometimes Implemented (SI)

    1.80-2.59   -   Partially Implemented (PI)

    1.00-1.79   -   Not at All Implemented (NAI)

In contrast, the lowest weighted mean, 4.17 noted as Frequently Implemented (Frl), is found in Indicator 9, which pertains to "Curricular activities include educational community trips to improve young children's exposure to community facilities and resources for them to be aware of one's culture, and environmental care, protection and conservation." At the lowest frequency, this shows that educational community trips are rare or sporadic within the program. The lack of regularity reduces the effectiveness of these experiences in fostering cultural awareness and environmental responsibility, highlighting a need for greater integration of community-based learning into the curriculum.

The data reflect that early childhood centers are relatively strong in initiating family engagement, particularly through parent orientation and regular communication. Yet, there is room for improvement in providing experiential learning opportunities that connect classroom concepts to the outside world. This was affirmed by Naeem (2022) that learning at an earlier age is the cornerstone of personal growth, whereas experiential learning is the basis for constructing a career. Strengthening this aspect enriches the curriculum further and deepen children's understanding of their environment and community roles.

Leadership, Program Management and Support. Table 14 assesses ten indicators focused on the administrative and managerial aspects of early childhood education and development programs. The overall weighted mean is 4.06, which falls under the Frequently Implemented (Frl) category. This suggests that while leadership and management practices are generally in place, there is still considerable room for improvement to achieve full implementation.

The highest weighted mean, 4.32 noted as Fully Implemented (Ful), appears in Indicator 7, "The program has procedures for referring parents to appropriate services for the child and his/her family, including but not limited to dental/medical check-up, vision and/or hearing screening, kindergarten screening, social, mental health and educational and medical services, should the staff feel that assessment for such additional services would benefit the child." This emphasized that the program consistently and proactively implements clear procedures for referring families to a wide range of support services. This also shows a strong commitment to the holistic well-being of children by ensuring timely access to dental, medical, developmental, and mental health services whenever staff identify a need, as well as being aware of health education. The result was corroborated by Ramos-Pla and Casol (2025), who revealed that health education in early childhood education is essential for

promoting healthy habits, for students' overall development, and for the wellbeing of the community. It emphasizes the significance of interdisciplinary approaches, teacher preparation, and health literacy to ensure its effectiveness and sustainability.

Table 14. Level of Implementation of ECCD Program in terms Leadership, Program Management and Support

Indicators	Weighted Mean	Interpretation
1. The Public CDC provides evidence of its authority to operate programs under the Local Government Unit, as provided in R.A. 10410 known as the "Early Years Act of 2013."	4.24	Ful
2. The Plan is cooperatively prepared by the CDC Committee composed of the Municipal Mayor as the Chairperson, the City/Municipal Social Development Officer, and the Principal of the nearby elementary school as Vice-Chairpersons; with the Barangay Captain, the Barangay Nutrition Scholar, the Barangay Health Worker, and the Child Development Teacher/Worker as Members. In the planning, parent representatives are invited. For the Public NGA/GOCC and Private Learning Center, the Director/Principal and the Members of the Board and parent representatives are tasked to prepare this Plan.	4.21	Ful
3. The Plan contains the Vision, Mission, Goals, Objectives, Activities, Budget Allocation, Target Date, Persons Involved and Output Indicators.	4.29	Ful
4. A Center Report Card/Annual Accomplishment Report is prepared by the Child Development Teacher/Worker in consultation with the C/MSWDO Focal Person for ECCD Program for the public CDCs and with the Administrator/Director/Principal for private CDC/LC, and presented to the Committee and parents at the end of the school year. This Report is the basis for the succeeding school year's Annual Work and Financial Plan.	4.26	Ful
5. The supervisory oversees the development and maintenance of the Center and its early childhood curriculum and programs.	4.17	Frl
6. Records of the results of supervisory visits are made available to the Child Development Teacher/Worker and to the Teacher Aide, and shall serve as the bases for the performance evaluation of these staff.	4.17	Frl
7. The program has procedures for referring parents to appropriate services for the child and his/her family, including but not limited to dental/medical check-up, vision and/or hearing screening, kindergarten screening, social, mental health and educational and medical services, should the staff feel that assessment for such additional services would benefit the child.	4.32	Ful
8. The salary of the public CDT/CDW will be based on the Salary Grade of Teacher I (II) of the Department of Education, but the amount will depend on the monthly salary schedule of the local government personnel per DBM Local Budget Circular no. 99 dated May 25, 2012.	2.61	SI
9. The confidential personnel record includes, but is not limited to the following: • employee's resume,	4.20	Ful

• documentation that the employee has qualifications required for the position, • reference verification, • medical and dental records, • documentation of staff in-service training, • annual evaluation, • attendance records, and • verification that the employee has received and understood program policies.		
10. The records of personnel files are updated and well-maintained, and the management upholds the confidentiality of these files.	4.17	FrI
Overall Weighted Mean	4.06	FrI

Rating Scale: Descriptive Interpretation:

4.20-5.00   -   Fully Implemented (FuI)

3.40-4.19   -   Frequently Implemented (FrI)

2.60-3.39   -   Sometimes Implemented (SI)

1.80-2.59   -   Partially Implemented (PI)

1.00-1.79   -   Not at All Implemented (NAI)

However, the lowest weighted mean is 2.61 noted as Sometimes Implemented (SI), is found in Indicator 8, which relates to the salary of the CDWs be based on the Salary Grade of Teacher I of the Department of Education, but the amount will depend on the monthly salary schedule of the local government personnel per DBM Local Budget Circular no. 99 dated May 25, 2012. This indicates that while there is a formal basis for determining the salary of public CDW staff, actual implementation is inconsistent or infrequent. Salaries vary significantly depending on local and barangay government budgets, leading to potential disparities and uncertainty in compensation. With this, staffs claimed that they feel discouraged and unmotivated due to low pay. Thus, it was affirmed by Morrissey and Bowman (2023) that low compensation and precarity of employment lead to poorer worker outcomes, staff turnover, and other issues that may have an impact on parents' employment, children's development, and staff well-being.

Relationship between the Profile and their Level of Implementation of Early Childhood Care and Development (ECCD) Program

Table 15 shows that the age profile of the respondents is in significant relationship with the level of implementation particularly on interaction and relationship between staff and children and among children and adults (d=-.229). This implies that the age of the respondents particularly those 46 and above have a low level of implementation particularly on the provision of developmentally appropriate materials and equipment, arranged in a manner that is visible and readily accessible to children so that children including those with special needs may select, remove and replace the materials independently or with minimum assistance. On the other hand, those aged 25 to 31, young generation, treat children and adults with equal respect, regardless of gender, race, age, language, religion, culture and family background. As well as encourages self-discipline among

children and parents, following the Center's arrangement and daily schedule, and allowing children to resolve their own conflicts as appropriate.

Moreover, the civil status of the respondents has significant relationship on staff qualifications development and continuing education (C=.582) and on family involvement and community linkages (C=.430). This implies that married teachers or Child Development Workers (CDWs) are more likely completed basic trainings or seminars related to Early Childhood Care and Development or Early Childhood Education. In addition, married teachers also provide a clear orientation on child protection programs and services to parents/families/guardians and on health, nutrition, early learning and social services.

Similarly, the number of years in teaching has significant relationship with the level of implementation along leadership program management and support (d=-.260). This implies that teachers who are ten years and below in teaching tend to perceive a low level of implementation on their salary of the public CDW which is based on the Salary Grade of Teacher I (II) of the Department of Education, and the amount depend on the monthly salary schedule of the local government personnel per DBM Local Budget Circular no. 99 dated May 25, 2012. Conversely, those who are above 30 years in teaching tend to perceive procedures for referring parents to appropriate services for the child and his/her family, including but not limited to dental/medical check-up, vision and/or hearing screening, kindergarten screening, social, mental health and educational and medical services, should the staff feel that assessment for such additional services would benefit the child. The same level of implementation is also true to the number of relevant trainings attended by the teachers (d=-.330), which implies that teachers who have more training received the level of implementation on leadership program management and support as highly implement.

Meanwhile, other profile has no significant relationship on the level of implementation of Early Childhood Care and Development (ECCD) Program. This means that differences in these characteristics do not greatly affect how well the program is carried out. For instance, sex has no significant relationship, implying that both male and female CDWs are equally capable of implementing ECCD tasks.

Table 15. Test for Significant Relationship between the Profile and their Level of Implementation of ECCD Program

Level of Implementation	Profile												
	Age		Sex		Civil Status		Educational Attainment		Honoraria		Years in Teaching		Relevant Trainings Attended	
	d	p-value	C	p-value	C	p-value	d	p-value	d	p-value	d	p-value	d	p-value
Health, Nutrition and Safety	-.030	.824	.238	.264	.252	.877	-.262	.317	.198	.168	-.074	.617	-.089	.546
Physical Environment and Safety	-.174	.121	.200	.251	.351	.158	.046	.633	.117	.280	-.144	.210	-.146	.222
Interaction and relationships between staff and children, among children and adults	-.229*	.042	.103	.871	.314	.615	-.022	.313	.005	.971	-.168	.186	-1.26	.331
Staff Qualifications, Development	-.018	.883	.070	.851	.582**	.000	-.025	.311	.195	.128	-.109	.376	-.056	.658

and Continuing Education														
Curriculum, Instruction and Assessment	.032	.766	.193	.278	.389	.068	-.028	.309	.133	.267	-.115	.313	-.025	.839
Family Involvement and Community Linkages	.027	.804	.189	.294	.430*	.021	-.027	.309	.170	.166	-.156	.173	-.104	.355
Leadership, Program Management and Support	.037	.717	.081	.933	.252	.877	-.035	.308	.062	.588	-.260*	.014	-.330**	.003

**Association is Significant @ 0.01

*Association is Significant @ 0.05

These results show that certain profile influence how aspects of the ECCD program is implemented or perceived. Ynion et al. (2025) affirmed that it is crucial to comprehend the profile of teachers since it has a direct impact on the standard of ECCD service delivery and, consequently, the developmental outcomes of the learners. They revealed teachers were predominantly female, mostly between the ages of 56 and 60, married, college graduates, and had completed 6 to 10 ECCD trainings - indicating a highly experienced and professionally committed workforce. In terms of curricular facilitation, safety, classroom administration, and community involvement, the city's barangays' overall ECCD program implementation is evaluated as excellent. Furthermore, parents expressed great satisfaction with the services they received, which is indicative of excellent stakeholder alignment and trust in early childhood education.

Challenges Faced by Child Development Workers in the Implementation of the Program

This section shows the challenges faced by Child Development Workers (CDWs) in the implementation of ECCD program. This is composed of seven indicators consisted of health, nutrition, and safety, physical environment and safety, interactions and relationships between staff and children, among children and other adults, staff qualifications, staff development and continuing education, curriculum, instruction and assessment, family involvement and community linkages, and leadership, program management and support.

Health, Nutrition and Safety. Table 16 identifies areas where early childhood centers face varying degrees of difficulty in meeting health and safety standards. The overall weighted mean is 4.06, which falls under moderately challenging (MC). This shows that, on average, most health and safety-related issues are being managed but still present moderate difficulties for staff and management.

The highest weighted mean, 4.32 noted as Very Challenging (VC), is found in Indicator 7, which involves disaster management, including fire, flood, and earthquake drills. This indicates that in the centers, disaster preparedness is perceived by the staffs as the most challenging area within this domain, due to limited to absence of resources, training, and coordination with local emergency services.

Conversely, the lowest weighted mean, 2.61 noted as Challenging (C), appears in Indicator 8, which concerns the center's procedure for reporting injuries, accidents, or problems. This poses minimal concern compared to other indicators, hence, still have constraints such as gaps in documentation, communication, and follow-through when incidents occur. Such weaknesses can compromise children's safety, delay necessary responses, and reduce accountability among staff.

Table 16. Challenges in the Implementation of ECCD Program along Health, Nutrition and Safety

Indicators	Weighted Mean	Interpretation
1. The staff at the Center is aware of and considers the child's written health record, which is kept as part of the child's specific file.	4.24	VC
2. Malnourished children, especially those with specific needs (underweight, stunted, and wasted), are cared for according to the Center's documented procedure until they are able to recover or return to their normal state.	4.21	VC
3. The Center promotes and implements proper hand washing practices for children and staff, and hand washing messages are properly displayed in dining and toilet facilities.	4.29	VC
4. A source of clean and sanitary drinking water is available to young children, and if the public or private well is used, the Center provides evidence that the water source has been inspected and approved by an authorized agency.	4.26	VC
5. Foods are properly prepared in a clean facility, stored in clean covered containers and served safely; if transported, these should be in appropriate sanitary containers.	4.17	MC
6. The Center and its surrounding area maintain a smoke-free environment.	4.17	MC
7. Disaster management, including but not limited to, fire and/or earthquake drills for young children are provided at least twice a year.	4.32	VC
8. The Center has a procedure for reporting injuries, accidents or problems that may occur that require rapid response on the part of the staff.	2.61	C
9. A first aid kit is available at all times in the Center and is replenished as often as necessary.	4.20	VC
10. The Center facilitates the conduct of child-protection seminars related to child abuse and neglect, with the participation of parents and authorized caregivers. Written procedures are available for protecting children against abuse and neglect.	4.17	MC
Overall Weighted Mean	4.06	MC

Rating Scale: Descriptive Interpretation:

4.20-5.00 - Very Challenging (VC)

3.40-4.19 - Moderately Challenging (MC)

2.60-3.39 - Challenging (C)

1.80-2.59 - Slightly Challenging (SC)

1.00-1.79 - Not at All Challenging (NAC)

Lee et al. (2023) affirmed that in order to improve the resilience and work-related disaster preparedness (WrDP) of early childhood teachers (ECTs), it is necessary to first increase their self-efficacy and general disaster preparedness (GdP). This would ensure the safety and disaster preparedness of ECTs who have low self-care capacity.

Physical Environment and Safety. Table 17 presents the difficulties encountered in maintaining and providing a safe, functional, and developmentally appropriate physical environment in early childhood centers. The overall weighted mean is 3.44, which falls under the category of Moderately Challenging (MC). This indicates that while efforts are being made to maintain safe and suitable environments, challenges persist that affect full implementation.

The highest weighted mean, 3.58, is shared by Indicators 1 and 2, both noted as Moderately Challenging (MC), which deal with access to outdoor play areas and the regular inspection and maintenance of play equipment. This shows that ensuring safe and inclusive outdoor spaces remains a moderate to significant challenge, particularly for children with special needs or in facilities with limited space or resources.

Table 17. Challenges in the Implementation of ECCD Program along Physical Environment and Safety

Indicators	Weighted Mean	Interpretation
1. The Center maintains or has access to an outdoor play area accessible to young children, including those with special needs. Adequate space is provided with play equipment, and sufficient quantity and variety appropriate to the needs and ages of the young children.	3.58	MC
2. Play area and equipment are inspected and regularly maintained in good condition and in good repair.	3.58	MC
3. Play area is clearly visible to staff members at all times. There is a shaded area or protection from direct sunlight in the outdoor play area and pathways are clear for emergency evacuation and accessible to individuals.	3.42	MC
4. The classroom environment is safe, clean and maintained free from pests.	3.44	MC
5. There is an adequate space for classroom activities exclusive of lockers, bathrooms, closets and areas regularly used for other purposes.	3.30	C
6. All areas are well lighted and ventilated.	3.48	MC
7. Equipment or materials for fire prevention and management (e.g. fire extinguishers, bags of sand, covered pails of water) are available.	3.52	MC
8. Indoor play areas are defined clearly by spatial arrangement.	3.44	C
9. The Center uses materials/toys that are appropriate to children's age and stage of development, reflecting a wide variety of family backgrounds.	3.35	C
10. The Center has hygiene, toilet and hand washing facilities for teaching and learning proper hygiene and cleanliness so children	3.33	C

could experience the development of health habits through demonstration.		
Overall Weighted Mean	3.44	MC

Rating Scale: Descriptive Interpretation:

      4.20-5.00   -   Very Challenging (VC)

      3.40-4.19   -   Moderately Challenging (MC)

      2.60-3.39   -   Challenging (C)

      1.80-2.59   -   Slightly Challenging (SC)

      1.00-1.79   -   Not at All Challenging (NAC)

In contrast, the lowest weighted mean, 3.30 noted as Challenging (C), appears in Indicators 5, which involves adequate space for classroom activities exclusive of lockers, bathrooms, closets and areas regularly used for other purposes. This indicates limited infrastructure, overcrowding, and shared facilities that restrict the ideal learning environment for children. Though overcrowding is recognized, budget constraints prevent construction or renovation to expand the classroom area.

Karlidag (2021) affirmed that the most crucial components of the preschool learning environment are the learning centers. Hence, the data indicates that while ECCD centers are striving to provide safe, developmentally appropriate physical environments, they face consistent infrastructure and maintenance challenges. Ugwuanyi and Okeke (2023) affirmed that many issues and demands such as the need for funding, poor facilities, low parental participation, packed classroom rural community needs, lack of access to and poor quality of ECD programs and services lead to low primary school survival rates, limited access to health care, and nutritional intervention. The lower scores for classroom adequacy and hygiene suggest foundational gaps that can impact children's health and learning experience.

Interactions and Relationships between Staff and Children, among Young Children and Other Adults. Table 18 outlines the difficulties encountered in fostering meaningful and developmentally appropriate interactions within early childhood education settings. The overall weighted mean is 3.62, categorized as Moderately Challenging (MC), indicating that while relationships and interactions are being addressed, they are not without consistent implementation barriers.

The highest-rated indicator, with a weighted mean of 3.77 noted as Moderately Challenging (MC), is found in Indicator 8, which pertains to having rules and procedures posted in a noticeable place and discussed with parents during meetings. This indicates that while most centers recognize the importance of clear communication and transparency, implementation is not always consistent due to time, materials, or engagement issues.

Table 18. Challenges in the Implementation of ECCD Program along Interactions and Relationships between Staff and Children, among Young Children and Other Adults

Indicators	Weighted Mean	Interpretation
1. Young children are given opportunities to choose and interact with a variety materials and activities in which they can play independently or with other peers, with or without the supervision of the teacher/Child Development Specialist or other staff members.	3.76	MC
2. The staffs encourage children to delve into activities, share experiences, ideas and feelings, and assist them in dealing with emotions such as	3.52	MC

	anger, sadness and frustration, by comforting and helping them to solve their problems.		
3.	The staffs treat children and adults with equal respect, regardless of gender, race, age, language, religion, culture and family background.	3.68	MC
4.	The staffs provide all children, including those with special needs, with equal opportunities to take part in their activities to be able to interact according to their capabilities.	3.67	MC
5.	The staff provide opportunities for children to develop self-help, problem-solving and decision-making skills, such as dressing and undressing, personal hygiene and using eating utensils appropriately with adjustment for children with special needs, fine and motor skills, cognitive, aesthetic arts and language development.	3.74	MC
6.	The Center provides developmentally appropriate materials and equipment, arranged in a manner that is visible and readily accessible to children so that children including those with special needs may select, remove and replace the materials independently or with minimum assistance.	3.56	MC
7.	The program has written statements defining the rules, policies and procedures for the behavior management of three (3) to four (4) year old children, directed towards the goal of maximizing their growth and development, and protecting the group and individuals within it.	3.62	MC
8.	The Center have rules and procedures posted in a noticeable place and provided to and discussed with parents during Parents Teachers Meetings Association/Parents Teachers and Community meetings.	3.77	MC
9.	The program uses positive behavior management techniques, such as setting reasonable and positive expectations, offering choices and providing children an opportunity to verbalize their feelings, which encourage children to develop self-control through understanding.	3.45	MC
10.	The Center encourages self-discipline among children and parents, following the Center's arrangement and daily schedule, and allowing children to resolve their own conflicts as appropriate.	3.45	MC
Overall Weighted Mean		3.62	MC

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Very Challenging (VC)

    3.40-4.19   -   Moderately Challenging (MC)

    2.60-3.39   -   Challenging (C)

    1.80-2.59   -   Slightly Challenging (SC)

    1.00-1.79   -   Not at All Challenging (NAC)

Contrariwise, the lowest-rated indicator, each with a weighted mean of 3.45, appear in Indicators 9 and 10, both noted as Moderately Challenging (MC). These relate to implementing positive behavior management and encouraging self-discipline among children and parents, respectively. These are essential yet nuanced areas requiring consistent guidance, emotional support, and reinforcement both in the center and at home. Meanwhile, inconsistent approaches and limited understanding of positive guidance can hinder children's emotional growth and ability to manage conflicts independently. The data also show that although the ECCD program is generally effective, however, there are recurring challenges in the implementation of behavioral and relationship-building components, particularly in ensuring positive discipline and consistency between home and center environments. These moderate challenges potentially hinder the holistic development of children and the smooth execution of center policies. Consequently, Cadosales et al. (2020) corroborated that establishing and maintaining solid alliances with parents, as well as the governmental bodies, and non-governmental groups assists the daycare providers in creating long-lasting and successful support system.

Staff Qualifications, Staff Development and Continuing Education. Table 19 outlines the perceived obstacles in ensuring that Child Development Workers (CDWs) meet the professional standards necessary for high-quality early childhood education. The overall weighted mean is 3.37, which falls under the Challenging (C) category, shows that although efforts are being made, significant barriers persist in developing and maintaining a qualified and well-trained workforce.

The highest weighted mean of 3.52, appears in two indicators: Indicator 6, which pertains to staff needing good physical and emotional condition, and Indicator 7, which concerns the provision of regular training programs based on needs assessments. Both were interpreted as Moderately Challenging (MC), ensuring that maintaining staffs' well-being and ensuring ongoing professional development require resources, institutional support, and consistent implementation, which are often limited. These also highlight issues specifically burnout, emotional fatigue, and gaps in ongoing capacity-building efforts, critical factors that affect the ability of staff to deliver quality care and instruction.

On the other hand, the lowest weighted mean, 3.15, is recorded under Indicator 1, which pertains to whether the CDW has a Bachelor's degree in any field. This was interpreted as merely Challenging (C), showing that academic qualifications, while still a concern, are not as pressing an issue as other more operational or logistical factors like training, continuing education, and physical capability.

Table 19. Challenges in the Implementation of ECCD Program along Staff Qualifications, Development and Continuing Education

Indicators	Weighted Mean	Interpretation
1. The Child Development Worker (CDW) has a Bachelor's Degree in any field.	3.15	C
2. The Child Development Worker (CDW) has completed basic trainings or seminars related to Early Childhood Care and Development or Early Childhood Education.	3.32	C
3. The Child Development Worker (CDW) has skills in community mobilization and effective oral communication.	3.39	C
4. The Child Development Worker (CDW) has a Barangay Certificate/NBI Clearance with three (3) Character References.	3.24	C
5. The other important requirements for the staffs should preferably be between 18-45 years of age and/or has the necessary required physical stamina to attend to early learners.	3.47	MC

6. The other important requirements for the staffs should have good physical and stable emotional condition.	3.52	MC
7. There is a regular and continuous training program based on a training needs assessment, which provides CDTs/CDWs opportunities to enhance their skills and strengthen their values that include but are not limited to: working with children and families with and special needs; conducting assessment and appropriate intervention for children's progress; mentorship of parents on the care and education of young children; laws on child protection and development; and current trends and strategies in early childhood education.	3.52	MC
8. The management provides opportunities for CDTs/CDWs to gain professional and personal growth in a variety of modes (e.g. enrollment in colleges, online training, special courses, etc.) and through mentoring, classroom observations, visits to Early Childhood Education programs, and attendance at conferences and workshops, among other events, and documentation on these are kept on file.	3.33	C
9. There is a regular performance appraisal conducted by the supervisor that follows a standard procedure such as quarterly meetings or observations of actual instruction to follow up program implementation and provide technical assistance.	3.42	MC
10. There are opportunities for advancement position and compensation.	3.38	C
Overall Weighted Mean	3.37	C

Rating Scale: Descriptive Interpretation:

    4.20-5.00   -   Very Challenging (VC)

    3.40-4.19   -   Moderately Challenging (MC)

    2.60-3.39   -   Challenging (C)

    1.80-2.59   -   Slightly Challenging (SC)

    1.00-1.79   -   Not at All Challenging (NAC)

Asserted by Lessard et al. (2020), where high percentage recorded by ECE providers who was reported with depression and excessive stress are spending significant time being sedentary, and some report low diet quality. Corroborated by Elomaa et al. (2020), it is also crucial to give focus on the well-being of the directors and give educational leaders more support because their wellbeing affects the welfare of the child development center's employees. Further, directors reported feeling less stressed and worn out after completing in-service training as it offers venues for information exchange, communication, leadership, and practical tools for managing the workload. Yet, the low rating related to educational qualifications raises concerns about long-term competence, as it is still challenging, as it plays a vital role in ensuring staff are grounded in evidence-based practices. Santos (2023) affirmed that instructors are advised to obtain a master's degree with a focus on early childhood education as well as a number of seminars and trainings to assist teachers in enhancing their efficiency.

Curriculum, Instruction and Assessment. Table 20 presents the difficulties faced in delivering an effective and developmentally appropriate curriculum in ECCD centers. The overall weighted mean is 3.40, interpreted as Moderately Challenging (MC). This implies that while the curriculum framework and instructional practices are being followed to an extent, several implementation barriers continue to hinder optimal delivery.

The highest weighted mean, 3.59, is found in Indicator 3, which refers to group time and activity center plans which indicate adaptations/modifications necessary for facilitating young children with disabilities or children with special needs to meet their learning goals and objectives. Classified as Moderately Challenging (MC), this means that CDWs are making efforts to adjust activities to meet diverse learning needs, but they still face some difficulties in fully planning or implementing these adaptations

Table 20. Challenges in the Implementation of ECCD Program along Curriculum, Instruction and Assessment

Indicators	Weighted Mean	Interpretation
1. The curriculum is based on information derived from a variety of sources about children in the three (3) and four (4) years age group in the six domains: physical health, well-being and motor development, social-emotional development, character and values development, cognitive and intellectual development, language development, and creative and aesthetic development.	3.39	C
2. Curriculum goals, objectives and activities are based on the individual needs and interests of the young children, allowing for a range of activities that provide them early stimulations for active involvement in the learning process through play, concrete experiences and the exploration of the environment whether in individual, small group or whole group settings.	3.38	C
3. Group time and activity center plans indicate adaptations/modifications necessary for facilitating young children with disabilities or children with special needs to meet their learning goals and objectives.	3.59	MC
4. Activity areas are provided to accommodate and encourage activities that are congruent with the curriculum, and are equipped with manipulative and interactive materials and equipment that are readily accessible to promote concrete and interactive learning, and to encourage peer interactions.	3.53	MC
5. Both indoor and outdoor time and space are available for active physical and motor activities, quiet play and play that fosters development of values such as respect, empathy, care, cooperation and self-esteem.	3.41	MC
6. The curriculum integrates concepts that promote healthy life among young children, such as but not limited to water, sanitation, hygiene and safety.	3.44	MC
7. Experiences are provided for language and literacy development, development of mathematical concepts, development of scientific concepts, self-expression in art, music, movement and dance, and dramatic play.	3.24	C
8. Data from assessments are also used to adapt curriculum, activities, practices, routines and settings to meet the needs of young children.	3.23	C
9. The program maintains at least a minimum teacher-child ratio of 1:10, and if it reaches the maximum of 1:25, there is a teacher-aide/assistant/trained parent or trained adult volunteer.	3.42	MC
10. There is a minimum of two adults trained in health care, nutrition and emergency procedures.	3.33	C

Overall Weighted Mean	3.40	MC

Rating Scale: Descriptive Interpretation:

      4.20-5.00   -   Very Challenging (VC)

      3.40-4.19   -   Moderately Challenging (MC)

      2.60-3.39   -   Challenging (C)

      1.80-2.59   -   Slightly Challenging (SC)

      1.00-1.79   -   Not at All Challenging (NAC)

Conversely, the lowest-rated mean of 3.23 interpreted as Challenging (C), is Indicator 8. This addresses how data from assessments are used to adapt curriculum and instruction to the needs of children. A rating this low shows that centers struggle to effectively use assessment data to modify teaching and practice.

The data underscore several systemic gaps in curriculum planning and delivery. Key instructional processes, such as adapting materials based on assessments and ensuring all domains of development are addressed, remain challenging. Additionally, while there is some level of support for inclusive education, the ratings show that implementation is inconsistent and under-resourced. These issues limit the quality of early learning experiences and delay developmental progress for some children, especially those with unique learning needs. Hence, Nachon et al. (2025) affirmed that providing additional support, interventions, extension, and training services to child development workers can improve the eight (8) ECCD Domains of child development.

Family Involvement and Community Linkages. Table 21 illustrates the various obstacles encountered in engaging families and external stakeholders in early childhood care and development programs. The overall weighted mean is 3.48, interpreted as Moderately Challenging (MC). This shows that while efforts are being made to involve families and communities, there are still significant gaps that hinder full integration and support.

Table 21. Challenges in the Implementation of ECCD Program along Family Involvement and Community Linkages

Indicators	Weighted Mean	Interpretation
1. The Center provides a clear orientation on child protection programs and services to parents/families/guardians and on health, nutrition, early learning and social services.	3.48	MC
2. Written information about the delivery of programs and services, and policies of the Center are provided to parents upon the admission of their young children to the Center. There should be signed agreements with parents in relation to the rules and regulations of the Center.	3.44	MC
3. Opportunities are given to parents/authorized guardians/caregivers to participate in the Parent education or Responsible Parenthood (e.g. Parent Effectiveness Services Seminar (PESS), Empowerment Reaffirmation of Paternal Abilities Training (ERPAT), reinforcing/promoting positive behavior, alternative discipline); Family Support Program; Curriculum review and development of instructional materials; Children's assessment of their growth and development; and Trainings on First Aid, Disaster Preparedness, PABASA sa Nutrisyon, and Nutrition in Emergencies; to enhance their knowledge and skills for the development of the full potential of their young children.	3.45	MC

4. Family members and guardians are given written instructions to attend the organization of Child Development Center Parents' Organization/Committee.	3.41	MC
5. Family members and guardians are given written instructions to attend the CDTs/CDWs, Parents and Barangay officials conduct of regular meetings to develop the Center's Improvement Plan (CIP) and its implementation, and to evaluate the implemented activities.	3.58	MC
6. The Center's program is sustainable through the parents' support by ensuring continuity of the significant activities being done in the Center (e.g. hand washing, tooth brushing, etc.).	3.52	MC
7. The Center's program is sustainable through the parents' support by promoting parents/authorized guardians/caregivers to become active volunteers of the Center and the community.	3.53	MC
8. The Center mobilizes the community during outreach programs and other Center activities.	3.44	MC
9. Curricular activities include educational community trips to improve young children's exposure to community facilities and resources for them to be aware of one's culture, and environmental care, protection and conservation.	3.52	MC
10. The Center links/networks with partners/stakeholders to contribute, develop and sustain programs that will, among others, promote the safety and protection of young children from abuse and neglect.	3.48	MC
Overall Weighted Mean	3.48	MC

Rating Scale: Descriptive Interpretation:

4.20-5.00	-	Very Challenging (VC)
3.40-4.19	-	Moderately Challenging (MC)
2.60-3.39	-	Challenging (C)
1.80-2.59	-	Slightly Challenging (SC)
1.00-1.79	-	Not at All Challenging (NAC)

The highest weighted mean, at 3.58 interpreted as Moderately Challenging (MC), is found in Indicator 5, family members and guardians are given written instructions to attend the CDTs/CDWs, Parents and Barangay officials conduct of regular meetings to develop the Center's Improvement Plan (CIP) and its implementation, and to evaluate the implemented activities. This indicates that while meetings and coordination efforts do occur, attendance, consistency, and active participation from families and officials are not always sustained.

On the other hand, the lowest score is attributed to Indicator 4, with a weighted mean of 3.41 noted as Moderately Challenging (MC). This indicator involves the provision of written instructions to organize Child Development Center Parent's Committees. The low score shows that while efforts are made to inform and involve parents, attendance, communication, and engagement often fall short due to practical and social constraints.

The table highlights that engaging families and communities remains a moderately challenging area in ECCD implementation. While there is a structured approach to encouraging involvement, such as orientations, volunteer opportunities, and written communications, the moderately low scores reveal gaps in execution. Reasons include limited parental availability, lack of interest or understanding of their role in ECCD, and inconsistent implementation of community linkage programs across different centers. Corroborated by Bartolome et al. (2020), who stated that the parents' strong involvement in CDS's success. This could be achieved through 1) meaningful home-school communication, 2) collective in-school engagement, 3) structural at-home learning support, and 4) improving teachers' ability to contribute to the creation of a school-facilitated parenting involvement framework that includes the role of teachers in organizing, creating, and assessing parental involvement programs.

Leadership, Program Management and Support. Table 22 outlines the difficulties encountered in managing and supporting ECCD programs. The overall weighted mean is 3.58, interpreted as Moderately Challenging (MC). This indicates that while implementation structures are somewhat in place, notable barriers still impede smooth program management and leadership operations.

Indicator 8 got the highest weighted mean of 4.05 which pertains to the salary of the Child Development Worker (CDW) being aligned with the salary grade of Teacher I (II) of the Department of Education, though still dependent on the local government unit's salary schedule. This shows that although there is a guideline, its implementation varies across local government units (LGUs) due to differences in budget capacity and prioritization. The barangays have limited local funds, resulting in CDWs receiving lower honoraria instead of the full salary grade prescribed by the DBM circular.

On the other hand, the lowest score is 3.36, interpreted as Challenging (C), found in Indicator 9, which concerns the confidential personnel record system, including resume, documentation, qualification verification, in-service training, evaluations, and attendance records. This shows that maintaining a confidential and well-organized personnel record system requires consistent documentation, secure storage, and administrative capacity, all of which are often limited in many local office or centers.

Table 22. Challenges in the Implementation of ECCD Program along Leadership, Program Management and Support

Indicators	WeightedMean	Interpretation
1. The Public CDC provides evidence of its authority to operate programs under the Local Government Unit, as provided in R.A. 10410 known as the "Early Years Act of 2013."	3.56	MC
2. The Plan is cooperatively prepared by the CDC Committee composed of the Municipal Mayor as the Chairperson, the City/Municipal Social Development Officer, and the Principal of the nearby elementary school as Vice- Chairpersons; with the Barangay Captain, the Barangay Nutrition Scholar, the Barangay Health Worker, and the Child Development Teacher/Worker as Members. In the planning, parent representatives are invited. For the Public NGA/GOCC and Private Learning Center, the Director/Principal and the Members of the Board and parent representatives are tasked to prepare this Plan.	3.58	MC
3. The Plan contains the Vision, Mission, Goals, Objectives, Activities, Budget Allocation, Target Date, Persons Involved and Output Indicators.	3.53	MC
4. A Center Report Card/Annual Accomplishment Report is prepared by the Child Development Teacher/Worker in consultation with the C/MSWDO Focal Person for ECCD Program for the public CDCs and with the Administrator/Director/Principal for private CDC/LC, and presented to the	3.55	MC

Committee and parents at the end of the school year. This Report is the basis for the succeeding school year's Annual Work and Financial Plan.		
5. The supervisory oversees the development and maintenance of the Center and its early childhood curriculum and programs.	3.55	MC
6. Records of the results of supervisory visits are made available to the Child Development Teacher/Worker and to the Teacher Aide, and shall serve as the bases for the performance evaluation of these staff.	3.56	MC
7. The program has procedures for referring parents to appropriate services for the child and his/her family, including but not limited to dental/medical check-up, vision and/or hearing screening, kindergarten screening, social, mental health and educational and medical services, should the staff feel that assessment for such additional services would benefit the child.	3.53	MC
8. The salary of the public CDT/CDW will be based on the Salary Grade of Teacher I (II) of the Department of Education, but the amount will depend on the monthly salary schedule of the local government personnel per DBM Local Budget Circular no. 99 dated May 25, 2012.	4.05	MC
9. The confidential personnel record includes, but is not limited to the following: • employee's resume, • documentation that the employee has qualifications required for the position, • reference verification, • medical and dental records, • documentation of staff in-service training, • annual evaluation, • attendance records, and • verification that the employee has received and understood program policies.	3.36	C
10. The records of personnel files are updated and well-maintained, and the management upholds the confidentiality of these files.	3.58	MC
Overall Weighted Mean	3.58	MC

Rating Scale: Descriptive Interpretation

     4.20-5.00   -   Very Challenging (VC)

     3.40-4.19   -   Moderately Challenging (MC)

     2.60-3.39   -   Challenging (C)

1.80-2.59   -   Slightly Challenging (SC)

1.00-1.79   -   Not at All Challenging (NAC)

The majority of the indicators fall within the moderately challenging range, indicating that foundational leadership structures exist but are not without hurdles. Bipath et al. (2021) attested that quality improvement and maintenance depend heavily on leadership. The result is affirmed by Anyidoho and Ogina (2025), who highlighted that to allocate resources, define tasks, and align organizational functions in order to accomplish operational and educational goals, directors use functional integration and task alignment, task definition and role assignment, delegation and authority, and resource allocation and management.

Relationship between the Level of Implementation of Early Childhood Care and Development (ECCD) Program and the Challenges Faced

Table 23 presents the results of a statistical test examining the relationship between the level of implementation and the challenges faced in ECCD across various program components. Each row corresponds to a specific domain with correlation coefficients (r) and p-values listed.

It can be seen in Table 23 that the correlation coefficients (r) for all variables tested were not statistically significant as indicated by p-values greater than 0.05 (p-values>.05). Consequently, the decision across all areas is to "Fail to Reject" the null hypothesis, with the remarks column consistently marked as "ns" (not significant). So, there is no significant relationship that exists between how well the ECCD is implemented and the extent of challenges faced. The results show that the level of implementation of ECCD Programs does not predict or influence the challenges faced and vice versa, which means that high implementation levels do not necessarily reduce challenges.

Table 23. Test for Significant Relationship between the Level of Implementation and Challenges Faced in Early Childhood Care and Development

Level of Implementation	Challenges		Decision	Remarks
	r	p-value		
1. Health, Nutrition and Safety	-.025	.843	Failed to Reject	ns
2. Physical Environment and Safety	-.153	.219	Failed to Reject	ns
3. Interaction and relationships between staff and children, among children and adults	.104	.405	Failed to Reject	ns
4. Staff Qualifications, Development and Continuing Education	-.136	.277	Failed to Reject	ns
5. Curriculum, Instruction and Assessment	.028	.825	Failed to Reject	ns
6. Family Involvement and Community Linkages	.049	.695	Failed to Reject	ns
7. Leadership, Program Management and Support	.009	.941	Failed to Reject	ns

*ns- Not significant if p>.05.

The result is attested by Magoma et al. (2025), who affirmed that significant challenges still exist in spite of investments in ECD programs, highlighting the necessity of offering kids top-notch services that promote nurturing care and reduce developmental hazards. Moreover, issues including insufficient funding, insecurity, extreme weather, food insecurity, poor infrastructure, restricted early learning opportunities, and inadequate healthcare access all impede quality and effectiveness. So, increasing ECD financing, boosting early learning opportunities, improving healthcare, encouraging livelihood diversification, and tackling food and security instability are some of the recommendations. Additionally, Alade (2023) corroborated that according to government officials, donors, and partners, the political commitment, the availability of a comprehensive or multisectoral ECD policy, the availability of resources, and the integration of ECD programs into current government structures are the most prevalent contextual factors influencing the scale-up of ECD programs.

CONCLUSIONS

The study highlights that the ECCD program in Daet is generally well implemented and supported by a mature, well-educated workforce, but several systemic challenges, such as limited resources, gaps in training, inadequate facilities, inconsistent family involvement, and low compensation, continue to hinder full implementation. It also shows that while some worker characteristics influence certain aspects of implementation, these challenges persist regardless of implementation level. The proposed brochure as intervention addresses the concern of awareness about the challenges faced by CDWs in Daet, Camarines Norte.

RECOMMENDATIONS

Thus, the LGU, barangays, CDWs, parents, and partner agencies may address ECCD challenges through focused actions. Regular disaster preparedness trainings, upgraded facilities, and clear communication of center rules may improve safety and daily operations. Staff development may be strengthened through wellness activities and needs-based trainings. Enhancing curriculum support, providing visual aids, and offering inclusive education training may further improve instruction. Strengthening family linkages through clear schedules, reminders, and collaborative workshops may boost participation. Lastly, the LGU may review CDW honoraria and develop policy proposals to ensure fair compensation and support.

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