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Save the Children

Early Childhood Development Forums

TELLING THE GOOD STORY:
NETWORKING TO SUCCESSFULLY ENHANCE OUTCOMES FOR YOUNG CHILDREN

EARLY CHILDHOOD DEVELOPMENT FORUMS IMPACT ASSESSMENT STUDY 2014

Early Childhood Development Forums - Telling the Good Story: Networking to successfully enhance outcomes for young children

Early Childhood Development Forums Impact Assessment Study 2014

Final Report

Economic Performance & Development Unit

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TABLE OF CONTENTS

iii

LIST OF FIGURES

LIST OF TABLES

LIST OF ABBREVIATIONS

CoJ – City of Johannesburg

DBE – Department of Basic Education

DSD – Department of Social Development

ECD – Early Childhood Development

HSRC – Human Sciences Research Council

IMCI – Integrated Management of Childhood Illness

KZN – KwaZulu-Natal

NDP – National Development Plan

NGO – Non-Governmental Organisation

NIP – National Integrated Plan

NPA – National Programme of Action for children

NPC – National Planning Commission

PMTCT – Prevention of Mother to Child Transmission

QLE – Quality Learning Environment

REC – Research Ethics Committee

SASSA - South African Social Security Agency

SCSA – Save the Children South Africa

EXECUTIVE SUMMARY

Introduction

The importance of investing in early childhood development (ECD) for human health, wellbeing and productivity has been well recognised (NPC Diagnostic Overview Report, 2011). Research suggests that the presence of promotive factors in the care environment can make a difference in the life of a child. Enhancing quality early childhood development interventions, particularly targeting children from disadvantaged communities, can prevent or offset potential negative impacts on a child's cognitive and social development.

Save the Children South Africa (SCSA) has been extensively involved over the past fifteen years in the early childhood development sector, specifically supporting ECD service providers through community based development forums which serve multiple objectives - including strengthening ECD practitioner capacities, showcasing best practices, facilitating and enabling collective action and advocacy, and enhancing quality of service provision to young children. It has commissioned the Human Sciences Research Council (HSRC) to conduct an evaluation of selected area-based ECD forums actively supported by SCSA in the KZN province.

The relevance of this study must be located in a principle espoused in the National Development Plan Vision 2030 (NPC, 2012, Chapter 15) of enabling and facilitating active citizenry through structures that would allow all development actors (the individual, communities, NGOs, government and even the private sector) to link with each other, share information, jointly address problems and challenges and develop strategies together that enable citizens to best claim their rights and exercise their responsibilities as envisaged by the Constitution of South Africa.

Purpose and Objectives

The overall objective of the call for proposals was to provide SCSA with the evidence base for supporting the replication and scaling up of development of ECD forums in KZN and nationally.

The specific objectives of the study as outlined by SCSA were as follows:

- To assess the change in ECD services based on the interventions linked to ECD forums.

- To identify the factors that have enabled the ECD sector in communities where SCSA has worked with forums to harness the value of working collectively to address needs and access opportunities in order to provide an effective ECD service.

Scope of the research

The scope of the research included:

- Undertaking a comparative analysis of ECD centres in Wentworth against a baseline measure established in 2011 to assess any changes arising from SCSA interventions targeted at those centres directly and through participation in the forum;

- Assessing ECD practitioner feedback on the value of participation in ECD Forums as well as in accessing the various interventions facilitated through the ECD forums in Wentworth, Umzinto, Tongaat, Lamontville as well as the provincial KZN Association of ECD Forums;

- Obtain community feedback on most beneficial interventions in Wentworth, Umzinto, Tongaat and Lamontville; and

- Analyse information from the assessment together with documented approaches to identify the most effective elements to the intervention.

Summary of Key Findings

The SAVE the Children South Africa ECD forum model

The intervention model is a multi-faceted and multi-dimensional model. It combines networking, knowledge dissemination, partnership development, peer reviews, capacity development, resource mobilisation and collective action. The model includes both direct and indirect support. Indirect support is seen in the approach where information is provided with the expectation that those accessing this knowledge will act on it. Direct actions include mentoring and support or the leveraging of resources.

Value and benefit of participation in forums

The report is peppered with anecdotes which speak to the power of collective action for the ECD centre, for the ECD practitioner, for the community at large and importantly for the young child.

This value is summarised in terms of Plastrik and Taylor's framework of the benefits of good networking practice, namely:

- the ability to rapidly and widely diffuse information, ideas and innovations

- the ability to build connections between forum members (bridge building)

- to build resilience amongst network members, many of whom have been members for a long time

- to develop adaptive capacity to address new or changing circumstances and respond to emerging needs

- to expand reach and scope of work, exponentially.

Evidence has been presented on how forum members have withstood stress, of displaying the spirit of 'Ubuntu', of self-regulation and for extensive leveraging of support in kind and in monetary value. The evidence is overwhelmingly presented of the positive outcomes of ECD forum participation for members, but also for external stakeholders such as the government.

Forum participation has promoted s*ocial cohesion* amongst members in terms of bonds linking them to one another outside of the core relationship as ECD forum members. The study illustrated how the social and solidarity economy has been fostered. Equally important, evidence has been presented of how forums serve a social protection function, enabling participants to be able to cope with and mitigate vulnerability to shocks and demonstrating the broader impact on advancing community development and empowerment.

Unevenness in the application of the model

The manner in which the forum model has been implemented appears to have privileged some stakeholders over others. The model's various dimensions are not uniformly available to all forums. Knowledge sharing and networking appear to be available to all forum members, while other interventions have been selectively directed to specific forums. In particular, the extensive investment of resources to one specific group of forum members has to be revisited as the impacts are clearly different. While it is understandable when something is being innovated that it is tested in a smaller area first, it hasn't necessarily led to a scaling up of the interventions in other areas. This is a limiting factor in the expansion of the forum footprint and its impact.

Leadership of the forum

There appears to be a strong perception of the ownership and leadership of forums as being vested in SCSA. This is demonstrated in expectations of the role of SCSA staff in resource mobilisation, chairing of meetings, networking with partners and of *'providing the answers'*. There is, however, acknowledgement that SCSA is trying to change this and that this is incrementally shifting.

However, there is a perception - although not widely articulated - of the control function exercised by SCSA. An example of this was in the concern expressed by a Wentworth ECD Forum member that SCSA *'undemocratically elected the chair.'* The ability to enable 'active citizen engagement' requires an assessment of the level of participation that is encouraged inadvertently or purposively. According to Mott (2012), the most successful community forums try to serve and involve the entire community, broadening participation in its governance, decision making and activities to all kinds of citizens.

Governance is mainly responsible for steering the policy direction of the community forum as compared to management, which is responsible for rowing the community forum boat (Plastrik and Taylor, 2006). This must be the focus of SCSA's interventions with forums moving forward.

Sustainability

The SCSA model is in part resource-intensive, mainly in terms of the costs of the personnel who play a significant role in enabling and supporting the functioning of forums. The majority of respondents and external ECD stakeholders interviewed for the study noted that while many of these forums would not disappear if SCSA no longer provided the level of support there were concerns about the quality of the functioning of the forums. While forum members expressed the view that they were sufficiently capacitated by SCSA and were highly grateful and appreciative for the efforts and exposure from SCSA, they believed that it would be premature to do without SCSA support at present. The uncertainties relate to having sufficiently skilled leadership with the experience to manage and lead forums in the way that SCSA has done.

Alignment with the theory of change

The main component of the theory of change is that support to ECD Forums provides a pathway towards achieving quality ECD through a wider network. This is largely borne out in the findings from WECDF and to a lesser extent with Lamontville. It was difficult to ascertain the value

contributed by the other forums to enhancing quality ECD for children in poor and vulnerable environments. The ECD Forum model needs to have as a core minimum certain elements in particular the facilitation role of SCSA at a similar level as implemented with WECDF for it to be effective.

Assessment of the level of civil participation

Although this study's main objective was not to assess the level of active citizenry engagement in ECD through forums, a few observations were made with regards to active citizenry. The observations are:

By virtue of SCSA intervention in the model there is evidence which shows that forum members are becoming conscious of their rights in active engagement with government. An example of active engagement is when the Wentworth forum engaged with the EDTP SETA to address the exclusion of over 35 year olds in accessing learnerships, and succeeded.

The involvement of SCSA in ECD has mobilised various government departments to play their role in ECD. This is critical as it created a platform to understand the real issues affecting ECD from the 'ground'. This, in turn, will influence the total approach to ECD in the community and influence government policy.

There is need for capacity building, specifically on active citizenry in all the forums. The belief is that communities will not achieve citizen control overnight but through proper capacity building. In non-SCSA supported forums there is a gap in terms of their understanding of the role of government departments in ECD. There is a mentality of not trying to influence the way government deals with forums, but to accept whatever is prescribed.

Finally the whole point of creating forums is that communities want to take control of ECD in their community and improve its quality. The bigger question for future research is: What can be done to make government play a facilitatory role in ECD forums as is currently being undertaken by SCSA?

Summary of Findings and Conclusions from ECD Audit

Evidence based planning and programming

SCSA is commended for having undertaken ECD Centre Audits in Wentworth since 2010 and more recently in Lamontville. Evidence based planning is a process of making decisions based on

empirical (objective) evidence and is aimed at producing the best outcomes for a specific development intervention. What is however evident is the need for SCSA to develop its systems to enable routine collection of information in a cost efficient manner through baseline data collection, strengthening its data analysis capacity and more importantly integrating evidence into planning processes through knowledge sharing and dissemination strategies and stakeholder engagement.

ECD Centre Provisioning: Demand and Supply for ECD 0-4 years in the targeted communities

Population based planning is an important instrument for assessing demand and supply of ECD intervention. It is increasingly recognised that this approach must inform the expansion of ECD services in South Africa. An unmet need is to assess whether actual enrolments in the ECD centres reflects the child population in those areas. National data appears to suggest that there are huge unmet needs and in the context of the National Development Plan 2030, which aims to target 11million new jobs, the demand for child care services for working parents is set to increase and forward planning is necessary to address this. Importantly a question that would need to be probed is the factors that influence lower enrolments including fees, lack of awareness of importance of ECD, lack of services to children with special needs, poor quality service delivery etc.?

Overcrowding in Community Based ECD sites

ECD centres in the Audit indicated having not enough outdoor space for the children. The underlying factor is likely to be the location of the ECD centre and the type of building from which they operate. The findings suggest that the vast majority of centres are housed in private homes. ECD centres require space for children to engage in intense physical activity, for quiet reflective spaces (for rest) and for food preparation and hygiene activities. SCSA needs to support ECD centres in thinking creatively about how to access space through use of communal spaces and sharing of spaces between ECD centres.

Responsiveness to providing ECD for all children, including those with special needs

Including children with disabilities in early childhood development programmes is a key child rights based principle. There is a growing body of evidence of complex relationships between disabilities and other sources of vulnerability, including HIV/AIDS and poverty and expanding

access to ECD is critical to addressing the needs of this often hidden and marginalized group of children. The low scale of inclusion of children with special needs in ECD centres is a matter of concern that needs to be addressed. However the challenge of reaching such children remains with respect to stigma and ECD centres lacking the requisite background and resources to meet the unique needs of this category of children in order to integrate such children into mainstream ECD facilities.

Child – ECD Practitioner Ratios

Higher practitioner-child ratio, infer a smaller number of children per practitioner, are found to enhance the quality of education and facilitate better developmental outcomes of children (Tagume et al, 2013). Evidence suggests that as the ratio increases, practitioners spend more time in restrictive and routine communication with children and less verbal interaction, which results in declining quality of education offered by ECD centres.

The main area of concern in respect of child – practitioner ratios for CoJ is with centres caring for very young child in the 0 – 18 month age cohort.

ECD Practitioner Profile, Qualifications and Employment Conditions

The highest qualifications achieved by the educators in the ECD centres included in the audit were junior high school (up to grade nine). There is a mixed body of evidence of the interrelationship between practitioner qualifications and positive ECD outcomes. This recognizes that a high academic qualification in ECD is not necessarily directly linked to quality as a number of other factors contribute to quality including practitioner motivation for working in the sector, access to appropriate training (whether accredited or not) and most importantly access to quality support and supervision. Research has however shown that at least a basic secondary school education and attainment of Matric is strongly correlated with promoting language development in children.

A conundrum that the ECD sector faces is that within the 0-4 sector career pathing in ECD centres is extremely limited and once higher level accredited training is acquired such as NQF level 4 and beyond, the practitioner is unlikely to be retained working with this age cohort group, particularly as the career possibilities of work in Grade R and foundation phase teaching is likely to be more attractive in terms of salaries and employment conditions. EPWP learner ships have been the largest source of access to accredited training for vast numbers of poor women. While

there have not been any systematic tracer studies of the outcome of EPWP funded learner ships in the ECD sector, there is anecdotal evidence of learner ship hopping by young people in order to continue accessing the stipend and also to migrating away from the sector into other fields which provide better employment prospects.

Employment conditions in the ECD sector, like much of social sector care work is low paid and precarious work. The salaries earned appear to be largely on par with or below the sector determination levels for domestic workers (R 2065 pm) and farm workers (R 2440 pm) as at December 2014. More importantly in several instances appears to be below the minimum determination for special employment programmes e.g. learner ships and the Expanded Public Works Programme which is roughly benchmarked at R 1500 per month (R71 per day).

Compliance and Infrastructure Indices

Compliance with local government bylaws is an important prerequisite for ensuring that partial care facilities are safe and non-stressful environments in which children can thrive. Physical features of an ECD setting can negatively impact a child's health and safety such as in facilitating the spread of infections and potentially in endangering the child's safety. Importantly evidence suggests that if a caregiver/ECD practitioner is concerned about the dangers inherent in an environment this reduces their opportunities for interacting with and stimulating children. The study found that most of the ECD centres are non-compliant with local government requirements or other regulatory requirements.

These findings raise a critical question about the relationship between centre vulnerability and compliance. Low vulnerability centres are more likely to have met most of the compliance requirements than high vulnerability centres. The index spread sheet which is included as an annexure provides details of the areas of vulnerability per centre.

Accessibility to ECD centres for poor and vulnerable children

It is accepted that ECD services can serve as both promotive and preventative interventions in the lives of children living in compromised and vulnerable environments. Two barriers to access have been identified namely physical access (proximity) and affordability. A third in respect of addressing children with special needs is addressed separately.

Regulatory Compliance in respect of Department of Social Development Registration

The need to explore how to scale up ECD centre registration is an issue that SCSA and other partners in the ECD sector have invested substantial efforts on. It requires concerted advocacy initiatives to engage the Department of Social Development at a national level to find alternate registration processes and importantly to incentivize ECD registration when subsidies are not likely to be forthcoming.

Quality indicators

The study did not set out to undertake a comprehensive quality audit. This was not possible given that such an assessment requires baseline data and implementing a number of measurement activities at various intervals to assess quality. An audit of the nature conducted was hence not the correct instrument. This was indicated to the client at the outset.

However there are a few variables which can serve as limited proxy's for assessing quality and these were explored in the audit.

Alignment of teaching programme to recognised curriculum. This was overwhelmingly positive with most centres using the NELDS curriculum.

Assessment of learners. Most centres reported not undertaking regular assessments. The audit did not review the quality of the assessment instruments; although there is recognition generally that instrument in use currently leave much to be desired.

Parent – Centre interactions was not assessed. It begs the question of the extent to which parents are able to influence the quality of the service. This needs to be strengthened.

The presence of learning, teaching and support materials and their use in the centre was also a positive finding. The programme reflected a varied intervention programme.

The focus on food and nutrition security within ECD centres is another quality dimension. Most centres provide food and appear to be addressing issues of dietary diversity and nutrition. However a proper assessment is required including use of anthropometric measures for assessing the quality of interventions.

The need for planned and purposive quality measurements to be put in place is urgently recommended.

Financial Resource Inflows and Outflows:

For an unsubsidized centre parent contribution of fees per child constitutes the largest income stream. The majority of the ECD centres don't receive any subsidy from the DSD. This is unsurprising as the national norm is 10% of ECD centres receive the state subsidy. Salaries generally represent the biggest expenditure item, followed by food, learner teaching and supply materials and then rent.

While a number of ECD centres engaged in fundraising the scale of resources mobilized is small. Similarly in kind support was largely in the form of equipment and again the contribution is small.

The ability to leverage resources by ECD centres is premised on a number of related factors including NPO registration, regulatory compliance, good governance systems which enable a centre to manage and account for public funds in an acceptable manner and finally innovative and creative leadership. Studies have shown these as key areas for strengthening among ECD centre leadership.

Recommendations

Key recommendations in SCSA's future work and engagements with ECD forums in KZN are:

Recommendation 1

Ensure access to training for all ECD practitioners

The current system of selecting only chairpersons and ECD centre principals is met with some disgruntlement from some quarters as it is seen as selective, as all practitioners need (not deserve/or entitled to) this training. The training is considered to be highly valuable to all levels of ECD practitioners and this was a view expressed by all forum members. While this might require considerable resources on the part of SCSA, it is nevertheless something that needs to be factored into planning for training.

Recommendation 2

SCSA to sustain and strengthen its involvement in marketing the ECD Forum Model as a concept

Although the majority of respondents and different ECD role players interviewed for the study stated that they felt they were sufficiently capacitated by SCSA and were highly grateful and appreciative of the efforts and exposure from SCSA, they still felt that they could further benefit still from future engagements. In other words, people felt that they did not want SCSA to disappear from the scene yet; and while it is no longer an issue of needing their hands to be held, they believed that SCSA could assist in providing strategic support and guidance.

Recommendation 3

Enabling strategic level engagements with government stakeholders in the ECD sector to champion active support from the state for increasing regulatory compliance. SCSA is urged to facilitate such processes.

Recommendation 4

SCSA to rethink the ECD Forum model to be implemented at area based and provincial levels. Currently the provincial forum is run using a slightly different model from the one being used in local forums. The provincial forum at the present moment is an information sharing platform with no guarantee that the information filters down to the individual forums. For the provincial forum to have the same impact as local forums there is need by SCSA to reconsider its intervention approach.

Recommendation 6

SCSA must strengthen processes for the monitoring and evaluation of forum interventions in order to measure the successes and failures of all their interventions. Without proper monitoring and evaluation it is difficult to assess the impact of the model on the quality of ECD services being delivered by the ECD forum members. The Quality Learning Environment (QLE) index has highlighted the ability to identify centres based on group performance. Furthermore, it has also highlighted the ability to understand the factors that drive individual centre performance. This information can be used to inform targeted remedial interventions that allow SCSA to track the effectiveness of its interventions.

Recommendation 8

There is need for ***SCSA to strengthen leadership capabilities of forum leaders***

A particular focus would be in resource leveraging and management skills. This will foster sustainability in the event of SCSA pulling out. Without sound resource leveraging skills and management training, forums will lose their effectiveness.

Conclusion

The Save the Children South Africa ECD forum story is a story that doesn't have an ending. In telling the story, we opened a window and found many more windows that needed to be opened, many more layers of experience to unpack and more doors to open in order to understand, to draw meaning and to reflect on the implications thereof. We are careful, therefore, not to make claims to have fully comprehended the model.

In assessing the feasibility of the model for replication our intention is never to suggest that a one-size-fits-all recipe exists; formulae that if applied in the exact proportions prescribed will replicate the experience, outcomes and impacts that the SCSA funded forums have had. In telling the story we wanted to illustrate the power of the collective and how working together can reap positive outcomes for young children.

The report captures in various places the successes enjoyed and the tangible benefits reaped; and it celebrates the work of SCSA as well as the many community stakeholders, mostly women, who are daily transforming the lives of young children, living in compromised, poverty-ridden environments. The report also identifies that much more remains to be done. This is what must occupy the focus of SCSA as it moves forward. The signs are encouraging. Early this year SCSA shared its Vision 2020 with its South African partners, sub titled '***Every child deserves a chance.*** A holistic ECD programme is a cornerstone strategic goal of the 5 year strategy.

1 INTRODUCTION

1.1 MOTIVATION FOR STUDY

The importance of investing in early childhood development (ECD) for human health, wellbeing and productivity has been well recognised (NPC Diagnostic Overview Report, 2011). Research suggests that the presence of promotive factors in the care environment can make a difference in the life of a child. Enhancing quality early childhood development interventions, particularly targeting children from disadvantaged communities, can prevent or offset potential negative impacts on a child's cognitive and social development.

Save the Children South Africa (SCSA) has been extensively involved over the past fifteen years in the early childhood development sector, specifically supporting ECD service providers through community based development forums which serve multiple objectives - including strengthening ECD practitioner capacities, showcasing best practices, facilitating and enabling collective action and advocacy, and enhancing quality of service provision to young children. It has commissioned the Human Sciences Research Council (HSRC) to conduct an evaluation of selected area-based ECD forums actively supported by SCSA in the KZN province.

The relevance of this study must be located in a principle espoused in the National Development Plan Vision 2030 (NPC, 2012, Chapter 15) of enabling and facilitating active citizenry through structures that would allow all development actors (the individual, communities, NGOs, government and even the private sector) to link with each other, share information, jointly address problems and challenges and develop strategies together that enable citizens to best claim their rights and exercise their responsibilities as envisaged by the Constitution of South Africa.

1.2 TERMS OF REFERENCE FOR STUDY

Purpose and Objectives

The overall objective of the call for proposals was to provide SCSA with the evidence base for supporting the replication and scaling up of development of ECD forums in KZN and nationally.

The specific objectives of the study as outlined by SCSA were as follows:

- To assess the change in ECD services based on the interventions linked to ECD forums.

- To identify the factors that have enabled the ECD sector in communities where SCSA has worked with forums to harness the value of working collectively to address needs and access opportunities in order to provide an effective ECD service.

The HSRC investigation was aimed at reviewing the implemented approaches in terms of how they may have contributed towards enhancing access to quality ECD services for children from poor and compromised environments. The core intervention included developing/enabling community ECD forums in selected sites in KZN, and through the forum vehicle enhancing ECD centre performance by: identifying/developing 'centres of excellence'; establishing resource centres; the provision of mentoring services; enabling access to a dynamic ECD resource kit; facilitating stakeholder networking; capacity development; and collective action and advocacy to ensure sufficient support to ECD services.

Scope of the research

The scope of the research included:

- Undertaking a comparative analysis of ECD centres in Wentworth against a baseline measure established in 2011 to assess any changes arising from SCSA interventions targeted at those centres directly and through participation in the forum;

- Assessing ECD practitioner feedback on the value of participation in ECD Forums as well as in accessing the various interventions facilitated through the ECD forums in Wentworth, Umzinto, Tongaat, Lamontville as well as the provincial KZN Association of ECD Forums;

- Obtain community feedback on most beneficial interventions in Wentworth, Umzinto, Tongaat and Lamontville; and

- Analyse information from the assessment together with documented approaches to identify the most effective elements to the intervention.

1.3   STRUCTURE OF THIS REPORT

This report is divided into 8 sections, as follows: Section 1 provides an introduction to the study which provides a motivation for the study. This is followed by Section 2 which places this study in the body of literature available on the importance of ECD in South Africa and on understanding the significance of networking for advancing the development of ECD centres. Section 3 describes the SCSA Forum Intervention model, and in Section 4 a description of the methodology that the study employed is given. The results from the study are presented in two sections, with the findings from the qualitative study on

ECD forums in KZN in section 5 and the findings from the 2014 ECD Centre Audit conducted with Wentworth ECD centres reported in Section 6. The audit results for 2014 are presented and compared with the baseline data collected by SCSA in 2011 for the same centres. The two concluding sections 7 and 8 of the report provide summary findings and recommendations.

2 ECD IN THE CONTEXT OF FORUMS/NETWORKS

2.1 STATE OF ECD IN SOUTH AFRICA

Early Childhood Development (ECD) has over the past decade come to the forefront as government's, policy makers and NGO's alike, globally and in South Africa, begin to recognise the importance and need for promoting early childhood education and care interventions in addressing learning and developmental gaps, especially amongst the poor. In addition, investing in children through ECD yields positive economic and social outcomes in the future as children are given the necessary foundation that will allow them to fulfil their potential (Anderson et al, 2003; DGMT, n.d; Williams et al, 2001).

In South Africa, children are exposed to a multitude of risk factors that hinder their development. These include poverty, HIV and AIDS, disability, gender inequality and maternal depression (DGMT, n.d). It was shown that in South Africa, children of depressed mothers exhibited high levels of behaviour problems and reduced cognitive functioning (DGMT, n.d). In 2010, there were 5.16 million children in South Africa in the zero to four years age cohort; with only 790 000 (15%) in formal, registered ECD centres, and an additional 30% in unregistered care (ibid). This is worrying as the evidence suggests that access to ECD is critical to the holistic development of children.

South Africa has actively championed a progressive ECD policy framework. On the ground level this has translated into support for community centre based and non-centre based ECD services but not for home centre based ECD services. In terms of centre based ECD services the focus has been on crèches, pre-schools and after-care schools. While this study's focus is mainly on children in centre based ECD facilities, located in both community and home settings; it is important to note that there remains a major gap in ECD provisioning for both home and centre based ECD interventions. Government funding on ECD is mostly directed at registered ECD community centres, and even this does not reach the majority of children in need. Importance of ECD

Research indicates that the first two years of a child's life are particularly important for brain development, commonly referred to as the 1000-day window of opportunity (Dickson et al, 2006). During these years, the brain rapidly develops neuron connections that ultimately lay the foundation for future brain development, activity and life-long learning (DGMT, n.d).

Stress associated with extreme poverty, abuse, maternal depression and malnutrition hampers or damages the brain development of a child. This has negative consequences as children are unable to develop or

function to their full potential in later years. Findings suggest that children living in poverty experience higher levels of stress, in comparison to children from high-income backgrounds, which may negatively affect their school performance. Studies conducted in Madagascar and five countries in Latin America point to a significant learning gap between pre-school children from poor and wealthy upbringings. Poorer children scored lower in language ability, memory retention and sustained attention aspects which determine later success in school and adult life (World Bank, 2015).

Thus the environment in which children grow up is a crucial determinant of success later in life. Children need support to develop their cognitive and non-cognitive skills, which can be acquired through verbal interaction with family or the caregiver, cognitive and socio-emotional stimulation, as well as through adequate nutrition and medical care (World Bank, 2015; Anderson et al, 2003). If children are deprived of these experiences they could lag behind in their development, affecting their readiness for school - which could have negative consequences later on in life.

Hence programmes and interventions that address child development amongst the poor and bridge the learning gap between poor and rich contribute to levelling out the playing field, giving poorer children the opportunity to succeed. Evidence from the USA suggests that for every dollar spent on pre-school education, between four to eight dollars is saved in 'deferred social service costs to society' (DGMT, n.d). In order to reduce generational inequality and assist in laying the foundation that will provide future opportunities especially for disadvantaged children, exposure to ECD intervention early in a child's life is necessary in developing countries such as South Africa where a significant proportion of children live in compromised poverty environments.

2.2   COMMUNITY FORUMS AND ECD IN SOUTH AFRICA

In order to get a clear understanding of ECD forums, this literature review initially discusses the relevance of forums and later on contextualises ECD forums in South Africa. A forum is defined (Oxford English Dictionary, 2010) as a meeting or medium where ideas and views on a particular issue can be exchanged. For this study, community forums are defined loosely as a decentralised and largely non-hierarchical decision making structures which are activity based and are made up of linkages between individuals (Plastrik and Taylor, 2006). The underlying characteristic of a forum is that forum members are able to share decision making, resources and credit.

Community forums emerge as spaces which enable active citizenry, broadly defined as participation in civil society, community and/or political life characterised by mutual respect and non-violence and in accordance with human rights and democracy (Good Governance Learning Network, 2013).Community

forums are networks dedicated to addressing critical needs and improving the quality of life in a specific geographic area. They provide a platform where community issues are discussed and general consensus achieved on tackling community issues. They are regarded as critical to advancing democracy as they afford communities an avenue to participate in the governance structures of their area (Plastrik and Taylor, 2006).

Forums as agencies of change

Change in community comes through the involvement of community members in decision making processes. Evidence from developing countries suggests that programmes which are designed without involving communities who are the intended beneficiaries are bound to fail (Malombe, 2000). In Kenya, an investigation into why poverty reduction programmes were not having the intended impact identified the lack of stakeholder consultations as the key obstacle in the design and implementation of such programmes (Malombe, 2000).

Purpose of Community Forums

Ideally, community forums seek to achieve the following objectives:

- to improve the quality of life of people in their communities through serving as catalysts, collaborators and facilitators for identifying problems and collectively developing solutions to address these problems (Sachs, 2003);

- to serve as participatory fora that open up effective channels of communication and negotiation between the state and the citizens;

- to provide a channel for enhancing democracy, create new forms of citizenship and improve the effectiveness and equity of public policy (Cornwall and Coelho, 2007); and

- provide communities with a platform to make their demands directly to state bodies - this is believed to improve understanding and contribute to improving the quality of design and implementation of public programmes and policies.

Characteristics of Community Based Forums

Community based Forums have the following characteristics:
- They are generally independent from control or influence by other organisations.
- They are governed by a board of citizens broadly reflective of the communities they serve.
- They engage in a range of community leadership and partnership activities.

Benefits of forums

The table below shows how forums create a positive impact on the forum network members.

Table 1: Benefits of Forums

Rapid Growth	Network can expand rapidly and widely, because its members benefit from adding new links and, therefore, they seek to make new linkages.
Rapid Diffusion	As more nodes are added, the network diffuses information and resources more and more widely through its links. This diffusion effect allows networks to spread ideas and generate feedback rapidly.
'Small world' reach	Network can bring people together efficiently and in novel combinations, because it provides remarkably short 'pathways' between individuals separated by geographic or social distance. When two people in a network create a 'bridge' across distance or social category, the connection is available to other nodes in the network.
Resilience	Network can withstand stresses, such as the dissolution of one or more links, because its nodes quickly reorganise around disruptions or bottlenecks without a significant decline in their functionality.
Adaptive Capacity	Network can assemble capacities and disassemble them with relative ease; it can adapt nimbly. Links among people or organisations can be added or severed, or they can become 'latent', meaning they are maintained at a very low level of connectivity, or more active.

Source: Plastrik and Taylor, 2006

Community driven approaches to development

Habib and Kotzé (2002) note that *'after 46 years of apartheid, the majority of South Africans were left poor, inadequately educated, badly housed, living far from their places of employment or job opportunities, with little or no access to basic services like electricity, clean piped water and accessible health facilities.'* Although the post-1994 dispensation tried to address service delivery, it is proper to note that there is lack of effective control of the development processes by the communities (McKinley,

2006). Communities have very little control of the government decision making process; this makes them passive recipients of services instead of partners in development.

The NDP 2030 posits that the state should focus on engaging with people in their own forums rather than expecting citizens to engage with forums created by the state (NPC, 2012a). It notes that:

> *"In many respects, South Africa has an active and vocal citizenry, but an unintended outcome of government actions has been to reduce the incentive for citizens to be direct participants in their own development. To prevent this practice from being entrenched, the state must actively support and incentivise citizen engagement and citizens should:*
>
> - *Actively seek opportunities for advancement, learning, experience and opportunity*
> - *Work together with others in the community to advance development, resolve problems and raise the concerns of the voiceless and marginalised*
> - *Hold government, business and all leaders in society accountable for their actions*
>
> *"... The state cannot merely act on behalf of the people – it has to act with the people, working together with other institutions to provide opportunities for the advancement of all communities."* (NPC, 2012b: 27)

It is argued that active citizenry and public participation are both overburdened concepts in South Africa's development lexicon.

Arnstein's ladder (1969) of participation provides a useful benchmark against which to measure the degree and quality of participation in public participation initiative such as ECD forums. The ladder describes a continuum of participation from manipulation (non-participation) to citizen control (citizen power) and provides a useful benchmark against which to assess the nature and quality of participation.

Figure 1: **Arnstein's ladder of participation**
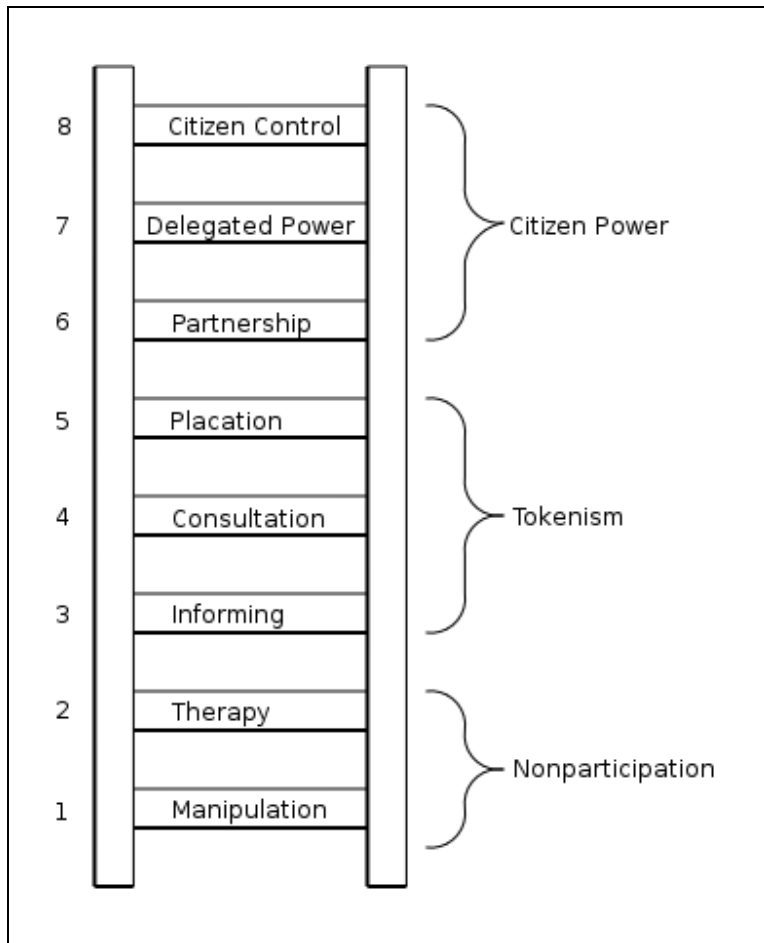
Source: Arnstein, 1969

It is suggested that adopting community driven approaches enables communities to have direct control over key project decisions (Mansuri and Rao, 2004). This is achieved by giving communities a voice in decision making and contributes to strengthening governance and civic capacities of communities. In order to achieve this, community participation must be at the level of 'citizen power' on the ladder of participation. An approach which does not consider these components is bound to fail in addressing community related issues.

Community/public participation forms a critical component in democracy; such forums afford the communities avenues to contribute to decision making by public bodies and towards influencing the level of service delivery. Putnam (1993) suggests that increased citizen participation raises the level of social capital. Drawing on a study conducted across several US cities, he found that high levels of social capital tended to reduce transaction costs and improve effective delivery of services and implementation of

public programmes, largely through the tailoring of programmes to the specific context of the communities.

In order to understand the effectiveness of community participation in the spaces afforded to them in a democratic dispensation, it is pertinent to understand the mechanisms and structures which communities use for engagement with the government. In the South African context, democracy is mainly conceptualised outside its historical base. It is regarded as a neutral principle, and floating outside capitalist material possession (McKinley, 2006). This failure to understand the fundamental principle of democracy in South Africa has led to a focus on existing institutions of democratic participation as agents of meaningful social and political change. However, it is increasingly being recognised that democratic institutions in South Africa are not designed purposefully to achieve full active community participation. This failure has led to violent protests as well as the emergence of alternate forums in communities which are independent of government (McKinley, 2006).

For democratic participation mechanisms to be regarded as effective, they are expected to have enough leverage to deliver and influence the required change in the communities. In the South African context, our apartheid history reflects a suppression of public participation in the governmental discourse. The post apartheid discourse on public participation era has been driven strong constitutional imperatives championing active citizenry engagement in development. Democratic participation in South Africa should be understood in this context.

2.3 FACTORS ENHANCING THE IMPACT OF FORUMS

Prior to discussing the factors which contribute to the effective functioning and outcomes achieved by community forums, it is important to note that there is no one-size-fits-all formula for the success of community forums. This is mainly because community forums operate within different cultures and social contexts. Forums are shaped by their local traditions and by the local resources available to meet the needs of their community (Sacks, 2004). The following factors are important if forums are to have a meaningful impact in their communities:

- **The forum must create spaces where forum members learn from each other through sharing of best practices**: A well-functioning forum should not be a platform for members to only receive without sharing what they have. Sharing of best practices by peers improves the overall quality of ECD in communities as evidenced by various supported and non-supported forums. By virtue of sharing best practices, forum members create other networks which enhance

how they relate to each other, thereby creating binding linkages which further enhances the impact of the forums.

- **Information transfer is vital to the success of the forum model**: A two way process of sharing information creates a platform where the interventions are tailored for the socio-economic context of the community.

- **The forum must be owned and controlled by the forum members**: This will ensure that the members take ownership and responsibility for the agenda-setting and management of the forum activities. This characteristic will enhance the sustainability of the forum and the general effectiveness of the forum. A sense of ownership of the forum places the responsibility of the success or failure of the forum upon the shoulders of the members, thereby stimulating the forum members to perform well. Another factor enabling the success of community forums is the *importance of community roots* (Mott Foundation, 2012). Successful and sustainable community forums must be initiated by local citizens and must focus on a community's assets rather than its deficits. The real drive and motivation of a community forum must come from the community itself, as opposed to an external stakeholder as evidence suggests that such community driven forums are more likely to be sustainable and successful (Mott, 2012).

- In order for the impact of community forums to be felt, *they must **distinguish in their structure between governance and management functions***. Governance is mainly responsible for steering the policy direction of the community forum, as compared to management which is responsible for rowing the community forum boat (Plastrik and Taylor, 2006). According to Mott (2012) successful community forums try to serve and involve the entire community, broadening participation in its governance, decision making and activities to all citizens.

- Community forums must be *careful when entering into partnership and funding agreements with funders*. Some funders might want to become embedded in the forum, with the ability to exert undue influence over the governance of the community forums. In some instances, partners and funders may not be patient enough to allow a forum to forge its own direction or its growth path, although the intention would be to move rapidly forward (Plastrik and Taylor, 2006).

- The value of forums should *not be limited to funding or resources mobilisation*, but they should rather be recognised for their ability to *act as convenors and leaders in their community*. However, most scholars (Malombe, 2005; Plastrik and Taylor, 2006) agree that there is nothing inherently wrong with institutions which fund forums from exerting influence over the design of a forum that they are funding. What makes less sense is for the funders to be active and be 'first

among equals' in the day to day management and governance of the forums. The management component of forums must be acceded to the local community.

- For community forums to be effective they ***require ongoing technical support*** in the beginning and continuously, so that the developed policies cultivate sustainability in the forum.

3 OVERVIEW OF THE SAVE THE CHILDREN SOUTH AFRICA ECD FORUM INTERVENTION

3.1 INTRODUCTION

SCSA is part of the global Save the Children organisation. Its work or mandate focuses on children's development and rights. SCSA defends children's rights to health, education, life, food, sanitation and protection. As an organisation, it is involved in various facets of children's lives with a focus on fostering a better quality of life for children (SCSA 2014). The KZN chapter of Save the Children prior to its integration into the recently established Save the Children, South Africa entity, focused predominantly on addressing the needs of the young children. SCSA programmes support early childhood development centres, crèches and crèche forums, offer adults training on managing early childhood development services and provide support to orphans and other vulnerable children. Their overarching framework is a rights based framework for children.

3.2 SCSA INTERVENTION IN ECD FORUMS

The implementation of the ECD Forum intervention draws from previous interventions supported by Save the Children, KZN (SCKZN) in the ECD sector since the early 2000s. Initially their ECD interventions were targeted to individual ECD centres providing a range of interventions including provision of training, sourcing donations, and sharing of information on good management practices.

The overarching constraint to this form of intervention was that it didn't allow the intervention to reach a wider audience and spread its influence more broadly. SCKZN enjoyed a level of credibility with the ECD sector and its track record vouched for its commitment to young children. This in turn accrued respect from ECD stakeholders, particularly individual ECD centres in Wentworth, when SCKZN proposed the formation of an ECD forum.

SCSA defines an ECD forum as '*a voluntary association of those individuals providing ECD services in a specific area for the purposes of capacity building, sharing good practices and collective action*' (SCSA, 2014). A necessary distinction is made, namely that while SCSA supported the development and scaling up of the forum intervention model, it was not the innovator of the forum concept - already an established practice in KwaZulu-Natal, although not widespread. Wentworth was chosen as a pilot ECD forum by SCSA in 2010.

3.3   STRATEGIC OBJECTIVES

The SCSA ECD Forum Model was born out of the understanding that the scale of need in the ECD sector was large and the need to address quality in ECD provisioning pressing. It was thus critically important to be able to address this at a scale that would have significant impact. Time, capacity and resource constraints of the non state sector merited an approach that would reach a larger number of stakeholders. The ECD Forum concept which SCSA had seen in operation offered the possibility of addressing these challenges and was thus adopted by SCSA as a pilot initiative in 2010.

The ECD Forum model is premised on achieving three main objectives, namely:

- To build capacity of ECD centres to improve ECD quality;

- To encourage the sharing of best practices amongst ECD practitioners;

- To facilitate collective action of ECD forum members in addressing the challenges faced by the sector.

3.4   THEORY OF CHANGE

A Theory of Change is basically a roadmap that describes how a programme can/should get from one point to another through a process of change. The theory of change maps out the causal pathway of what is required from a programme (inputs, activities) in order to achieve planned outputs and bring about change or achieve a given long-term goal or impact (poverty reduction); hence there is often a commonly understood vision of the long-term goals, how they will be reached and what will be used to measure progress along the way. This is especially important when partners have different view-points about what they are trying to achieve and the methods and strategies to achieve this. This is referred to as the *'pathway', 'logic model' or 'theory of change'.*

The links between outcomes are explained by 'rationales' or statements of why one outcome is thought to be a prerequisite for another (Clark and Taplin, 2012). It is imperative to note that the theory of change can be ascertained retrospectively, through analysing documentary evidence and interviewing stakeholders who were targets of social change interventions.

SCSA intervenes in Early Childhood development (ECD) through ECD forums which serve as networks of ECD centres and their practitioners located in the same locality. ECD forums or networks act as a catalyst for change in ECD practices as forum members share experiences, resources and tools, and best practices; and they support each other as peers. The assumption is that change in ECD services can be

initiated by intervening in and investing in ECD forums. Based on this assumption, the understanding of the theory of change from a SCSA perspective is illustrated in the figure below.

Figure 2: **Theory of change in ECD forums**
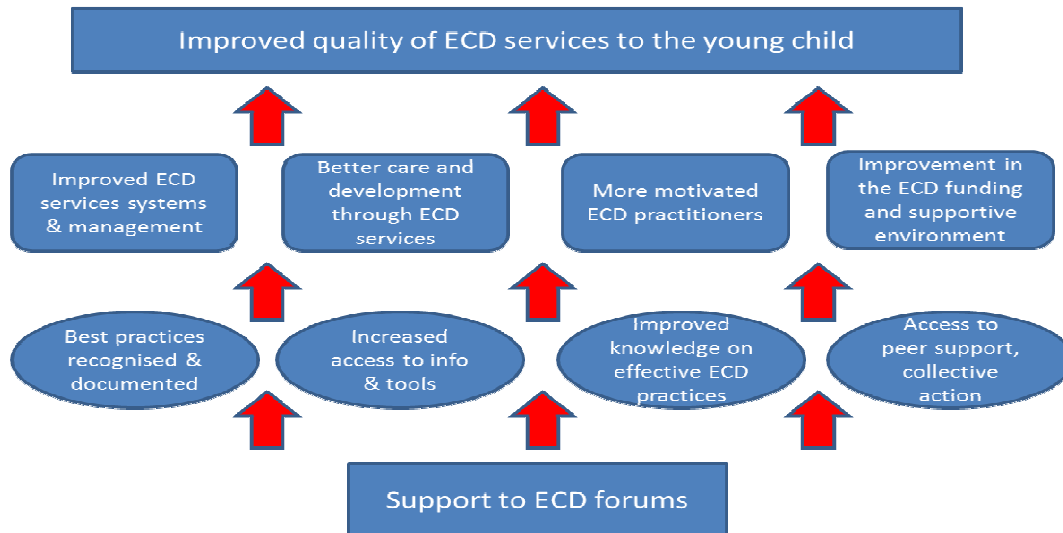
Source: SCSA 2014

The underlining principle for intervening in ECD forums is that when ECD forums are supported the benefits will cascade downwards resulting in better and improved quality of ECD services to young children. At the initial stage the assumption is that by virtue of being members of a forum benefits accrue, such as sharing of best practices, increased access to information and tools, improved knowledge on effective ECD practices and access to peer support. Once forum members accrue these benefits they will improve their ECD service systems and management, provide better care and development of children, become motivated, and will also receive increased support – cash, in-kind, time and expertise - in a supportive environment.

The outcome desired is improved quality of ECD services to the young children in the communities. The value proposition that we can surmise from SCSA support to ECD forums is that potential benefit of participation in an ECD forum is what attracts members to the forum, which suggests that by ECD centres working collectively specific results and outcomes will emerge that contribute to enhancing outcomes for young children.

3.5. SCSA ECD INTERVENTION MODEL

On face value the SCSA ECD forum model appears to be a single intervention; namely, a network which encourages collective action amongst members. The assumption is that ECD centres will come together and connect around a common purpose. However, a deeper unpacking of the model reveals a multi-pronged response which includes:

- Forum networking meetings: these are member meetings held at regular intervals and attended by ECD practitioners who come from ECD centre which operates in that locality and are member of the forum. The format of these meetings is broadly generic in that information is sourced and provided to members, space is provided for members to raise challenges, concerns and needs and to seek support and guidance on how these can be addressed. These meetings also allow for sharing good practice amongst forum members. The underlying concept of the intervention at the forum level is that through ECD Centres working collectively they can improve the quality of services they provide to children served in the community.

- Creating a safe space for problem solving: Forum members through a mutual commitment to strengthening and supporting each other are provided with a space for sharing good practices, for problem solving and for identifying innovations which could enhance their practice.

- Linking members into opportunities: Forum members are encouraged to network with various stakeholders who include service providers, local and provincial development partners and corporate sector donors and in this way achieve greater bargaining and resource amassing power as compared to individual ECD centres operating on their own.

- Creating access to a knowledge community and knowledge resources: The establishment of resource centres has been another innovation of the SCSA model. Serving functions similar to libraries, but providing a role which goes beyond that of a conventional library, the resource centre is aimed at providing a one stop focal point for learning, Through building a collection of useful resources and by encouraging a range of learning opportunities beyond classroom based learning the resource centre aims to facilitate self enquiry and learning from practitioners in ECD centres.

Provision of a mentor: The concept of mentoring is loosely modelled on an apprentice relationship, where a person learns a skills or gains knowledge and experience shadowing an "expert", someone with substantial experience in the specific field. It provides a two way transfer or experience and knowledge. For the SCSA ECD forum the mentor selected is a highly technically skilled ECD practitioner who

provides support to ECD centres in how to translate information and ideas into practice aimed at enhancing quality ECD services to children. This is done by imparting knowledge, debating ideas, recommending resources and by guiding actions.

Historical Development of SCSA supported ECD Forums in KZN

1990s	Started engaging with groupings of ECD Forums around training workshops, feeding schemes and the distribution of donated items. SCSA also started maintaining a database of all known forums. Through this contact, the need for training on 'Managing an ECD Service' was identified and SCSA developed a training programme to meet this need. ECD practitioners were informed of the programme via the ECD forums.
Early 2000s	SCSA started to attend meetings of various forums to share information and assess whether the training provided was informing management practices. On an ad hoc basis, SCSA convened meetings of ECD supervisors.
2004	In the 2004 Annual Report, it was noted that the establishment of 'A Networking Forum' was required to benefit ECD supervisors.
2005	From 2005, SCSA started convening meetings on a more regular basis with ECD supervisors and 'area chairpersons'.
2009	The South Durban Basin Area Based Management (SDB ABM) Office of Ethekwini Municipality identified the need to provide support to ECD centres in that catchment area and organised an ECD Practitioners Workshop (held on 11 November, 2009). SCSA recommended that an invitation be extended to a representative of the Mpumalanga Pre- School Association (also known as the Mpumalanga ECD Forum) to make a presentation on the forum and its success.
2010	The Wentworth ECD Forum (WECDF) was established as a Pilot Forum on 16 August 2010.
2010	The KZN Association of ECD Forums was established in 1998. However SCSA only began working with the forum from 2010.
2011	The Lamontville ECD Forum (LECDF) was a pre-existing and independently functioning forum in the South Durban Basin (SDB), and was identified by SCSA as an ECD Forum with an opportunity for growth. SCSA held its first meeting with members from Lamontville on 5 April 2011. The Uthongathi ECD Forum in Tongaat was also a pre-existing forum receiving support of the social workers of the Department of Social Development (DSD). The forum requested assistance and guidance from SCSA and work with this forum commenced July, 2011.
2012	The Sekuyasa ECD Forum, which operates in the rural community of Umzinto was identified through SCSAs implementation of its Care Programme for Orphaned and Vulnerable Children. SCSA began working with the Sekuyasa ECD Forum on 16 January 2012.
2013	The Jamaica ECD Forum in Chesterville was established with support from SCSA in October, 2013.

4 METHODOLOGY: ECD FORUM IMPACT ASSESSMENT AND WENTWORTH ECD CENTRE AUDIT

This study adopted a mixed method approach which encompassed both qualitative and quantitative components. Adopting both qualitative and quantitative methods in evaluation studies can generate statistically reliable measures of the magnitude of impact, and provide greater depth of understanding of the reasons why a programme was or was not effective and what needs to be adapted to make it more effective (Garbarino and Holland, 2009).

4.1 CONCEPTUAL FRAMEWORK

The scope of the evaluation is informed by the goal and objectives of the evaluation as outlined below as well as from a review of relevant literature on forums as elaborated on in section two of this report. An important consideration informing the design of the study was to contextualise the study within a framework which understands how innovations and pilots are tested and can generate demonstrable evidence of impacts which can inform decisions about scaling up. The overarching intention for the study as understood from the Terms of Reference is to support the expansion of the intervention (scaling up) in order to spread the benefits more widely among ECD stakeholders both locally and nationally. The remaining sections outline the study objectives, research questions and details of the methods utilized.

4.2 OBJECTIVES

The overall aim of the study was to provide SCSA with the evidence base for supporting the replication and scaling up of development of ECD forums in KZN and nationally.

The specific objectives of the study are as follows:

a) to assess the change in ECD services based on the interventions linked to ECD forums

b) to identify the factors that have enabled the ECD sector in communities where SCSA has worked with forums to harness the value of working collectively to address needs and access opportunities in order to provide an effective ECD service.

4.3   RESEARCH QUESTIONS

The study explored the following questions, focusing on four key areas namely: *discover, imagine, design and deliver (DIDD).*

- *Discover* questions facilitate the identification of processes that work well;

- *Imagine* questions facilitate analysis of why a particular process worked well and helps brainstorm ways to apply that knowledge elsewhere;

- *Design* questions facilitate an understanding of the design elements that contribute to the successes;

- *Deliver* questions facilitate the identification of criteria for success.

Some of the key evaluation questions which the study sought to answer included:

- What were the 'most significant changes' brought about by participation in the forum? Would these results have been achieved in a different way?

- How are these valued and appreciated by the community and the targeted beneficiary?

- What personal experiences and lessons are shared by different stakeholders? What are the differences?

- What are the measures of success or areas of improvement in the views of different stakeholders?

4.4   SAMPLE DESIGN AND CONSTRUCTION

Purposive sampling methodology was applied to this qualitative study. The sample was stratified to include 3 area based ECD Forums which received direct support from SCSA, the Provincial ECD Forum and 2 other forums which are members of the Provincial ECD Forum and benefit through participation in the provincial forum only.

Details of sampling strategy are outlined below:

4.4.1 SCSA actively-supported ECD area based forums

The first level of sampling was to generate a list of beneficiaries/recipients/ECD organisations representing those who directly benefit from SCSA support to a geographical area based ECD forum. Target beneficiaries were drawn from the five area-based forum directly supported by SCSA and the

Provincial ECD Forum. SCSA has reportedly worked intensively with the Tongaat, Umzinto, Cato Manor, Lamontville and Wentworth ECD forums. In addition, SCSA has actively supported the provincial KZN ECD Forum. It was agreed that 3 forums would be identified.

- The *Wentworth Forum* was identified as one of the forums to be included in the study sample as it represented a unique model both in terms of the nature and intensity of SCSA's engagement with this forum. It is also the pilot forum for the ECD intervention model. It thus warranted a closer look to assess the scalability of this model as well as its impact.
- Two other area-based ECD forums were identified through the application of relevant sampling stratification criteria. The selection of these forums was informed by a second level of sampling stratification, namely to ensure spatial representation of ECD forums from an urban and rural sites. To this end, it was proposed that the urban forum selected be *Lamontville ECD Forum*, and the *Umzinto ECD Forum*.

4.3.2. SCSA facilitated Provincial ECD Forum

The Provincial ECD Forum was included in the review. The approach utilized was to conduct a focus group discussion and key informant interviews with members of the provincial forum. The objective was to examine the approach which was used by SCSA to support ECD forums as a collective provincially The Provincial forums is comprised of 45 ECD forums in the province, which meets monthly in Durban. .

4.3. Comparative Groups

A critical methodological issue that such an evaluation raises is the issue of attribution of key observed outcomes to programmes specific interventions. The challenge is to ensure that the outcomes being assessed are the direct result of the intervention itself and would not have occurred without the intervention. Shaidur et al (2010) refer to this as testing if the outcomes can be assigned to the intervention, when in reality it could have occurred without the intervention. This is known as the confounding variable, where the researcher cannot control for factors outside which may have influenced the study findings.

This is generally addressed through construction of a 'treatment group' (beneficiaries of SCSA's support to forums) and a 'counterfactual group' (a control group sharing similar characteristics as the treatment group but who were not exposed to intervention). The fact that this group would have been eligible but did not participate may be due to a set of unknown characteristics such as not being as well connected or networked in the ECD sector. While this may result in some bias which cannot be avoided given the

methodological and other constraints under which the evaluation study is being carried out, the treatment group and the counterfactual should ideally be established at the outset of the intervention and any difference between the two groups can then be attributed to the effects of the ECD forum intervention. This was not established at the time the forum initiative was implemented and hence the research team proposed to identify comparison groups as a means of assessing differences, if any, in impact.

It was proposed that two ECD forums who are members of the provincial ECD forum but who have not been beneficiaries of SCSA support directly at an area based level be included in the study sample as 'comparison groups'; the idea being that although they have interacted with and benefited from work with SCSA via the provincial forum, they did not have the value of an intensive engagement at the area based level. These groups were identified through the mixed matching approach. While the total membership of the provincial forum was 48, the selection of the 'comparison' groups was limited to the 18 ECD forums which are members of the provincial forum but which are located in the eThekwini region for pragmatic considerations including time available and costs of reaching distant forums. The two forums selected were the *Marianhill ECD Association* and the *Folweni ECD Forum*.

Table 2: Description of evaluation methods, data collection instruments and sampling units

Evaluation Method	Data collection instrument	Types of information collected	Sampling Unit
Document and literature review	Literature searches	Review of available policies, programme reports, training manuals	
Analysis of Baseline Data for Wentworth ECD Centres	Analysis of quantitative data using STATA	Secondary analysis of records of baseline information recorded on Wentworth ECD sites	Members of Wentworth ECD Forum
ECD Audit Survey	Survey Instrument	Explore the state of the quality of ECD in Wentworth	Key informants from each of 24 ECD centres in Wentworth
Focus Group Discussions	Focus Group Guide	To explore their understanding of the role and value of ECD Forums in strengthening access to, and quality of, ECD services and to assess impact/value of the asset or service delivered by support from SCSA	ECD forum members from 5 forums; 3 of the Forums receiving direct support from SCSA; 2 forums who receive support via the provincial ECD forum
Interviews	Key informant interview schedule for ECD Forum Office Bearers SCSA Forum Facilitators SCSA Funding Institution External Stakeholders	Assess understanding and purpose of ECD forums Explore experiences and perceptions of effectiveness and efficiency in the implementation and management capacity in respect of ECD forums	1 office bearer per ECD Forum x 6; SCSA Facilitators x 2; External Stakeholders x 4-5; SCSA Funding Institution x 1
Observation Visits	Observation Template	Aimed at triangulating evidence collected from interviews and focus groups on how forums function	1 x Wentworth ECD Forum; 1 x Provincial ECD Forum
Case Studies	This will draw on multiple sources of information including reviewing records, interviews, literature reviews and from the various survey instruments	Case studies play an important role in complex evaluations in helping to understand the impact logic chain and theory of change. They capture how, who and why questions in an integrated manner by eliciting perceptions and judgemental information not easily captured through surveys.	This is not predetermined and will be identified as the study unfolds

Study components

The study was structured into two related components. One component entailed an audit of ECD centres that belonged to the Wentworth ECD Forum. The audit of the 16 ECD centres in Wentworth built on baseline data collected by SCSA in 2011 with the aim of assessing what changes may have occurred between 2011 and 2014 as a result of the SCSA intervention. At the time of the 2014 audit, conducted by HSRC, only 12 of the original ECD centres were still operating.

The objective of the audit was to understand what contribution, if any, the support from SCSA impacted on improvements in the level and quality of services being provided by the Wentworth ECD centres which belonged to the forum.

The 2014 audit survey was planned to be conducted with all 22 current ECD centres who are members of the Wentworth Forum as it was believed that this baseline data would be of value to SCSA in the future. One centre could not be audited, and hence the study reports on 21 centres.

The 2011 audit instrument developed by SCSA was modified for the 2014 audit to include additional questions which the research team believed would enhance the quality of the audit information generated.

The second component of the study was qualitative and sought to collect data pertaining to stakeholder experiences and perceptions of the value of participation in SCSA supported ECD forums.

4.5   CORE THEMATIC FOCUS OF DATA COLLECTION

4.5.1   *Themes covered in the review of ECD Forums*

Core themes which were covered in the focus groups and key informant interviews included the following:

- Understanding initial operating principles of the forum and the role/purpose for which the forum was formed;

- Exploring forum governance;

- The value proposition of participating in a forum;

- Benefits accrued from participation in forums;

- Contribution and investment required from members of a forum.

Themes explored in the Wentworth ECD Centres Audit are outlined below:

Table 3 Themes used for Wentworth Audit

	Dimension	*Assessment elements*
1	**Physical Structure**	Type of structure – size of land, backyard shack, standalone building, - physical environment, infrastructure, equipment and furniture, utilities (lighting, water, sanitation, fencing etc.), play spaces etc.
2	**Child profiles**	Socio-demographic data of children accessing ECD including age, gender, disability, race, language, enrolment data, special needs
3	**Practitioners**	Socio-demographic data on ECD practitioners and workers in the Centres. Including race, gender, age, years of experience, qualifications, access to training (by whom, accredited or not), income levels, employment conditions, types of employment in ECD, ratios of practitioners to children
4	**Food and nutrition**	Nature of food provided, food menus, dietary diversity, nutritional security, sources of food, food preparation
5	**Transportation**	Forms and means of transport to ECD centres, cost of transport, safety issues relating to transport
6	**Health and safety**	Compliance with by laws and other legal requirements. This will include health screening and hygiene and safety practices
7	**ECD Centre Regulatory and Institutional arrangements**	ECD Registration – NPO, ECD registration, Local Government environmental registration, Section 18 a tax exemption, record keeping systems– child records, incidence reporting records, progress assessment, management (governance), financial management, fundraising capacity, banking etc. , policies and systems for management and governance. Compliance with Children's Act requirements.
8	**Quality ECD service delivery**	Curriculum, daily programme, parental involvement, supervision and support, language of instruction, age appropriate developmental programmes, responsiveness to special needs. Facilities and their surrounding/physical environment; materials and equipment; trained caregivers/education agents; services/curriculum integration of education and care; ratio of children to adults; partners/parental and community participation; finance/resource management; teaching strategies
9	**Financing ECD**	Fees, cost recovery, donor/income sources/expenditure patterns, costing analysis

The themes outlined above influenced and informed the development of the study instruments. The HSRC reviewed, and incorporated into the ECD Audit instrument in particular, a number of the guiding principles outlined in the Technical Guidance Note on Quality Learning Environments (SCSA, 2014).

4.6 DATA COLLECTION INSTRUMENTS

Data collection for this study employed three main methods. The first method was through focus group discussion per sampled forums. The second method was to administer key informant interviews to relevant stakeholders involved with ECD forums. Finally, the ECD Audit Survey was conducted with 21 ECD centres which belong to the Wentworth ECD Forum.

Focus groups

A combined questionnaire was used to collect information from ECD forum members who are supported by SCSA, as well as from a control group of non-SCSA supported ECD forum members. This focus group schedule was used to collect information regarding members' perceptions towards the support advanced by SCSA (see Appendix D).

Key informant interviews

The key stakeholders in the project were identified as the funding institutions: SCSA, SCSA facilitators, Wentworth stakeholders, the provincial KZN ECD forum SCSA facilitator, chairpersons of ECD forums and government stakeholders. A key informant interview schedule was developed to collect information from these stakeholders (see Appendix C). Where a stakeholder was unavailable for a face to face interview, a telephonic interview was conducted. The interviews were conducted in either English or IsiZulu, and an interpreter was employed where this was required.

Key informant interviews were conducted with the following stakeholders:

- At least one office bearer from each of the area based forums

- Operational staff of SCSA, responsible for facilitating forum interventions on behalf of SCSA

- A senior official from SCSA who has been driving the intervention

- External stakeholders who have interacted with the ECD forums in various capacities.

Focus group sessions were conducted with a randomly selected number of members of ECD forums in each of the five forums which are the focus of this study.

Quantitative data collection – Cellphone based data collection instrument

In addition to the qualitative instruments, a survey instrument was developed for conducting an ECD centre audit specifically for the Wentworth ECD centres (see Appendix B). This instrument was used to collect information on ten dimensions outlined earlier and was conducted with all ECD centres who are members of the ECD Forum in the Wentworth area. The instrument was uploaded into the 'Mobenzi' [1]digital platform which was used to collect data.

Sampling for the Wentworth ECD Forums Audit

Currently there are 22 ECD centres who are members of the ECD forum in Wentworth. According to SCSA's terms of reference, the audit was to be conducted on only 16 ECD centres which were surveyed in Phase 2 in 2011. Of these 16 centres, only 12 were found to be still operating in 2014. The HSRC took the decision to extend the audit to all 22 centres as it was of the view that SCSA could use the survey data set as baseline information for future monitoring and evaluation purposes.

Fieldwork

A research team comprising of five researchers conducted this investigation. The instruments were pilot tested and refined before the main study was conducted. Fieldwork preparation was made extremely easy through the support provided by SCSA staff, consultants and mentors in Wentworth. This support included assistance with scheduling of focus groups and key informant interviews. The smooth and timeous completion of the field work is testimony to the efficient communication network of SCSA.

4.7   ETHICS APPROVAL

Researchers in the HSRC are very aware of the ethical considerations related to research with human subjects, and these concerns are built into the planning and review process of all research proposals. Where formal ethical clearance of research proposals is required, such proposals are submitted to established ethics committees for research on human subjects in South Africa. The research ethics committee (REC) examines and approves all research projects in advance. The REC granted approval on 18 November 2014 for this study to be undertaken, subject to changes on the consent form which elaborated on the need to recognise the limitations of managing confidentiality in respect of focus group

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[1] Mobenzi is a fieldwork research and data collection suite which is digitally based.

sessions and hence advising participants to be circumspect about how they conducted themselves and what they disclosed during focus group sessions.

Table 4: **Qualitative data collection fieldwork performance**

Data collection method	Stakeholders	Target	Actual
Key informant interviews	Funding Institution: SCSA = 1	1	1
	SCSA Facilitators, consultant and mentor = 2	2	3
	Wentworth stakeholders (internal and external) [councillor, civic society and previous chairperson]	3	3
	Provincial KZN ECD Forum SCSA Facilitator/Forum Member = 2	2	1
	Chairpersons of ECD forums 1 per forum = 5	5	5
	Government Stakeholders [DOE and DSD]	2	2
Focus groups	Forum Members (6 – 8 forum members per focus group) [Provincial, Wentworth, Umzinto, Lamontville, Folweni and Marianhill]	6	6
ECD Centre Audit Survey	All WECDF centres	22	21
Total		**43**	**42**

Fieldwork experiences – challenges and limitations

There was a great willingness by all participants to be interviewed and participate in the study. No ethical issues arose during the fieldwork and all consent forms were signed willingly by all study participants who also consented to the interviews being digitally recorded. ECD centres did not pose any challenges and responded to the research questions in a frank and honest manner.

A recurring theme during the audit was the expectation of feedback on the audit findings and the forum study findings to participants. The SCSA is urged to give this due attention.

4.8   DATA ENTRY, CLEANING AND ANALYSIS

Qualitative data was translated and transcribed. Themes were produced from the data that enabled the researcher to make sense and meaning of the thematic content. This way, an experienced researcher can also use an 'ethnographic' bias in understanding the data. This is especially important in understanding deep-seated cultural issues and 'community-norming'. The Nvivo statistical package assisted in this regard.

The quantitative data was analysed using the statistical package STATA and other analysis techniques to investigate significant differences between the beneficiary and non-beneficiary ECD forums. Excel was

also used to analyse trends and to identify unique household and individual cases to select for case study analyses.

A critical aspect of research is the effective analysis and distilling of the key findings from the study, which requires accurate analysis of the information obtained through the key informant interviews, focus groups, observation visits, survey and the verification and cross tabulation of the data.

4.9 CONSTRUCTION OF INDICES

Introduction to Composite Indices

The audit study generated a vast amount of data on a range of indicators relating to ECD centre performance. However, to better understand multi-dimensional concepts it is important to utilise a composite index. Composite indicators are increasingly being used to understand a phenomenon that cannot be captured by one single indicator.

A composite index is a quantitative or a qualitative measure derived from a series of observed facts/indicators that can reveal relative positions in a given area (OECD, 2008). It is formed when individual indicators are compiled into a single index on the basis of an underlying model.

This approach allows us to identify common trends across many separate indicators, that is, allows for ease of interpretation of a battery of separate indicators. A composite indicator can be useful in benchmarking centre performance and can assess progress of ECD centres over time. Details regarding the manner in which the indicators were developed for the composite index are included in the results section of this report.

Construction of the ECD composite index for SCSA

The ECD Composite Index was developed for assessing key issues consistent with the objectives of SCSA interventions with respect to ECD centres, namely the performance of ECD centres relative to specific interventions. The construction of the composite index involved several steps with corresponding methods being used at each step of the process. The first step was to isolate a set of variables which could be included in the composite index. These were tested with SCSA in terms of coherence with its strategic objectives. Data for inclusion was selected on the basis of its analytical soundness, measurability, centre coverage, relevance to the phenomenon measured and relationship to each other.

4.10 CONCLUSION

This section sets out a framework for evaluating the impact of the performance of selected ECD forums supported by SCSA in the KZN region. The framework was guided by the central objective of enhancing access to, and quality of, early childhood development services for young children in South Africa. It is important to note that the choice of methods and techniques and sampling decisions is significantly informed by resource and time considerations.

5 RESULTS - ECD FORUMS

5.1 DESCRIPTION OF SCSA SUPPORT AND VALUE OF ECD FORUM PARTICIPATION FOR ECD CENTRES

There are many factors that contribute to the functioning of an ECD forum. This was a recurrent theme articulated very clearly by various stakeholders interviewed for the study, with some common elements expressed generally. After an ECD forum has been established in an area, members share information and the level of development/operation of each centre is 'gauged'. Those who are behind and are not developed to the same level as the most developed centres belonging to the group are encouraged and assisted to 'catch up.'

In terms of the nature of forum support, this has been summarised from respondents interviewed for the study into four categories, viz:

a) funding / access to resources

b) technical advice / information sharing

c) training

d) best practice models

5.1.1 Catalysing and constituting a forum

The overarching catalyst of formation of ECD forums was the concern of the quality of ECD services being offered in their communities. The narratives below chronicle how the sampled forums came into being. While it is not SCSA's objectives to specifically help catalyse the development of forums in different communities, some of the forums profiled emerged out of direction intervention from SCSA.

5.1.2 Area based forums directly supported by SCSA

5.1.2.1 The Wentworth Forum

The catalyst for Wentworth ECD forum (WECDF) was a community member who was concerned about the conditions of ECD centres in the Austerville area. The anecdote below outlines what was the impetus for the formation of WECDF.

> *One day I was picking up a child from an ECD centre that is when my eyes were open. Many kids were crowded into a wendy house. I started talking to the teachers at the ECD and got to realise that they were absolutely lost. They had not been visited by government in 20 years. They had not gotten any training or development. The teachers had tried their best, but I did not like what I saw. I decided that I needed to do something about it. I knew that if I were to help a community, it had to start with my community. I battled with the first ECD, it got better with the 2nd one, and then I spoke to the local municipality in the South Durban Basin. They were really catalysts for change. At that time, I did not think of how to evolve. I just knew that the situation was desperate. I went to her and said that I had seen something. My philosophy is that is there are challenges, and then there are opportunities to change it. I started to speak to others around me. I also did my desk top research. I realised that there were universal challenges. I then began to speak to other areas. I realised that I had touched on a time bomb. The social development manager then asked for me to propose a solution.*

Source: SCSA Discussant

The involvement of this community member in a development initiative facilitated by Ethekwini Municipality in the South Durban Basin provided the platform for engaging with a range of stakeholders, including SCSA and resulted in the hosting of an ECD Indaba in the Durban South Basin Area, convened by the eThekwini Municipality in 2009. The broad range of stakeholders at the ECD Indaba included government, Non-Governmental Organisations (NGOs), the private sector, ECD practitioners and the community members involved in the management of ECD centres. A key outcome of the Indaba was the formation of a steering committee to lead action around resolutions adopted at the Indaba on how to strengthen and support ECD centres in the South Durban area.

Catalysing the establishment of the Wentworth ECD Forum

"We started moving from crèche to crèche. Our numbers started growing to a point where we could not control it. We agreed that at that point the crèche forum had started to take shape. The 3 main purposes which were sharing best practises, capacity building, collective action, those were not the core purposes at the initial stage." (SCSA Discussant)

With the initial stages of forming a forum having been addressed through various meeting between various stakeholders, various ECD centres in Wentworth started joining the forum. The excerpts below show how some ECD centres started joining the forum.

"I used to work at a crèche before. I opened up a crèche at a…. I was running my crèche from there. I was invited …..to come and attend the forum, I eventually did come. I enjoyed it, I have learnt a lot" Forum discussant

"I was forced to attend a forum meeting by my boss. I had been teaching in Umlazi for 17 years. I was representing my boss. But when I got to the forum I found people who were welcoming, I felt comfortable. Because of my joining the forum I found that there was so much that I was learning. I was even volunteering. Within 6 months of having joined the forum, I found myself opening my own centre 3 years ago" Forum discussant

Forum Governance and Structure

In November 2014, the Wentworth ECD forum membership comprised of 22 ECD Centres. Membership of the forum is voluntary, with the expectation that forum members will abide by the rules and decisions of the forum, which are implicit rather than clearly documented rules. The forum has a management committee and several portfolios which are chaired by various forum members. The forum meets monthly and is chaired by a representative of one of the ECD centres assisted by fellow management committee members. Staff members of SCSA are always present at these meetings to serve as resource people.

Lamontville ECD forum.

The Lamontville ECD Forum (LECDF) was a pre-existing and independently functioning forum in the South Durban Basin (SDB), which SCSA identified as an ECD Forum with an opportunity for growth. SCSA held its first meeting with members from Lamontville in April 2011. The Lamontville was a spinoff from the Wentworth Pilot, with Lamontville ECD stakeholders requesting that SCSA help support their local forum.

> *Catalyst for the formation of the Lamontville ECD Forum*
>
> *I formed this ECD forum based on the fact that there was a need. In Lamontville we had many crèches but they did not work together. As much as we communicated, it was not enough. Sometimes the crèches had similar events or activities that could have been merged. The only time that we would meet was at community meetings. From that, we decided that we should also have meetings to discuss matters pertaining to ECD centres. At these meetings, we discussed issues and came to a resolution so that all the crèches in the area would practise the same thing. For example, we had a discussion about school holidays and if whether or not they should close. We took a decision that was uniform for all of us. We also discussed challenges that we faced, including the home based care centres. We started off as 4 principals. (Forum discussant) I have been running an ECD since 1991. Most of the other crèches were open after mine. The ECD's in the area grew. I was advising people to open ECD centres where they are based instead of coming to work for me. I also encouraged them to come to the forum meetings that we were having so that they could also learn and get advice about running their ECD centre*

Lamontville Forum Discussant

5.1.2.2 Sekuyasa ECD Forum

The Sekuyasa ECD Forum in Umzinto was established in April 2000 with SCSA becoming involved with this forum in 2012. The main factor contributing to SCSA involvement was SCSA commitment to expanding the Water, Sanitation and Health Programme (WASH) in a rural community. This need arose from work that SCSA was involved with focussing on orphan and other vulnerable children through its Care Programme which was operating in the Umzinto region. A forum member described how the forum was formed.

> *There was a recognition that an ECD forum was needed in the area to teach people what a good practitioner is. Molly (an experienced ECD practitioner) helped us a lot in establishing an ECD forum so that we could get help and information...... Seven of us decided to establish a crèche to protect children from dangers in society such as rapes. We went to Molly to help us. She advised us to attend the forum so we would know more about things that a crèche should have. An NGO called TREE provided training on ECD. SAVE also came to visit us and they helped us obtain funding and training. Oxfam also provided training on WASH. SAVE provided training on "cook and garden" and next year we will be attending training on "small scale management." In 2013 Molly helped us install a new roof. She also gave us a book shelf. In 2014 SAPPI organised crèches' to go and train and 25 crèche teachers were selected. They received 3 years' training with TREE on matters related to ECD.*

The Umzinto ECD forum is comprised of 38 ECD centres. The forum is run by an executive committee and meets monthly with an SCSA Facilitator in attendance. The chairperson is from an ECD centre in Umzinto and co-chairs the meetings with the SCSA facilitator.

Comparison Group Forums

The Marianhill ECD Forum

The Marianhill forum was formed several years ago as a result of the need by the members to network with each other. Through networking the forum members began to assist each other. One forum founding member said:

"*We wanted to get to know each other. When we had gotten to know each other, we then formed a network and started assisting each other as members of the forum. We wanted to uplift the forums in the area and look out for the best interest of the child*".

The founding forum members highlighted the following as their main objective of forming the forum.

"*We identified that we needed to help each other. It was natural for us as women to want to join hands and work together. We are already meeting for prayer groups and all of those things, so we saw it wise to meet as a forum as well. Our being in the forum has opened up a lot of*

opportunities for us. We also tell each other about places that we can get/buy useful things for our centres like the registers"

The forum meets once a month and membership voluntary. The facilitation of the forum is undertaken by members themselves.

Folweni ECD Forum

The Folweni ECD forum was formed in 2004 by community members themselves acting as a catalyst. One founding member of the forum described how the forum was formed in the following narrative.

> *I was part of the people who formed this forum. We started off as the Umbumbulu crèche association in 2004. There was a problem because we did not have a central organ that would receive information for us. You would find that the social workers would have information to give us but the difficulty was that we were all scattered. I then came up with the idea of having a central body that would get the information and then take it back to the centres. We spoke to our coordinator about the idea and that is how it was formed. The forum then grew and we then agreed that it should be divided into clusters. There are 4 clusters, Siyathuthuka, Simunye, Folweni and Makhutha. We are working with SCSA in all of the 4 clusters. The plan is that all of the clusters are represented individually because at the moment I am the one is representing all 4 of them.*

Membership of the Folweni ECD Forum includes payment of a joining fee for new members and an annual subscription. The forum meets on a monthly.

The Provincial KZN ECD Forum

Although the KZN Forum was reportedly established in 1998 it began receiving support from SCSA in 2008. The forum is made of representatives of 45 ECD forums. The provincial forum is facilitated by a SCSA staff member whose responsibilities are presented in the text box below.

> **Role of the Provincial ECD forum facilitator**
> - Assist in the development of individual ECCD Service Provider Forums so as to allow them to identify needs and set objectives to enable the members to benefit through capacity building, sharing of best practices and collective action.
> - To drive and facilitate the KZN Association of ECD Service Provider Forums.
> - Liaise with Relevant ECD stakeholders.
> - Facilitate meetings between the Forums and provide capacity building.
> - Arrange exchange visits.
> - Offer support and guidance to the forum members.
> - Record the process of the project.
> - Agree upon the elements of the WASH programme to be implemented through the Umzinto ECCD Forum.
> - Share WASH learning with the members of the KZN Association of ECCD Service Providers.

The 45 ECD Forums, a mix of both urban and rural, send a representative to a monthly meeting held at the SCSA offices. SCSA subsidises the transport costs of one member per forum. This is done so that each and every forum has a representative at the meetings. If other members want to come for the meetings then they would have to foot their own bill. The subsidised member is expected to share the information from the provincial forum with members from their local forums.

"At the provincial level we create an opportunity for the crèche forum to attend the provincial meeting. The requirement is that the information shared at the forum must be cascaded to the forums. There is a gap for us to monitor how and if that information is being cascaded. We do get such information on an informal basis when members attend trainings"

The provincial forum does not have an elected or appointed leader from among forum members. The leadership role is provided by a SCSA facilitator. SCSA intimated that their objectives for the provincial forum meetings are to build capacity; share good practices and collective action.

According to the SCSA this is a deliberate strategy:

"We have not put a structure in place. We are following those 3 elements as they were. We have never looked at the representatives of the provincial association to take ownership. We always see it as a communication platform."

5.2   COMPONENTS OF THE SCSA ECD MODEL

5.2.1 The ECD Forum meetings

This is the core of the work of ECD Forums. For area based forums the arrangement is that the forum management (chairperson and the management committee) set the agenda of these meetings. This is not the practice for the provincial forum which does not have office bearers and depends on the SCSA staff to convene and facilitate the meetings.

In the three SCSA supported area based forums, namely Wentworth, Lamontville and Sekuyasa SCSA staff members are normally present during the meetings. In the WECDF and Lamontville ECD forum between 2 and 3 SCSA staff members attend; while with the Sekuyasa ECD forum only one SCSA member attends. While it was evident that SCSA staff members do not chair meetings it was clear that forum members relied heavily on SCSA staff members for leadership as well as for, technical and strategic support, playing both a facilitatory and strategic role to the forum.

Access to Information

The forum meetings act as a platform where the forum members share information and best practises. The information sharing in SCSA supported forums is structured in such a way that members of the can share information with each other and also for outside stakeholders to come and share information with forum members. The sharing of information is managed through different approaches including training, presentations and discussions. Information shared covered a wide spectrum of issues including how to comply with regulatory requirements, child protection training, practitioner wellness training and ECD programming among others. These various activities are tailored to improve the general quality of ECD in the forums and the choice of topics covered is generated from needs of the forum members.

The forum meetings also act as platform where ECD centres experiencing challenges come and share these with the members in order to seek solutions. During the focus group discussions forum members indicated that forums have been effective in helping them deal with challenges. One example highlighted was that some centres lacked indoor and outdoor equipment. Members resolved to assist by donating surplus equipment or allowing the centres concerned to use their facilities when required. The issue of accessing resources was a motivating factor for coming together to establish a forum was a recurring response from forum members:

'We want to help the community. We meet so that we can support each other in the running of our centres. We also help each other with application processes and registration of centres. There have been problems of parents not paying school fees, which leads to the crèches suffering and the teachers not being paid because there is no money; we are not subsidised by the government. This is a very poor area, so we face that a lot. We are unable to kick out the kids that are not paying their fees. I get funding from DSD for 50 kids, but I have 102 kids at my crèche. So half of them are not funded and it is not all of them who pay their fees.'

'We share information about funders and sponsors. When we have heard about good things that could assist the forum, we tell each other about them.'

Access to training

ECD forums provided space for training activities to be identified and provided. Some training was provided outside of forum meetings. Access to training appeared to be a major draw card for ECD centres to belong to a forum. A member in one forum reported that they had become involved arising from the opportunity to access ECD learnership opportunities offered by the Department of Education. Indeed, in several of the area based forum members cited accessing NPO training as one of the most valued benefits. During these training sessions, forum members were provided with the knowledge, skills and necessary format for applying to be registered as an NPO. The registration tool kit supplied to members comprised of application forms, pro forma templates of a constitution as well as information on NPO annual reporting requirements,

Another significant training which members noted was the Water, Sanitation and Hygiene Promotion (WASH) programme - which was well received.

ECD Centre Mentoring

The mentoring concept was initiated in the Wentworth ECD Forum pilot and subsequently this service was extended to Lamontville ECD forum. The mentor's responsibilities are presented in the text box below.

Duties of Mentor in Wentworth

- Participate in meetings and activities of the Wentworth ECD Forum
- Attend trainings that are arranged for the ECD service providers in Wentworth
- Mentor and monitor the ECD services in Wentworth
- Assist in the development and use of the Resource Kit
- Manage the Resource Centre in Wentworth
- Meet with and regularly report back to the relevant Save the Children Programme Officer and the Save the Children KZN Programme Manager on activities undertaken.
- Undertake any additional activities requested by the relevant Save the Children Programme Officer and the Save the Children KZN Programme Manager that have benefit to the support service being provided to ECD practitioners in Wentworth

The mentor is responsible for mentoring all the ECD centres in the forum by physically checking if the centres are complying with regulations, are engaging in practices which improve the quality of ECD, and implementing what they learn from the forum. A SCSA staff member noted that providing information was not sufficient for enabling centres to implement as ECD centres often didn't know how to implement. Here in lies the value of the mentor. The trickle down model of information was based on the expectation that Forum members would take back lessons and learnings to their respective ECD centres for implementation. However what appears to be emerging is that ideas and lessons learnt are not always easily implementable without support, which appears to be precisely the role played by a mentor.

'.....at times we didn't know how to practise what we have been taught in the forum meetings in our ECD centres; the mentor helps us a lot by holding our hands and showing us how it is done.' [Forum discussant]

'Some of us have been owners of ECD centres for so many years, at times we tend to choose what we will implement in our crèches.' [Forum discussant]

The underlying message from the forum members and SCSA staff was that without mentoring there was a strong possibility that ECD forums would serve as talk shops due to the difficulties that ECD Centres would experience in translating new ideas into practice. Mentoring appears to be playing a very critical as it ensures that ECD centres are implementing what they are learning from the forum.

Characteristics of a mentor: The study explored with participants what their perceptions were about the characteristics of a good mentor. What emerged was that having a mentor who currently owns or runs an ECD centre was seen as creating a conflict of interest. An important issue relating to the selection of a mentor was that the person needed to be an experienced ECD practitioner. A mentor was also required to have skills in promoting reflection, self-learning and in engaging constructively with ECD centres to affect change.

Resource centre

Another important element of the forum model is the establishment of a resource centre. The challenge for most ECD centres is availability of resources and in this context having access to a pool of resources which can be shared amongst centres make economic sense. The mentor is responsible running the resource centre which provides forum members with various resources like equipment, educational materials, toys, photocopying services and forms from various government departments for ECD centre registrations.

The Wentworth resource centre make available resources such as equipment, toys, services and learning materials which can loaned by individual centres.; In the context of scarce resources the idea of a resource centre as cost effective mechanism for resource sharing is actively supported such centres can also serve as a repository by government and other stakeholders to make available 'meagre' resources to ECD centres and for disseminating information.

Centres of excellence

In WECDF there is a ECD centre which has been identified as a Centre of excellence. The concept of a centre of excellence is where a centre espouses good practices and provides a learning ground for demonstrating such practices The Wentworth centre of excellence is registered with the DSD and meets all the other institutional requirements of an ECD centre. Forum members who need to learn about different skills like ECD centre management, ECD educational programmes, etc. are free to consult the centre of excellence. It was unclear what

assessment tools and criteria were applied to the identification of a specific ECD centre as a centre of excellence.

While other forums did not have centres of excellence in their community, one provincial forum member reported on peer visits which was used in their forum as a way of helping each other improve ECD standards in that area. Peer visits enhance the quality of ECD as practitioners learn from each other and motivates centres to perform well particularly if they are aware that their peers will be assessing the state of their centres. This idea does not appear to have been strongly fore-grounded in the SCSA ECD Forum model and it is suggested that this should be further explored.

Resource leveraging

Resource leveraging is an important component of the SCSA ECD model and is achieved through active networking and partnership development with government, non-profit and private stakeholders. The main observation in terms of resource leveraging is that SCSA has been extremely active in this area and has served as a facilitator and a conduit for leveraging resources substantial resources for ECD forums. The ECD forums identify the needs of their forum or centres and although the intention is that the forum must engage stakeholders to access support, in practice the study found that this responsibility appeared to be undertaken exclusively by SCSA staff. In situations where the partner provided funding for addressing a particular need SCSA appeared to take on a driving role in identifying suitable service providers on behalf of the funders.

Most of partners support was in in kind, not in cash, which appears to be a very deliberate strategy on the part of SCSA. According to SCSA, serving as a conduit for funding ECD Centres directly might create unnecessary administrative responsibilities and importantly may become a source of friction between forum members with regards to who accesses funding. Types of resources leveraged by SCSA for ECD forums have included: training, equipment, administrative services and health related services.

The table below provides a brief description (not exhaustive) of the partnerships and the resources received from various partners.

Table 5: Resources leveraged

Name of Partner	Nature of Resources to ECD forum
SCSA	• Facilitating ECD forums, strategic guidance and planning, leveraging resources through partnerships, management training, and providing staff for mentoring, facilitation and monitoring of the development of forums.
OXFAM	• Funding for ECD forums development and WASH programmes for the last 3 years. This support is for all the forums.
Rotary Club International	• Funding the Jamaica forum for 3 years. The funding is mainly for training of ECD practitioners, mentoring and monitoring.
Unlimited Child	• Provision of training and equipment for the implementation of an ECD programme to Wentworth ECD forum.
TREE	• Provision of various training components to ECD practitioners.
Departments of Labour; Social Development; Basic Education Agriculture; Transport; Cooperative Governance; Human Settlements, and Health	• Providing administrative information regarding ECD policies and regulations. Information sharing on changes in government regulations and ECD curriculum • Provision of EPWP stipend for ECD educators in Wentworth ECD Forum.
University of KwaZulu Natal	• Teaching forum members on ECD.
University of South Africa	• Provision of non-accredited training for ECD practitioners
ETDP SETA	• Provision of learnership for ECD practitioners.
CREATE	• Training ECD practitioners on working with children with special needs.
UNICEF	• Provision of WASH hand washing programmes to children.
Keep a child Alive, Gateway Clinic, Austerville clinic	• Provision of wellness program to ECD practitioners • Provision of immunisation and vitamins supplements to ECD children.
eThekwini Municipality Departments	• Monitoring adherence to health regulations, training on water and sanitation.
SAPREF	• Provision of first aid training.
CALTEX	• Provision of furnishing for ECD centres e.g. mattresses.

Documentation provided by SCSA estimated the market value of the goods or services it leveraged for the ECD forums to be above R3, 5 million from the year 2010 to 2014. While this value remains unverified, particularly as SCSA estimated the cash value of in kind support it reflects considerable investment in ECD centres.

As indicated earlier, leveraging of resources – cash, in-kind, expertise and time act as the oil which lubricates the whole SCSA model. Importantly it is clear that many of the activities implemented through the forums would not have been possible without the leveraging of external resources by SCSA. Benefits of Participation in ECD Forums

Drawing from the rich testimonies gathered from the focus group discussions it is evident that the benefits that accrue to forum members themselves, the ECD centres, the children and the community at large are vast and varied.

Creating access to a knowledge community and knowledge resources

The resource centre provides children's books, teaching aids, educational toys and general information relevant to educators and education. Of note is the resource kit which contains ECD manuals, networking information, registration documents and various templates, and lesson plans. WECDF members repeatedly referred to the value that such a resource centre had for strengthening their knowledge and practice.

5.2.2 Role of SCSA staff in the provision of the facilitation of ECD Forums

In each of the forums profiled in this study we found the intensity of SCSA involvement varied. The greatest level of engagement appeared to be with the Wentworth ECD Forum. Here the forum had access to a full time facilitator, involvement of strategic leadership from SCSA as well as a mentor. Importantly the SCSA facilitator for WECDF has a history of lobbying for better ECD quality in the Wentworth area and has served as a champion for the forum.

Role of Facilitator in WECDF

- To facilitate the Wentworth ECD Forum and complimentary activities
- Specifically facilitate the implementation of a WASH Programme in Wentworth
- Contribute to the development of training and resource materials
- Guide and supervise the Mentor
- Network with relevant stakeholders to the benefit of the ECD community
- Participate in the Monitoring and Evaluation of the Forum Model
- Meet with and regularly report back to the Save the Children KZN Programme Manager on activities undertaken.
- Undertake any additional activities requested by the Save the Children KZN Programme Manager that have benefit to the support service being provided to ECD practitioners you are engaging with.

In Lamontville, SCSAs involvement is much less intensive although it includes having a facilitator support the forum and more recently the appointment of a mentor who works with the forum members to provide mentoring support to their constituency.

Our proposition is that the facilitation role is key to the efficacy of forums and having dedicated facilitation should be a core element of the ECD forum model.

5.2.3 Benefits to ECD Centre

Study participants were asked to explain what they perceived to be the benefits that accrue to ECD centres as a direct result of being members of ECD forums. A collection of the responses is summarised in Box 1.

Box 1: Benefits to ECD centre

- Centres improve their intake of children as they are perceived to offer a better quality service. Demand for ECD services has grown reflected in increased enrolments.

- Centres have leveraged access to non-grant income and in-kind resources like peer learning, in which positive interdependence is fostered between ECD centres.

- Through peer visits members can have a visual of the ideal that they should aspire to.

- Social inclusion is in practice with evidence of affirmative action being taken by the forum members to change the circumstances of ECD centres which are under-resourced.

- The facilitation of a knowledge hub reflects an inspiring experience of building a knowledge hub almost from scratch on ECD. This has included a tool kit on how to establish and run an ECD centre.

- Access to a mentor who demonstrates how it is done.

Source: Focus group discussions and key informant interviews, November 2014

Further elaboration on the benefits to the centres was provided by another focus group participant who explained thus:

'We get to better understand how ECD's should be functioning. Everybody is on the same page rather than working in isolation. They also get knowledge and experience as well as networking with other ECD's and being able to address things that they need to address.'

ECD centres who belong to the SCSA supported forums have now become an inter-connected network that shares intelligence on various aspects of their work, which in turn helps them keep abreast of issues. For example, there was a *'problem parent'* in the community who would enrol their child and not pay their school fees in one centre for 3 months, then withdraw the child from that centre and enrol them at another centre. Word soon got out and the family concerned was identified to all ECD practitioners in the area who were made aware of the situation and members were able to confront the parent head on when he came their way.

'We benefit by shaping lives. The other benefit is that there are job opportunities that are created. The community benefits in that we are fighting poverty in the community. For example, we do not kick a child out who is not paying or cannot afford to pay their fees. In fact, when we hear of a child in the community that is not being looked after during the day, we go and we take that child into our own ECDs.'

5.2.4 Benefits for Children

Box 2: Benefits of participation in an ECD forum for children

- Knowledge, safety, stimulation

- Nowadays Children learn; they don't go to crèche to sing all day like children who attended ECDs before / in the past

- Children receive a range of play activities to support their holistic development

- Children are exposed to curriculum and learning programmes that develop their minds, as opposed to just having someone to look after them during the day without any structured programme that stimulates their brains

- The child is fed a nutritious and healthy diet

- Children 0 to 5 develop holistically

- Young children receive the foundation they need prior to entering the formal schooling sector

- Children benefit from improved care and protection.

Source: Focus group discussions and key informant interviews, November 2014

As a direct benefit for the children, the following statement captures the sentiments of one of the interviewees regarding the impact of the work of the forums:

'*We take the information that we get from SCSA and we come and practise it in our own centres. For example, the kids also know not to drink juices that have tartrazine, and not to eat chips. They are learning and growing. We have also found that the kids will take what they learn at the crèche and then go and implement it at home; e.g. washing your hands regularly and praying before eating. We get positive report backs from parents about such.*'

The study did not assess the impact of the ECD intervention on children directly. This would require a range of instruments and baseline data etc which was outside the ambit of this study.

5.2.5 Benefits to ECD practitioner

Box 3: Benefits to ECD practitioner

- Some practitioners accessed learnerships for ECD training

- Practitioners work together and share information

- Practitioners get exposed to a range of developmental courses that enhance their teaching and qualifications

- Practitioners learn about the norms and standards for ECD practice

- Practitioners are kept up to date about the latest developments in the ECD sector

- Practitioners receive basic training in child care and protection, stimulation and nutrition

- Practitioners become professionally qualified and even get better jobs

- Practitioners benefit from updated information, they keep abreast with knowledge and the best practice model

- Practitioners also receive medical benefits from the wellness programme.

Source: Focus group discussions and key informant interviews, November 2014

Case Study: 'I am a person through others'[2]: Towards Achieving Decent Work and Social Equity

An innovation unearthed anecdotally during a focus group and subsequently verified by the SCSA personnel was how ECD centres benefited from participation in the Expanded Public Works Programme[3]. Wentworth ECD centres were provided an opportunity to access Department of Basic Education stipends for a selected group of ECD practitioners in Wentworth ECD centres. This stipend of R1500 was to be paid over a period of at least a year to an ECD

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[2]The statement refers to the concept of 'Ubuntu' – showing humanity towards others.

[3] EPWP is a social protection programme providing paid work to unemployed people.

practitioner. As the funds were limited and the DBE was keen on spreading this benefit to many centres not all practitioners in an ECD centre would receive the stipend which could create a challenge. After consultation with the forum and the ECD centres, those educators who had been identified as EPWP beneficiaries opted not to take the full benefit of their income personally , but instead committed to invest half of their R1 500 stipend willingly into the ECD centre where they were working so that the other staff could benefit as well as for some of that income to be used to contribute to the direct costs of running the ECD centre, pay for a substitute educator in the event of educators attending training and paying for the purchase of equipment and other needed essentials for the centre.

This form of 'Ubuntu' can be loosely termed *wage solidarity*. EPWP beneficiaries in this case were thinking beyond their individual needs towards the development of the community through an improved ECD service.

The Wentworth case study represents an important contribution to advancing the concept of social solidarity in South Africa. Social solidarity and the solidarity economy speaks to a commitment to advancing *'collective approaches to sustainable development that contribute to building a world that is more fair and just'*. This concept is not new to South Africans and ties in well with the African philosophy of *Ubuntu*, the core of which is the fact that one cannot exist as a human being in isolation and that economic activity and social purpose are connected, through collective action.

5.2.6 Benefits of ECD Forums for the local community and society as a whole

There are also invaluable benefits which accrue to the local community and society in general. For one, the local community is provided with an adequate ECD infra-structure that can free parents, especially mothers, to take up employment and further their education. This has the benefit of enabling women in poor families to break out of the cycles of poverty, illiteracy and economic dependence. Many mothers (especially young) in poor areas do not feel they are able to adequately care for their children daily because of family deprivation. Hence these ECD facilities are a relief to the local community.

The benefits to society and the local community at large are enormous. These benefits include:

> **Box 4: Benefits to society and the local community**
>
> - Parents get a chance to go to work in the knowledge that their young children are being supervised (child minding services).
>
> - Parents' involvement in ECD is actively championed and is viewed as critical because they have to take primary responsibility for the growth and development of their children.
>
> - Community members (where ECD programmes are provided at community structures) receive training.
>
> - Communities benefit in that there is a comprehensive educational and stimulating environment for their children; and there is protection for the child.
>
> - Stakeholders are introduced to the community for broader community development.
>
> - It creates employment for casual workers who are employed as substitutes during the absence of regular educators.
>
> - It creates a safe haven for vulnerable children in the community.

Source: Focus group discussions and key informant interviews, November 2014

Indeed, the ECD sector seems to go beyond just taking care of children's needs. The community as a whole also benefits as the sector employs many innovative and entrepreneurial women. This potential would be expanded even more if the centres can grow their capacity to take in more children to fulfil an ever increasing demand for low-fee ECD services in these communities.

'*It brings in more income to the community. If those children were not taken care of then their parents would not be working. That has a spin off. The parents have a safe place to keep the children, and parents can work and bring in income. It empowers people in the community who would otherwise not have been employed.*'

Other benefits to society and the local community include:

- delivery of a community service directed at integrated needs of children, women, and families.

- scope for women in the community primary caregivers to take up employment and further education in the ECD sector.

- opportunities for increased economic activity and productivity, particularly for women, many of whom have never been part of the formal labour market, through establishing ECD centres as small business entities.

It would appear that ECD forums have a strong sense of commitment to the children, the parents, the ECD practitioners and the community as a whole. This model works well because it serves multiple needs for a range of stakeholders. The advantage of this is economies of scale; in being able to engage and disseminate information to a bigger audience at one go, thereby spreading this value across a wider network. This has the attraction of effecting change, not in a piecemeal way, but in a way that enables the spreading of the message far and wide. Given SCSA's active engagement in the ECD sector over the past 15 years with the intention to improve the quality of services being delivered to young children, the ECD forum initiative demonstrates that it has achieved this in a cost-effective manner which has also had very positive spin-offs for the involved communities at large.

5.3 SUSTAINABILITY OF FORUMS

'You can motivate by fear and you can motivate by reward. But both these methods are only temporary. The only lasting thing is self-motivation.' Homer Rice

Sustainability of the ECD forums in this section is based on the objectives of the SCSA ECD forum model. The value of scaling up the model is summed up in the following statement:

'We knew that people were forming forums/associations. We had nothing to do with the formation. Ours was to say: if you have this valuable vehicle, why aren't we using it more effectively? We wanted to make them activities driven; we wanted to take what was already there and say that you could be so much more effective.' [SCSA representative]

The objective of a forum is to increase the effectiveness of individual ECD centres. Effective forums are characterised by four important elements namely: rapid growth, rapid diffusion, resilience and adaptive capacity all of which contribute to sustainability of ECD forums.

Rapid growth: There is evidence to show that the SCSA model has managed to achieve rapid growth in the number of ECD centres joining forums as well as in the number of forums that currently exist in this province; importantly the increase in forums linking together and connecting various stakeholders to forums. The linking of forums and stakeholders entrenches sustainability as forums continue to benefit from other stakeholders in the long term.

Rapid diffusion: The essence of forums is rapid diffusion of information, best practices and resources through its links. In this case most of the forum members agree that forums changed the way individual members access information and resources.

One forum member explicitly said: *'There is also a lot of sisterhood, sharing, and imparting knowledge to each other. We are able to bring ideas together and flourish.'* [Forum member].

In the course of diffusing information, relationships are built (*sisterhood*) and this entrenches continuous sharing of information, best practices and sharing of resources even outside the facilitation of SCSA.

Resilience and adaptive capacity: There is a general agreement by all stakeholders and focus group participants included in the study that if SCSA no longer supported these ECD forums the forums would continue to function, but not as effectively as they do at present. There is a strong perception of the role of SCSA in 'controlling' what happens in the forums, particularly in managing the stakeholder engagement. The study noted initiatives by SCSA towards implement a succession plan, especially in Wentworth where there is gradual transfer of management activities from SCSA to forum members.

An important lesson can be extracted from forums which do not enjoy direct support from SCSA but which support is mediated through participation in the Provincial ECD Forum. These forums appear to be able to function despite not having the level of support and thus speak to their adaptive capacity and their resilience. The scope of the study didn't allow for a deeper analysis of the factors enhancing their resilience but is of the view that growing their leadership capacity is probably a key contributor to their resilience.

'We want our centres to be registered and funded, but that is not our main goal. We also want to be skilled and empowered so that we improve the quality of the ECD services we are offering.

There is a lot of knowledge in this forum because there are people who have been in ECDs for a very long time. They are the ones who take the initiative and ensure that those of us who are new get the necessary support. I would say that this is what this forum does best.' [Forum member]

'We understand that we are doing it for the children. So that is our common goal.' [Forum member]

The adaptive capacity of forums is demonstrated by the responses below, where forum members, have developed relationships outside the normal forum business.

'We are already meeting for prayer groups and all of those things, so we saw it wise to meet as a forum as well. Our being in the forum has opened up a lot of opportunities for us. We also tell each other about places that we can get/buy useful things for our centres, like the registers.' [Forum member]

'.....the other benefit for me was that I lost my husband in June. The forum supported me and was behind me all the way. Most of them attended the funeral. We extend the sisterhood even outside of the forum. If somebody is sick or in hospital, we visit and we encourage them. We are like a family.' [Forum member]

5.3.1 Collective Action: Challenges and Opportunities

The rapid diffusion of information in respect of the provincial ECD forum remains a challenge. There does not appear to be a mechanism to verify whether the provincial forum members cascade the information downwards; to assess how wide the reach is and whether the filtering process does not create a 'broken telephone' syndrome where some information filters down and is diluted.

One SCSA representative lamented this situation:

'What happens is that the information does not flow. Some chairpersons will sit with information and not give it to others. Some of the people who need the information end up not getting that much needed information. Ours is not to monitor the chairpersons.'

This situation is compounded by the fact that the chairpersons of local forums attending the meeting do not appear to understand their role and obligation to share the information with their

area forum members as there does not appear to be a clear accountability mechanism linked to representation of a forum at the provincial forum. There is a need to devise a strategy which ensures that provincial forum members disseminate what they learn to their area forum members.

5.3.2 Challenges to Sustainability

In the forums (local and provincial) supported by SCSA, members perceive SCSA's central role in providing resources and leadership. One forum respondent indicated that SCSA was holding the controls: *'There should be elections to allow us to vote for somebody new. But if we are happy with that person then we will vote for them to stay. We should have the right to choose.'* [Forum member]

In the same forum, some members noted with concern that the current executive committee had not been elected, but had been hand-picked under the pretext of continuity.

'Even for the executive committee, we should choose, not have people who are self-appointed.' [Forum member]

There is a concurrence with this view from other key informants, that the chair for one forum was '*undemocratically elected*'.

In comparison, the ECD forums which linked with SCSA through the provincial ECD forum both reported that elections of office bearers was regularly conducted and that this appeared to entrench a sense of ownership by forum members and on the decisions made by the executive members.

A key informant had this to report in respect of the sustainability of the provincial ECD forum:

'Chances are 50/50. It could still continue but the participation that we would get would not be the same. People have seen the value of working together, but the problem would be to ensure that they can get those from afar to also participate in the collective as they have been doing. The forum would most probably only exist in Durban.'

This assessment highlights a number of issues, namely: there is an absence of a clearly defined leadership structure for the provincial forum outside of the role played by SCSA; and the forum is almost wholly reliant on the SCSA for its existence. Importantly the transport subsidy

contribution by SCSA must not be underestimated and in the long term this has to be addressed if the Provincial Forums sustainability is to be assured.

There is need for SCSA supported forums to define a sustainability strategy in terms of leadership, management and resource mobilisation.

- Resource mobilisation

- Building local leadership

- Management of the provincial forum

'We need someone to teach us how to write proposals and source funding for our forums and ECD centres.'

The main objective of this study was to assess if the ECD forum model is yielding positive outcomes for ECD. In assessing a multi-objective model it is imperative to analyse different aspects of the model and attach value to them. The main reason for attaching value to the aspects is that there is need to ascertain which aspects form the core of the model and are essential if the forum is to be effective l. A recap of the SCSA model shows that there are three objectives of the model, namely: building capacity of the ECD centres to improve ECD quality (achieved through various training activities, facilitation and mentoring by the appointed mentor), encourage the sharing of best practices amongst the ECD practitioners (through meeting monthly, centres of excellence and through information sharing) and facilitate collective action of ECD forum members in addressing the opportunities and challenges faced by the sector (achieved through meeting monthly and discussions of challenges being faced by ECD centres and practitioners).

5.3.3 *Assessment of the SCSA ECD Forum Model*

As discussed earlier, the SCSA intervention is pitched up at the level of the forum - not at individual ECD centres. The model with all its related components was only fully implemented with the Wentworth ECD forum. In other forums supported by SCSA only certain components of the model were implemented. The results of this study show that by virtue of being a member of an ECD forum, a centre accrues benefits.

An analysis of the results shows that the SCSA ECD Forum intervention model requires a well-functioning forum to act as a platform from where the intervention activities are launched. In essence, a forum provided a platform which community members use to work collectively to engage with government and other stakeholders to bring change in their communities.

The Provincial ECD forum

The learnings in respect of SCSAs intervention in respect of the Provincial ECD Forum has to be understood in the context that study was limited to one focus group of provincial stakeholders, a desktop review of available records, an observation visit and two key informant interviews. This provides a snapshot but not a holistic assessment of the value of a provincial ECD forum. It can however be surmised that some of the values ascribed to area based forums would apply to the provincial forum as well.

- It is clear that the ECD Forum model which SCSA employs differs slightly in the manner in which it is implemented provincially. As indicated earlier, it would appear that the provincial forum is mainly information sharing platform with limited capabilities for follow up support and monitoring. It is thus difficult to discern the value of the provincial forum for individual ECD centres.

- A strong recommendation is put forward to SCSA to address the issue of the leadership of the forum, and to implement monitoring and evaluation systems which ensure that there is more effective diffusion of information shared at the provincial meetings to members of the forums represented.

- The sustainability of the provincial forum needs to be addressed in terms of the leadership and management of forums, the costs and the time involved in attending meetings. It is advisable for SCSA to consider facilitating the development of sub-provincial forums given the vastness of the province which hinders accessibility to the potentially large numbers of ECD centres not currently included in a forum. Importantly SCSA needs to reconsider its approach to strengthening the provincial forums leadership capabilities.

"Maybe we would even need to divide the province into 4 and have different provincial meetings. We do not want to retain the model, but we want to share it. There are groups that acknowledge

that there is a forum, but we want them to do more than that. We want them to make it work through a forum structure". [SCSA staff member]

It can be concluded that for the ECD Forum model to work there are basic elements which an ECD forum must embrace. The core elements include forums should be platforms for sharing information and best practices; and forums must create spaces which enable members to learn from each other and must be owned and managed by the members themselves. Although SCSA's intervention is not necessarily the establishment of ECD forums, it is pertinent for SCSA to foster the basic elements in forums so that the effectiveness of the forums is increased.

Interventions such as capacity building and management training of forum members ensure that they understand their role in the forum and also improve the quality of their engagement with government officials and other stakeholders. Activities such as mentoring, resource leveraging and resource centres should be included as part of the forum package. The findings from the Wentworth Forum indicate that the success achieved in strengthening quality service delivery in ECD centres is strongly supported by participation in the forum together with the provision of a core package of support services including mentoring, resource mobilization and training.

5.4. Scaling up and replication of the ECD Forum Model

In the context of scarce resources and an urgency to address quality in ECD provisioning finding appropriate models to influence and enhance quality becomes an imperative. Where results are clearly demonstrated at a smaller scale, it is important to find the vehicle for scaling up and replication for wider impact. The ECD Forum model suggests that it does and could have the intended impact.

For the implementation of an ECD Forum a number of core elements have been isolated:

- *Voluntary participation in forums*; this includes the need for a forum to be strongly driven by the stakeholders themselves.

- *Community driven forums with leadership and management* being derived from the members; Leadership capabilities exist in communities as demonstrated in ECD forums which participate in the provincial forum, and which access limited support from SCSA.

This must be nurtured for sustainability and for achieving active citizenry outcomes and for advancing development priorities in South Africa.

- *Provision of technical and strategic support* from an external stakeholder; the role played by SCSA in terms of strategic leadership, facilitation and mentoring cannot be over emphasized in terms of its value. A scaling up of the ECD forum model must include sufficient resources to allow for these various roles to be provided to ECD forums.

- *Resource leveraging role:* Access to information and resources appears to be the strong draw card for participation in and membership of forums. In the context of scarce resources this role remains critical. However importantly what is required is for SCSA to invest substantially in developing forum leadership skills in how to harness resources.

- *Information Sharing:* Currently the model is heavily reliant on two modes of information sharing, namely the forum meetings and the resource centre. SCSA needs to consider exploring other approaches to dissemination of information, particularly as the trickle down model has its limitations as outlined earlier. The use of alternate media for communicating effective messages such as mini videos, storytelling and use of digital media including cell phones etc. for messaging needs to be explored.

6 WENTWORTH ECD CENTRE AUDIT FINDINGS

6.1. SUMMARY FINDINGS OF 2014 AUDIT OF ECD CENTRES IN WENTWORTH

The Wentworth ECD Centre Audit was undertaken in an effort to assess the change in ECD centres' delivery of ECD services, arising from their participation in the forum as well as through the implementation of the range of interventions highlighted earlier in this report. The audit objectives were to assess the extent to which quality of ECD services was enhanced for the Wentworth ECD centres in 2014 from a baseline study conducted in 2011. Importantly, it must be recognised that various factors can influence changes in ECD centres and hence not all changes can be directly attributable to the SCSA intervention, unless it is explicitly indicated.

All the ECD centres included in the audit were located in Wentworth, which means that they share the same socio-economic context. This section presents the summarised findings of the 2014 findings. For the full analysis and tables generated see **Appendix A**. The summary findings are divided into ten sections which represent various variables on which data was collected.

6.1.1 Description of ECD building type

In an effort to ascertain the quality of the building where the centres were operating from, the centres were asked to select the type of building they were operating from.

Table 6: Type of structure ECD centre is operating from.

Type of structure ECD operates in	Number of centres	%
Place of Worship/ Hall	3	13.64
House Only	11	50
Place of Business	1	4.5
Other	6	31.82
Total	21	100

These results confirm that most of the ECD centres operating in Wentworth run from private homes, making space a key challenge. Only one third (33%) of the ECD centres indicated that

they operated from a building specifically built for the ECD centre. Almost a third of the ECD centres (30%) are located at churches. The rest of the ECD centres are operating from private homes.

Figure 3: Does the ECD centre operate in a building specifically built for the ECD centre?
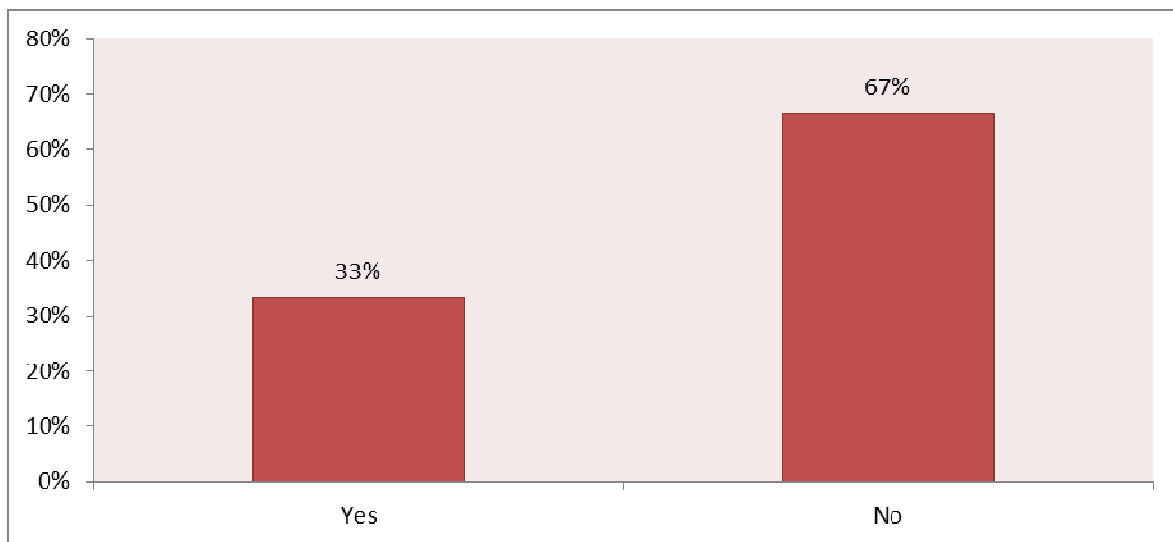
In terms of availability of space sixteen centres (76%) reported that they have enough space, while two centres reported that they have more than enough space and one centre reported it does not have enough space to accommodate all children. The centres in Wentworth all reported having sufficient outdoor space for all children. This appears to contradict feedback obtained during focus group sessions where ECD practitioners reported that access to outdoor space was limited for most centres.

In terms of availability adequate floor space no centre reported lack of adequate floor space.

Figure 4: Does the ECD centre have adequate outdoor space
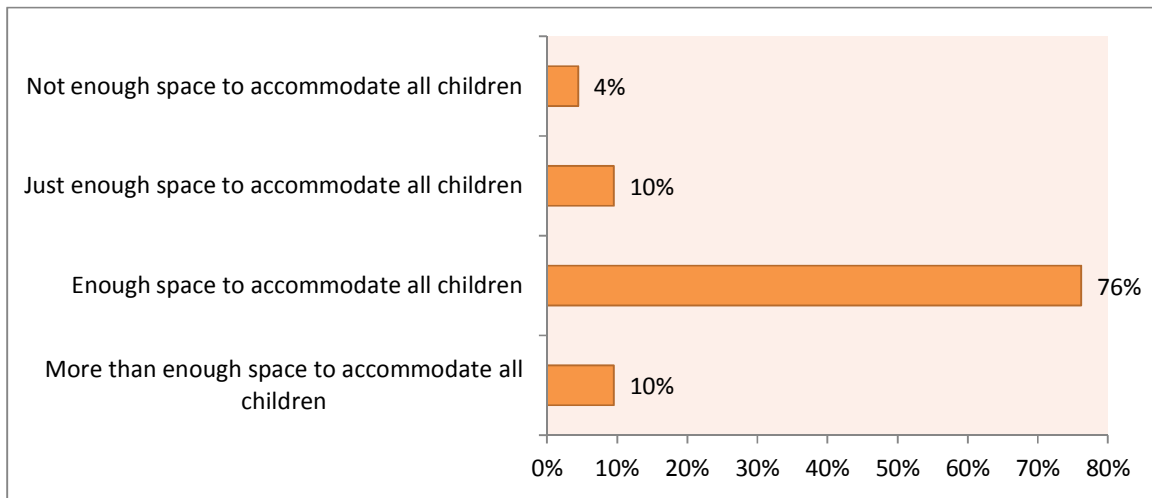
The majority (20) of the ECD centres fared well with regards to the conditions of the building.

A summary of the number of toilets and potties is given in the table below. On average, there were between four and five toilets per at ECD centre.

Table 7: Number of toilets and potties

	N	sum	mean	min	max	range	sd
More than 5 years	13	52	4	1	10	9	2.54951
Less than 5 years	8	39	4.875	2	8	6	2.531939

6.1.2 ECD centre provisioning (operating hours, type of service provided)

Most ECD centres operating hours appear to reflect the needs of working parents, with early starts and late evening closure times. The majority of the ECD facilities provide full day services, whilst 2 centres (9%) offer half day services. Full day services are beneficial for working parents who are not available during the day, as they provide children a safe and secure learning environment during the day. Importantly sixteen centres (76.19%) of ECD centres provide after-school care services.

6.1.3 Food and nutrition

More than three quarters (76%) of the ECD centres displayed a daily menu for the children.

Table 8: Types of food on the menu on the day of the audit.

Food types on the menu on the day audit	Number of centres
Carbohydrates	13
Proteins	13
Fruits	7
Vegetables	11
Fresh or vitamin enriched juice	7

The study probed the nature of food included on the menus in order to assess if the food provided contributed to dietary diversity. A total of 13 centres reportedly included carbohydrates and proteins on their menu, while seven centres included fruit and juice on their menu; only 11 centres reportedly provided vegetables. There is evidence to show that the menus included a variety of food which meets the daily dietary requirements for children; however, there it is suggested that centres could improve on the menu by including more fruit and fresh vegetables on the menu. The key challenge would be costs as these items are likely to be more expensive to procure.

Table 9: Meals Provided by ECD centres

Meals Provided	Number of centres
Breakfast	11
Morning snack	4
Lunch	13
Afternoon snack	10

All the centres provide food to children, although they varied in terms of which meals were provided. Only 11 centres provide breakfast, 13 provide lunch and only 10 provide an afternoon snack. Where the centre did not provide food eight centres reported that parents sent their children to the centre with lunch boxes.

About twenty centres (95%) of the ECD centres did not have refrigerators, which has implications for storage of perishable food. About 86% of the ECD centres did not have food gardens as an extra source of food provision for the centre. The main reason would appear to be lack of space.

A total of twenty centres (95%) of the centres reported no malnutrition among the children. It is suggested that this evidence be treated with circumspection as ECD practitioners would not necessarily have the tools or sufficient understanding to assess whether a child was malnourished or not as many of the symptoms of malnourishment are not easily visible.

6.1.4 Transportation

The responsibility for arranging the transporting of children to and from centres lies largely with parents. The figure below shows that 81% (majority) of parents were responsible for providing transport their children to the ECD centre.

It was reported that many of these centres included many children who did not live in the area but came from neighbouring townships in taxis hired to transport them to the centres. Of concern was that less than 20% of ECD centres checked if the vehicle transporting children to the centre had a road worthiness certificate or if the driver had a public drivers permit. In the context of media reports of accidents involving vehicles transporting children to educational facilities it is suggested that ECD centres need to play a more proactive role in helping parents to make safe choices about how their children are transported to and from the ECD centre.

6.1.5 Institutional and regulatory requirements

Over thirteen (61.90%) of the ECD centres provide a combination type of care, namely child minding and pre-school, while two (10%) of the ECD centres run only a pre-school facility.

Table 10 ECD centre assessment by various departments.

Institutions that assessed the centre in 2014	Number of centres	% of total centres (21)
Department of Social Development	19	90.5
Department of Health	15	68.4
Local Government	1	4.5
Department of Education	5	22.7
NGO	7	33.3
Other	1	4.5

Eighteen (85.71%) of ECD centres are not registered with the Department of Social Development as partial care facilities. Seven centres in Wentworth are registered as NPOs with the remaining fourteen run as private entities. A high percentage of ECD centres have been assessed by the departments of Social Development and Health, nineteen (90.5%) and fifteen (71.4%) respectively. However, most ECD centres had not been assessed by Local Government, the Department of Education, NGOs or others. In terms of support, most ECD centres reported receiving very little support from provincial and local government or from NGO's in general, with the exception of support from SCSA.

Table 11: Support received

Support for implementation 2014	Number of centres
Department of Social Development	3
Department of Health	1
Local Government	4
Department of Education	2
NGO	1

Only three centres confirmed that they have received support from Department of Social Development. One centre reported to have received support from the Department of Health, while four reported to have received support from the Department of Education.

Table 12: Support received from SCSA
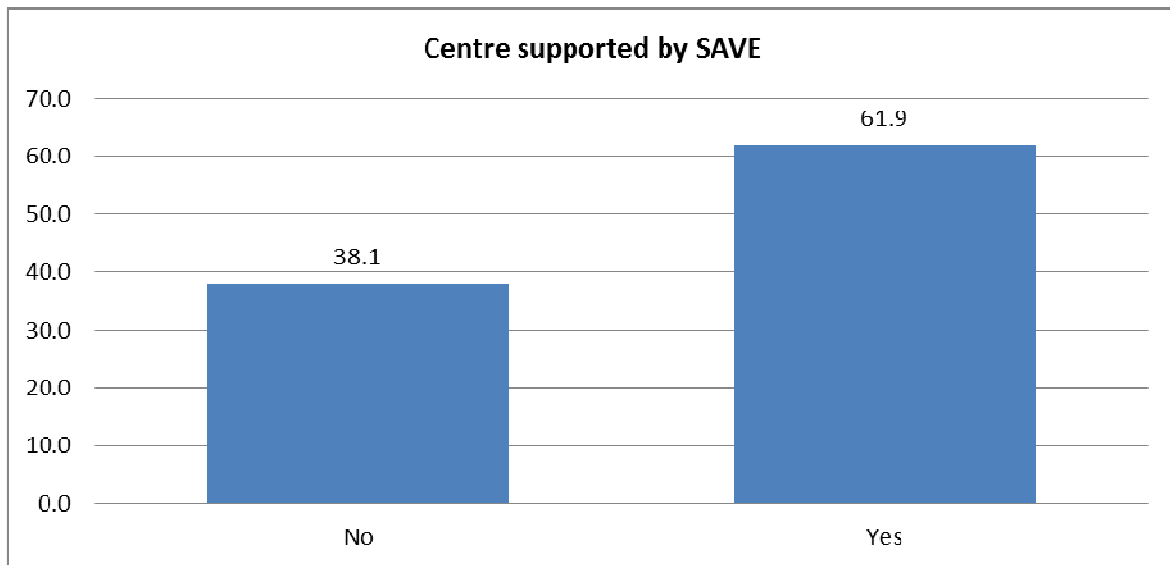
SCSA was noted as an important support to ECD centres in Wentworth, with over three quarters of centres (61.9%) indicating they received equipment support.

Table 13: Nature of support

Nature of support provided	Number of centres
Funding	2
Training	7
Equipment	17
Advisory services	3
Food	0
other	6

A question probed was the nature of support ECD centres were receiving from various stakeholders. The majority of the centres (17) confirmed that they received support in the form of equipment. Interestingly, only seven centres indicated having received training support despite various stakeholders providing training; e.g. first aid, hand washing, etc. No centre received support in the form of food.

6.1.6 Health and safety compliance

Table 14 Number of ECD centres compliant to Health and Safety requirements.

Health and Safety Regulations	Not compliant	Compliant	Don't Know
Building plans approval	11	6	4
Land use approval	13	4	4
Certificate of occupancy	14	2	5
Certificate of acceptability	12	5	4
Health permit certificate	14	3	4
EMS compliance	16	4	1
Certificate of handling gas	20	0	1
Fire clearance certificate	14	1	6
Electrical installation certificate	11	5	5
Police training	15	6	0
Parking clearance certificate	15	1	5

This section analysed the compliance of Wentworth's ECDs to the eThekwini City by-laws that regulate the functioning of ECD centres. The study found that some of the ECD centres in the Wentworth were lacking in terms of compliance in respect of some of the regulations. This was illustrated by the fact that two thirds of centres did not have a certificate of occupancy (66.7 %), which implies that the centre did not have approved building plans or zoning to run an ECD from that location. Very few of the centres had a certificate of acceptability, necessary for registration with DSD. Over half of the centres (57.1%) did not comply with several of the public health by-laws, three quarters did not have an emergency compliance certificate (76.2%), which is granted if the centres comply to the safety by-laws of the City (Gas handling, police training, fire clearance, electrical installation certificate and parking clearance). The level of non-compliance is of concern and it unclear if this is as a result of lack of awareness of the different City by-laws.

6.1.7 ECD Centre staff

The twenty one ECD centres have a total staff compliment of ninety three. On average this translated to between 4 and 5 staff members per centre although the numbers varied according to the number of children at the centre.

Table 15: Number of staff available

Name of centre	Number of practitioners
O	3
N	3
S	2
T	5
L	8
M	5
P	5
B	2
Q	4
R	2
U	3
H	6
E	3
C	2
G	8
D	7
F	10
J	6
A	5
I	2
K	2
Total	**93**

Job titles

Educators only make up 45% of the staff compliment, while the principal who is also likely to work with children constituted 17% of the staff. There is a possibility that Educator and general staff also perform other duties like cooking and cleaning, as ECD centres try to minimise costs of running the centre.

Table 16: Job titles

Job title	Frequency	Percentage
Owner	4	4.3
Principal	16	17.2
Educator	42	45.16
General assistant	14	15.05
Cook	2	2.15
Cleaner	10	10.75
Gardener	1	1.08
Volunteer	1	1.08
Other	3	3.23

Gender and race of ECD staff

The majority of the staff at ECD centres in Wentworth are coloured and females. This is unsurprising as the Wentworth suburb is predominantly a coloured residential area. Only three males work in ECD centres in Wentworth.

Age of ECD centre staff

Just under half of the staff was below 40 years of age and three quarter was below 50 years of age. Less than 20% of the staff was between 20 and 30. This is of concern as it represents an aging ECD staff. More importantly with governments focus on youth access to bursaries and learnerships from government departments are likely to be limited to the majority of these workers. The study noted that initially learnerships were denied to older forum members due to age. However after protracted negotiations with government departments this matter was addressed.

Table 17: Age of ECD practitioners

Age	Frequency	Per cent	Cumulative %
0-19 yrs	2	2.15	2.15
20 - 29 yrs	15	16.13	18.28
30 - 39 yrs	26	27.96	46.24
40 - 49 yrs	25	26.88	73.12
50 - 59 yrs	15	16.13	89.25
60 - 65 yrs	5	5.38	94.62
>65 yrs	5	5.38	100
Total	93	100	

Educational Qualifications of ECD Centre Staff

The table below highlights the highest school qualifications of the ECD centre staff in Wentworth.

Table 18: Highest school qualification

Highest school qualification achieved	Frequency	Percentage
No education	1	1
Completed primary school (up to Grade 7)	13	14
Junior high School (up to Grade 9)	28	30
Matric	46	49
other	5	5
	93	100

About 46 (49%) of the 93 practitioners had matric certification, while a further 28 (30%) had only completed junior high school. This means that 69 (79%) of the 93 practitioners had only completed Grade 9 education. Only one practitioner had no education, and 13 only completed up to Grade 7. The table below highlights the total of post school qualifications achieved by the staff members.

Table 19: Post schooling qualification

Post schooling qualification	Frequency	Percentage
None	51	55
Basic Certificate: ECD (level 1)	6	6
National Certificate: ECD (level 4)	19	20
Higher Certificate: ECD (level 5)	5	5
National Diploma: ECD (level 5)	1	1
Other - Post Secondary Certificate	5	5
Other - Diploma	3	3
Other - General Degree	3	3
Total	98	100

Of concern is that 51 (55%) practitioners did not have any post schooling qualification and only 20% (19) had a National Certificate ECD Level 4, while 6% had a basic ECD certificate. Only 3% had a general degree/diploma.

Evidence suggests that educator qualifications remains one element of quality and the current low levels of ECD specific training, particularly accredited training is of concern. It is noted that access to training is limited and costly and that the Expanded Public Works Programme provides key opportunities for training access for ECD stakeholders from poor socio-economic environments. SCSAs role in leveraging ECD training is thus commended.

Salary level

The ECD sector is generally a precarious employment sector, known for its long hours of work, very low wage levels and almost no employment protection. A few owners and principals in Wentworth indicated that they did not draw a salary from the ECD centre. The highest salary level reported in Wentworth is R12 800, with the average salary being below R4000 per month. About 56% of educators earn between R1 601 and R3 200 per month.

Table 20: Salary Structure

Salary	Owner %	Principal %	Educator %	General %	Cook %	Cleaner %	Gardener%	Other
No Salary	25	13	0	0	0	10	0	0
R1 – R400	0	0	0	8	0	0	0	0
R401 – R800	0	0	2	33	0	20	100	67
R801 – R1 600	25	0	36	33	100	50	0	0
R1601 - R3200	25	68	56	25	0	20	0	33
R3201 – R6 400	25	13	7	0	0	0	0	0
R6 401 – R12 800	0	6	0	0	0	0	0	0
Total	100	100	100	100	100	100	100	100

Training received by ECD centre staff

The table below shows the opportunities for training which were provided to the ECD centres.

Table 21: Training received by ECD centre staff

Training received	Number of opportunities taken	%
Administrative	0	0
Business Management	1	1.02
Book Keeping	1	1.02
Child Abuse Training	0	0
ECD Training (all levels)	3	3.06
ECD Basic	5	5.1
Cooking/ Nutrition	2	2.04
Counselling Courses	1	1.02
Fire Fighting	0	0
First Aid	26	26.53
EMS	0	0
HIV/Aids	4	4.08
Other	55	56.12
Total	98	100

In total 98 training opportunities were provided. This does not necessarily mean that 98 staff members accessed training as some have attended multiple training events. What is also unclear from the audit findings is who from the centre accessed the training. More specifically the issue would be to assess to what extent training was made available to staff other than the principal or senior ECD practitioners at the centre.

The majority of the staff attended First Aid courses (26), while eight practitioners attended ECD training and two staff members attended cooking classes.

In addition to formal training the study identified other ways of learning which ECD centres undertook as the table below indicates.

Table 38: Learning methods utilised by ECDs

Learning methods	Number
Cross visits	0
Mentoring	21
Peer support	7
Participation in a learning network	21
Participation in ECD forum	21
Other	14

All 21 centres reported that the most common methods utilised was participation in ECD forums, mentoring and participation in a learning network and seven reported receiving support from peers.

6.1.8 ECD centre Administration and Governance

The study found that many employees of these ECD centres did not have formal job descriptions were not registered for Unemployment Insurance and nor did they have staff development plans. This suggests that the ECD managements follow an informal management approach. However, in terms of record keeping, 61.9 % of ECD centres kept attendance registers for staff members.

6.1.9 Child profiles

This section analysed the 746 children attending ECDs in Wentworth. The study found that the majority of the pupils enrolled are of coloured and African descent. The majority of the children attending ECD were between the ages of 2-5 years (565), with the enrolment figures declining once they reach 5 years of age.

There are 190 children between the ages of 19-36 months, 145 children between 3-4 years of age and 230 pupils between 4-5 years of age. However, the attendance rate decrease to 140 pupils as children gets older than five years. This decline could be attributed to the state roll-out of Grade R in government schools to which most of this age group would gravitate, particularly as this would be a free service.

Figure 5: **Pupils enrolled in ECDs expressed as a percentage according to age group**
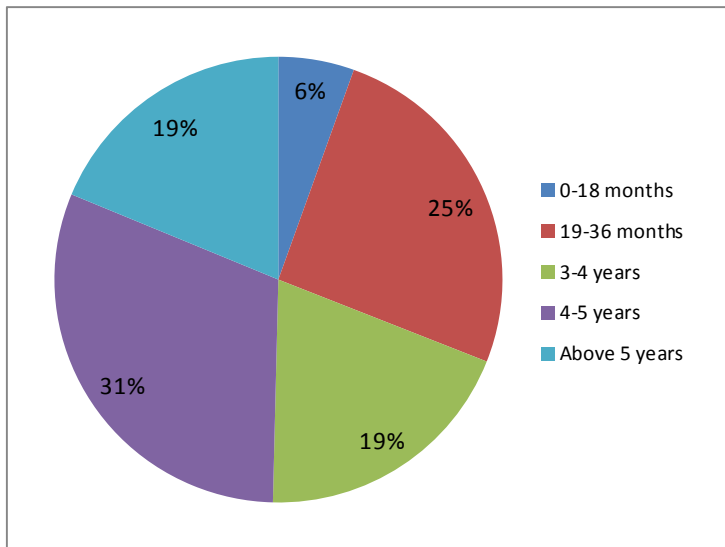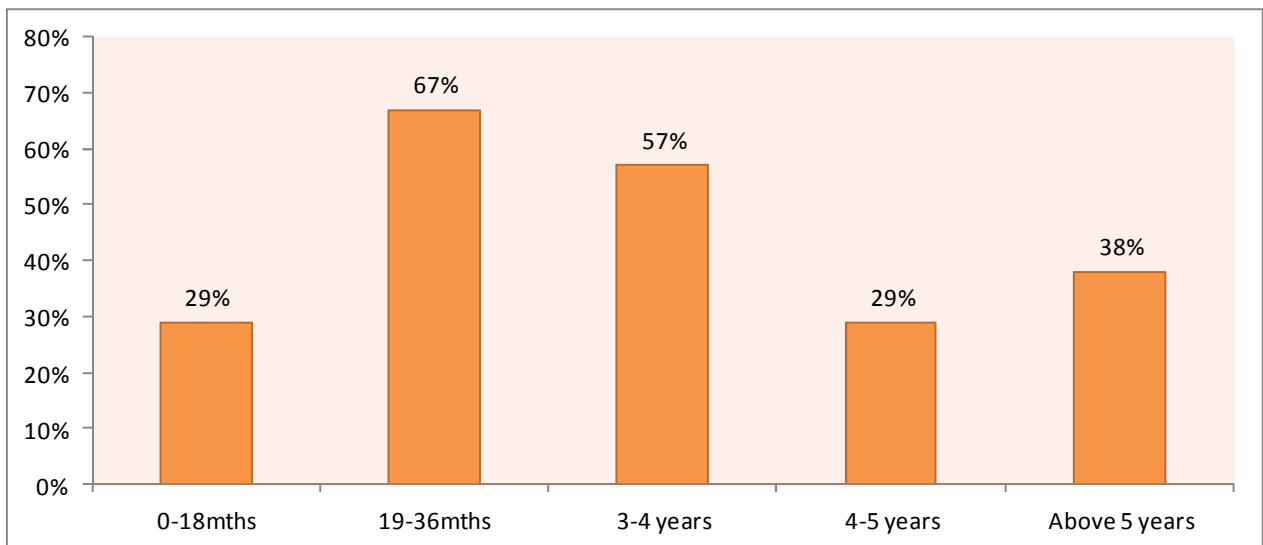

Figure 6: Do you have any of the following age groups at this centre?

Disabled Children in ECD Centres

There were 12 children with disabilities enrolled in eight ECD centres in Wentworth although eleven centres (52%) claimed that they could accommodate children with disabilities.

Child/Practitioner ratios

The recommended child/practitioner ratios in South Africa are determined by DSD as outlined in the table below. The ratios are important in determining the level of care and quality of ECD education which is being offered by the ECD centres.

Table 29: Child/Practitioner ratios

Age Group	Recommended ratio: Practitioner to child ratio
0 – 18 months	1: 6
19 – 36 months	1 : 12
3 – 4 years	1 : 20
4 – 5 years	1 : 20
Grade R	1 : 30
Assistant carer	1 assistant per practitioner

Source: DSD, 2015

The figure below illustrates the child per practitioner ratios for each age category according to the individual ECD centres. Centre B shows the highest child/practitioner ratio for the 0-18 month's category than any other ECD centre, meaning three children in the 0-18months age cohort are assigned to one practitioner. Centre C has the highest child/practitioner ratio for the 19-36 months category showing eight (19-36 months) children per practitioner. For the 3-4 years age category, Centre U has the highest child/practitioner ratio of five children per practitioner, whilst J has the highest child to practitioner ratio (6:1) and 9:1 for the 4-5 year olds and the above 5-year-olds, respectively.

The table below shows child/practitioner ratios for the ECD centres in Wentworth. It has to be noted that some of the centres do not have certain age groups hence there is a 0 ratio. Overall, the ECD centres in Wentworth are compliant with the DSD child/practitioner ratios.

Table 30: Child/Practitioner ratios by ECD centre

Name of centre	0 - 18 months	19 -36 months	3 - 4 years	4 - 5 years	5+ years
0	1	0	3	5	0
N	0	0	3	0	6
S	0	0	4	1	0
T	0	2	3	0	3
L	0	4	0	4	5
M	0	3	3	4	0
P	0	0	4	3	0
B	3	2	3	0	0
R	0	8	0	3	0
U	2	0	5	0	0
H	0	2	2	4	0
E	0	2	0	4	0
C	1	0	0	0	0
G	2	2	2	2	0
D	0	1	0	3	0
F	1	2	2	0	1
J	0	6	0	6	9
A	0	2	0	5	0
I	0	3	0	4	0
Q	0	3	2	1	0
K	0	0	0	3	0

Assessing Quality ECD Programming

One of the objectives of the study is to provide description of the factors that account for quality of the ECD service. This section addresses this objective by reviewing the types of curriculum and activities provided in the ECD centres in KwaZulu-Natal.

Table 37: Type of curriculum

Curriculum	Percentage
Pre-Grade 1 curriculum	14%
NELDS	86%

The curriculums were classified into Pre-Grade 1 curriculum, and National Early Learning and Development Standards (NELDS). The NELDS curriculum is focused on early learning development needs of children from birth to four years of age (Department of Basic Education, 2009). Pre-Grade 1 curriculum was developed by the Department of Education and requires that anyone offering the reception year programme must adhere to the curriculum (Department of Education, 2005). The analysis showed that eighteen (86%) of the centres provided NELDS, and three (14%) provided Pre-Grade 1 curriculum.

The study further assessed if the programme includes cognitive stimulation, reading and language development activities such as story telling which are important for intellectual development of children. The figure below illustrates that the highest proportion (95%) of the ECD centres integrated cognitive stimulations, reading and storytelling in their programmes.

Figure 7: Does the programme include any of the following.
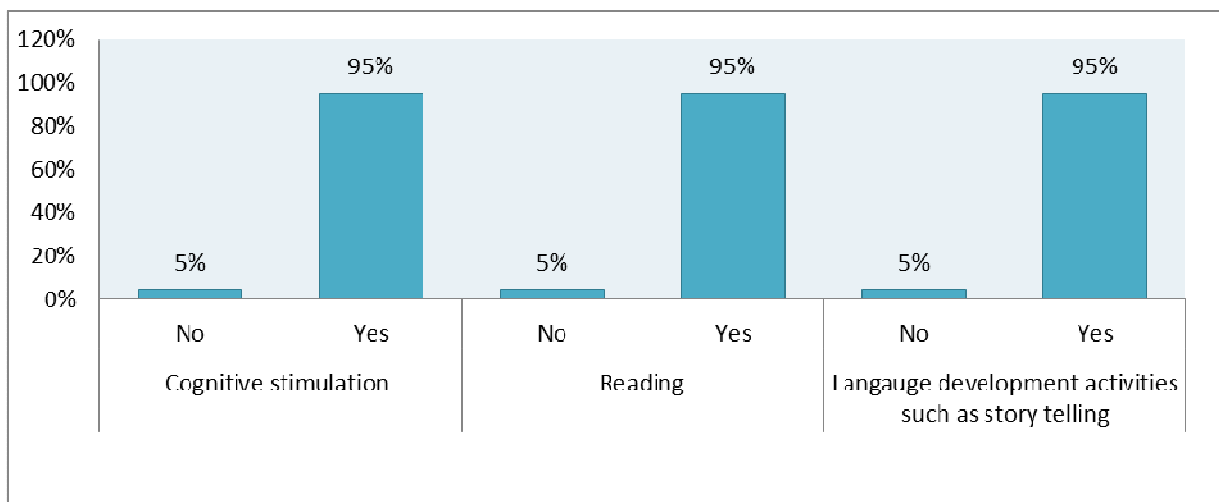
ECD Centre Testing of Learning Outcomes

The figure below presents ECD centres with children who have been assessed/tested by a professional for any learning, physical and behavioural conditions/illness. The results show that 85.71% (18) of the ECD centres had not tested or assessed children by a professional for any learning, physical and behavioural conditions/illness. Testing of children for conditions/illness that may affect the learning and development of children is important as early detection may lead to stylised learning programmes.

Figure 8: Children assessed by a professional for physical, learning and behavioural conditions
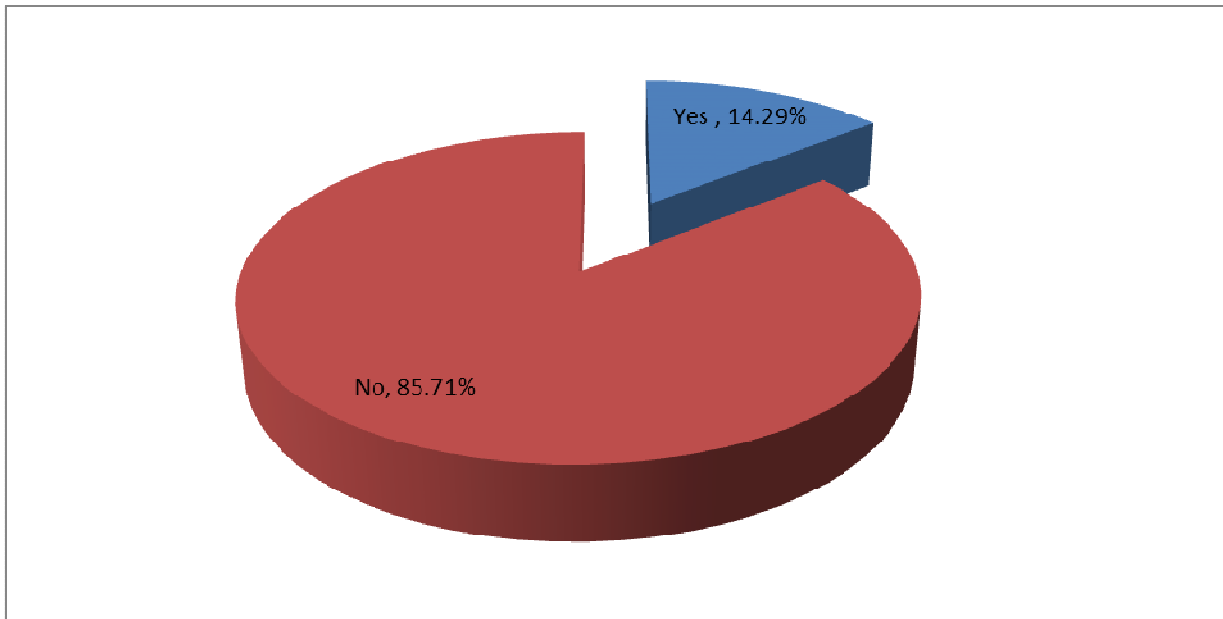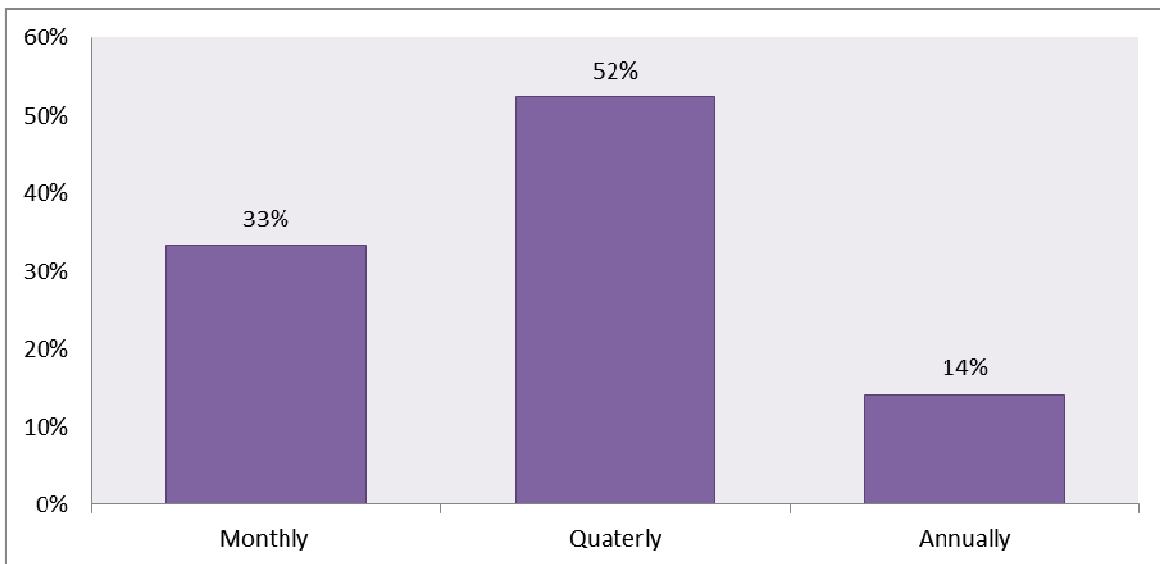

Figure 9: How regularly are children assessed?

The study further investigated how regularly children are assessed based on the curriculum provided by the ECD centres. Eleven (52%) of the centres assessed children on a quarterly basis and seven (33%) of the centres assessed children monthly. There was a small proportion (14%) of the centres which assessed children annually.

Another factor influencing quality ECD programming is if the programme is differentiated for the child age. The *Guidelines for Early Childhood Development* (DSD, 2006) classifies children into babies (0-18 months), toddlers (18-36 months) and children (3-4 years) and requires that each of these groups must have different materials and equipment for development. **Error! Reference source not found.** shows that twenty (95%) of ECD centres differentiated their programmes, and only one (5%) of the centres who did not differentiate their programmes

Table 39: Contents of learner portfolios

Learner portfolios to parents	Number of centres
Children's work	12
Assessments	2
Reports	2
Parents signatures on the portfolios	12
None	2

The results from the table above show that there is poor performance with regards to record keeping for learner portfolios. Only two centres indicated that they keep reports in the children's portfolios. This is of concern as it provides an opportunity to identify developmental challenges that a child may be experiencing and facilitate early and appropriate interventions.

6.1.10 Safety and Protection of Children

6.1.11 Child Abuse Protection

 Guarding against child abuse is one of the most important aspects of ECD in South Africa. Children have a right to an environment with no abuse from anyone. This is in the context of unprecedented levels of abuse and violence against children in South Africa.

Child protection/ Sexual offenders' clearance

The Child Protection Act requires that all individuals with children be cleared on the National Register for Sex Offenders. The Act was promulgated to protect children from sexual offenders.

It is a requirement for everyone working with children to be cleared. The results for the practitioners who are cleared in Wentworth are presented in the table below.

Table 22: Child protection/ Sexual offenders' clearance

Child Protection or sexual offenders clearance certificate	Frequency	Percentage
No	49	53
Yes	44	47
	93	100

Of the 93 practitioners employed in the Wentworth area, only 44 (47%) had child protection or sexual offenders clearance, while 49 (53%) of the practitioners did not have clearance. This is a concern.

Reporting child abuse

The majority of the centres reported that they will report abuse to parents and social workers. Only three centres reported that they will report abuse to SAPS. There is need for the Wentworth forum to devise clear procedures which adhere to the Children's Act so that the issue of abuse is reported correctly.

Ensuring a physically safe environment

ECD centres were asked if their environment was safe. The question was structured in such a way that it covers all the safety issues in ECD centres. The table below presents the results of various questions on safety.

Table 23: Is the environment safe for children?

Safe environment	Number of centres
Staff know about universal precaution	15
Enforce Hand Washing Policy	21
Walls are washable and clean	20
Have a sick bay	9
Separate area to change nappies	14
Facility to clean bottle	11
Kitchen floor and working area clean	20
Food prepared in separate area	18
Have a first aid kit, with supplies	20

The results show that most centres enforce hand washing, have clean walls, ensure that kitchens are always clean and have first aid kits. The hand washing appears to be an outcome of SCSA intervention focussing on the WASH programme.

Emergency Management

In terms of emergency management only five centres regularly conduct evacuation drills, four centres reported having disaster management plans and only one centre in Wentworth received gas handling training. In cases of emergencies, disaster management plans and regular evacuation drills have proven to be important in averting injuries. There is need to ensure compliance with disaster management plans and regular evacuation drills.

6.1.12   Finance

This section looks at how ECDs are funded. The study revealed that ECDs in Wentworth are funded and financially supported through various channels including fees, grants, subsidies, donations and fund raising. The majority of the income of ECD centres is derived from fees. A number of ECD Centres acknowledge receiving donations in the form of toys, furniture, educational material and cleaning detergents.

Fundraising efforts of ECD centres

In the context of few centres accessing state support fundraising is important in improving the learning environments in ECD sites.

Figure 10: **Fundraising efforts**
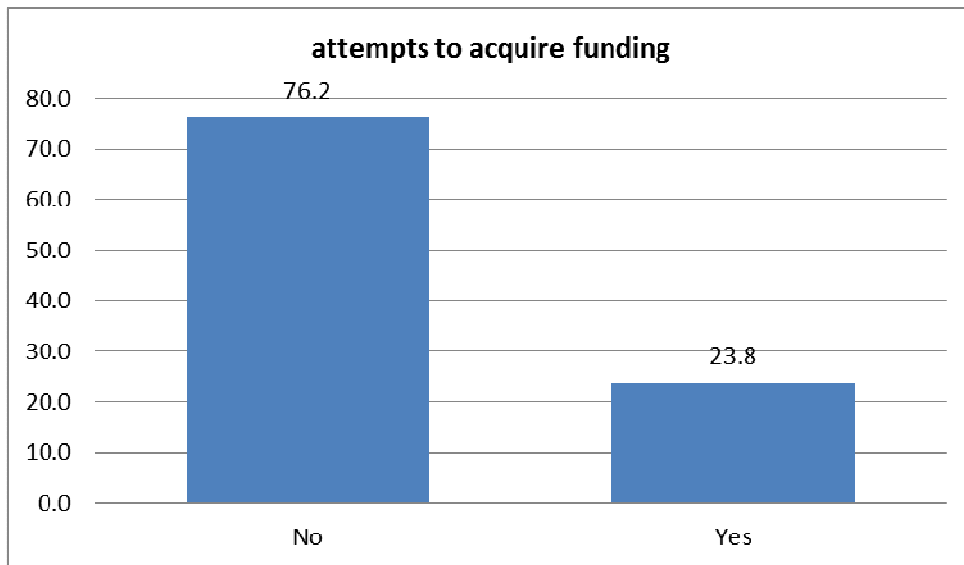
Sixteen (76%) ECD centres reported that they had made no attempts to raise funds. It would be interesting to understand what factors prevent these centres from making any attempt to raise funds. In the absence of this data, one can only speculate about their ability to write funding proposals - as has been found to be the case with other studies maybe an inhibiting factor.

Receipt of donations in past year

ECD centres were also asked if they had received donations in the past year. It is comforting to note that twelve (57.1%) of centres had been able to leverage donations in the past year. The types of donations accessed is outlined in the table below and reflects the efforts of SCSA in mobilizing resources for ECD centres such as equipment and other forms of in kind support.

Figure 11: **Donations received per year**
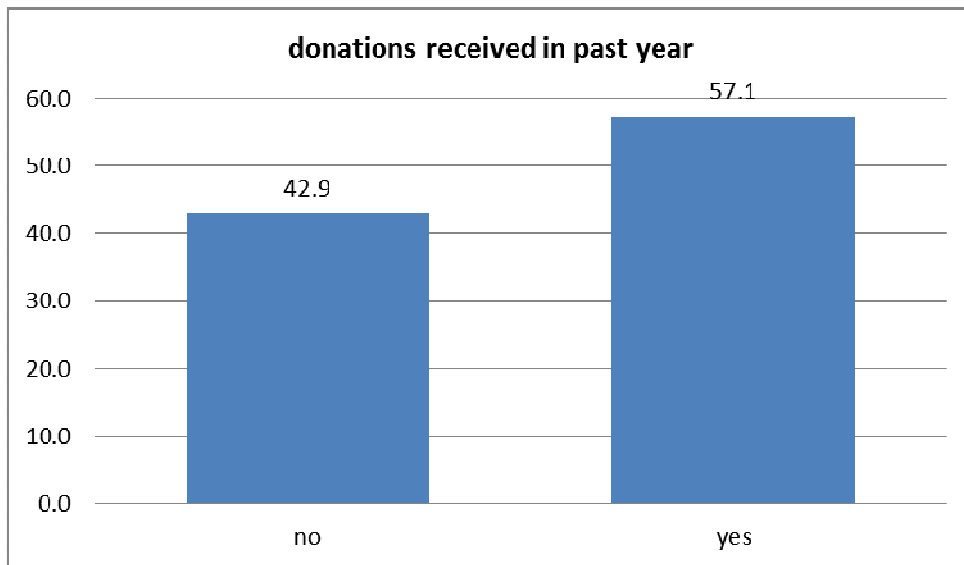
Figure 12: **Types of donations**
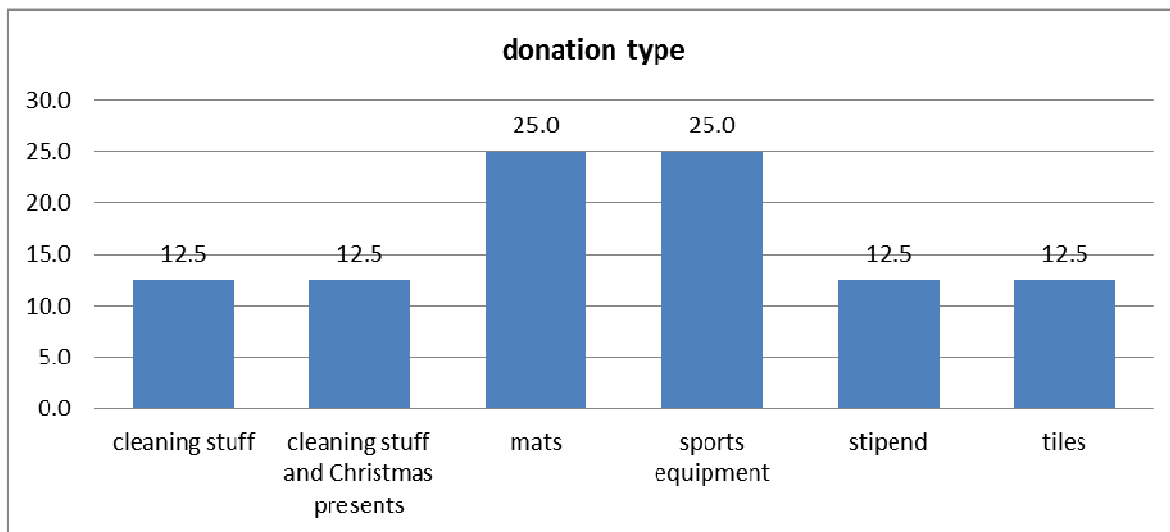
**Financial Administration of ECD Centres**

The study further investigated how effective ECD centres managed the financial administration of ECD centres. Eleven ECD centres (52.4%) did not have a separate bank account with the money banked in a personal account. In addition, sixteen (76.2%) of ECD centres did not have a budget and seventeen (81%) did not keep track of their income and expenditure; neither did they

have any financial statements. To support this finding, only five (23.8%) of centres keep records of fees paid and issue receipts as the figure below indicates.

Figure 13: **Fees register**
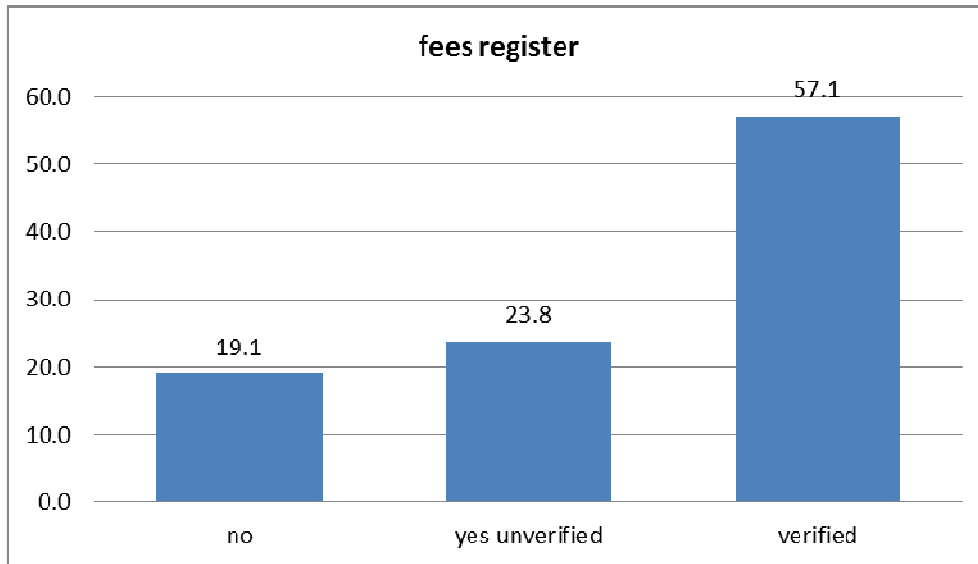
Research evidence suggests that poor or ineffective financial record keeping and management of resources is an impediment to leveraging donor or state finances. It would be in the best interest of ECD centres to formalise their financial systems going forward.

School fees exemption policy

Given the low socio-economic environment within which most of these ECD centres operate and the high levels of poverty and unemployment that characterises many poor communities the ability of parents to pay for ECD services is a matter of concern and could impact issues of access to ECD for children from poor and vulnerable communities. Hence understanding the policy and practice of ECD centres in respect of school fees exemption is important. The results reveal that 85.71% or 18 of the ECD centres did not have a written school fees exemption policy.

However importantly during the focus group interviews conducted in respect of the ECD forums a number of practitioners indicated taking a more sympathetic approach in situations where parents were unable to pay for fees.

6.2 A COMPARATIVE ANALYSIS OF 2011 AUDIT AND 2014 AUDIT FINDINGS

This section aims to provide a comparative analysis of the findings on ECD centres between 2011 and 2014 to ascertain whether the SCSA intervention has resulted in a positive outcome in ECD centres. The comparison must be understood in the context that the instrument used for the 2014 audit was slightly different from the one used in 2011. The key variables included in the 2011 audit were retained but in addition further issues were explored and some were probed in greater depth than previously. The 2014 instrument was more comprehensive and covered various aspects of ECD. Only those variables which are comparable between 2011 and 2014 are presented below.

6.2.1 ECD centre infrastructure comparison

In 2011, the audit probed the location and physical building from which the ECD facility operated. In 2011 approximately half of the ECD centres indicated that they operated from a private home by 2014 this had reduced to just over a third of the 11 ECD centres (36%) still operating from a private home.

Figure 14: Type of building/ structure ECD facility is housed in: 2011 and 2014
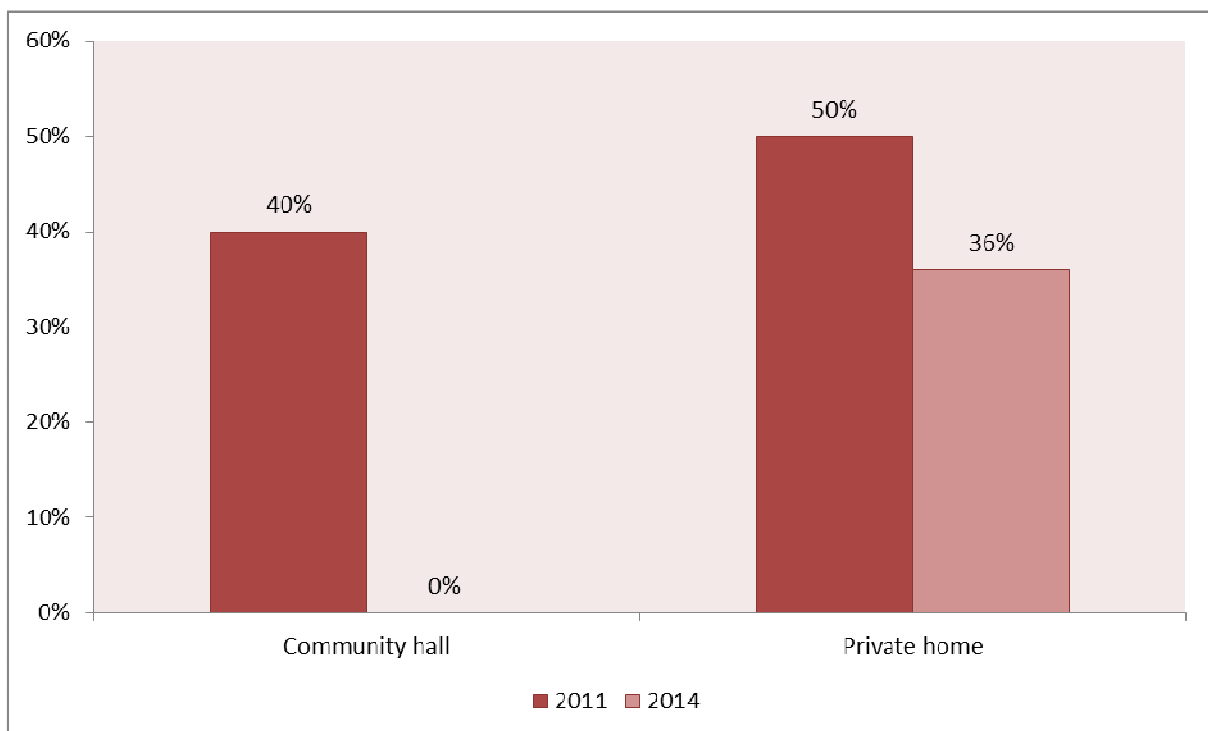
6.2.2 Type of ECD care provision

ECD centres provide a range of types of services for young children which may include full day care, crèche facility, and home-based care for toddlers, pre-school aged children and after school care for school-going children.

- In 2011, (78%) nine of ECD centres were providing only pre-school services compared with (18%) two ECD centres in 2014.

- In 2014 eight (73%) of centres were providing a combination of pre-school and home-based care services compared to 20% in 2011. The increase in diverse services being offered by ECD centres in Wentworth is welcomed as reflecting greater responsiveness to community needs. .

Figure 15: Type of care provided

	Home based care	Creche	Pre-school	Combination	other
2011	63%	100%	78%	20%	
2014			18%	73%	9%
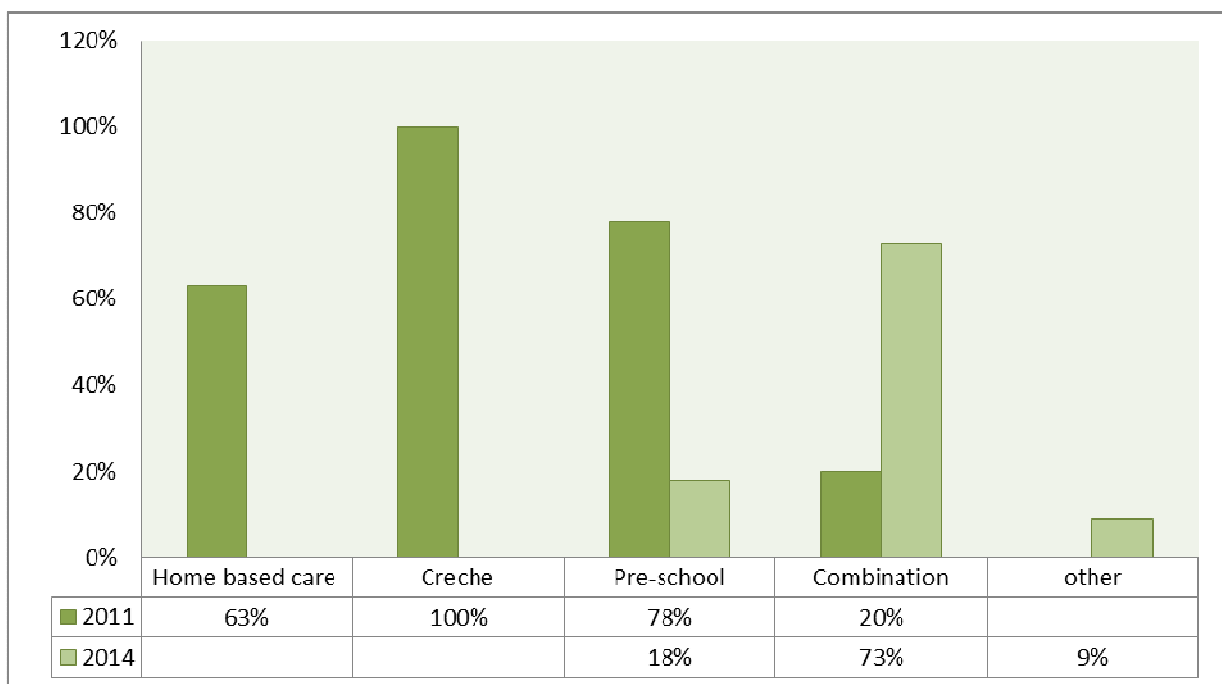
6.2.3 Food and nutrition comparison

This section compares the results from the food and nutrition survey across the two period 2011 and 2014.

Figure 16: Food gardens
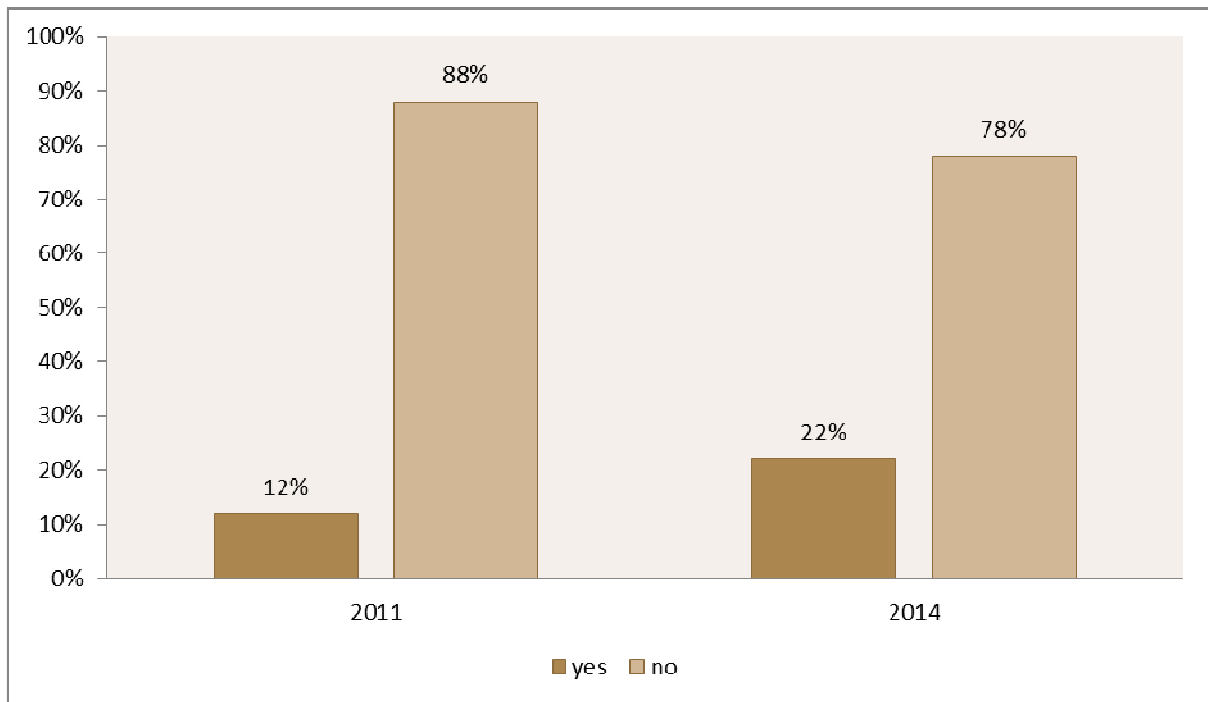
In 2011, one of the respondents reported that they had food garden and this had increased marginally to 2 centres in 2014. As noted earlier the key obstacle was likely to be the lack of outdoor space.

In 2011 the ECD centre respondents were asked if they had weekly menus for the food that they feed the children. About seven centres (64%) reporting having weekly menus. The question was posed slightly differently in the year 2014, where it was probed if the ECD centres had daily menus. In 2014 just under three quarters of centres (8) (71.43%) reported they had daily menus, reflecting a 7% increase.

Refrigeration facilities are important for storage of perishable food. In 2011 eleven ECD centres had refrigeration facilities and this had improved significantly in that by 2014 only 1 ECD centre did not have refrigeration facilities.

Figure 17: Menu for children
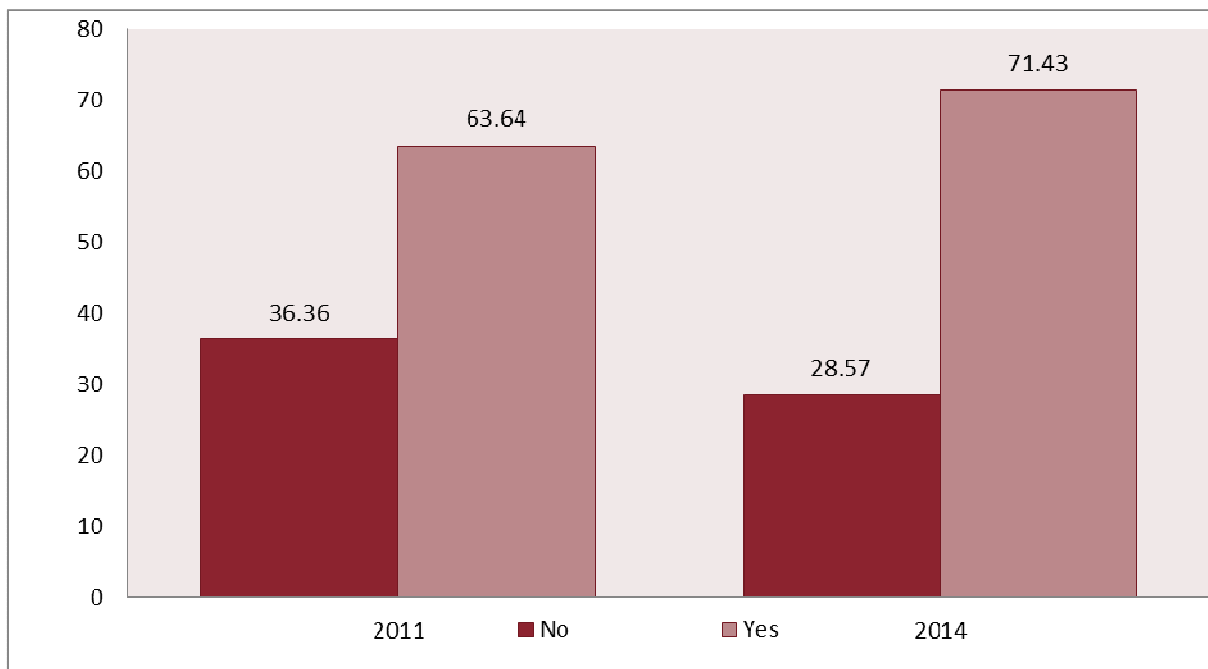
6.2.4   Administration, institutional and regulatory requirements comparison

Between 2011 and 2014 there has been a dramatic increase in ECD centres effectiveness with regard to ECD centre administration. Comparative analysis of centres performance between 2011 and 2014 shows improvements in relation to the keeping of children, staff, incident and related registers as the figures below reflect. This improvement can be directly ascribed to the presence of a mentor in Wentworth who is responsible for checking the administrative compliance of ECD centres. During interviews, forum members attested to the fact that the mentor had greatly assisted them in ensuring that they managed the administration of ECD centres more effectively.

Figure 18: Register for children 2011 and 2014
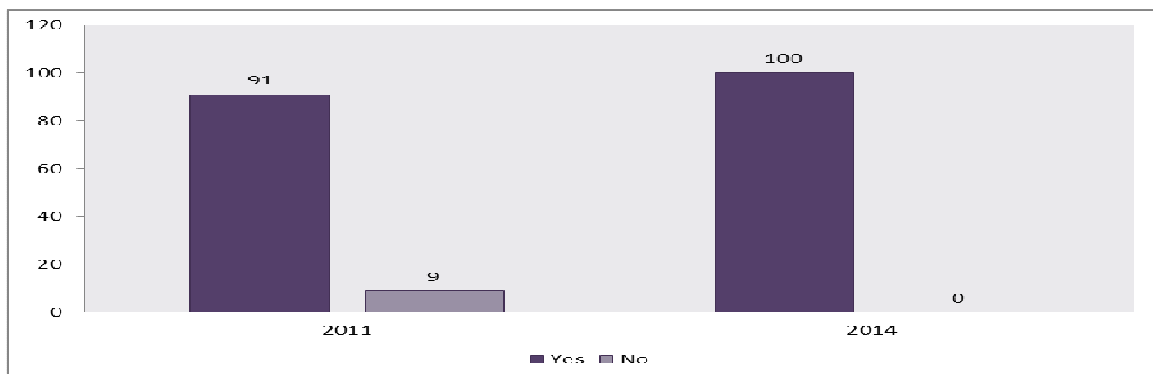
In 2011, ten of the ECD centres were keeping records of the attendance rate of the children and by 2014 all 11 centres reported keeping registers for children.

6.2.5. Registration of ECD centre with DSD as a partial care facility

Figure 19: Is the centre registered with DSD
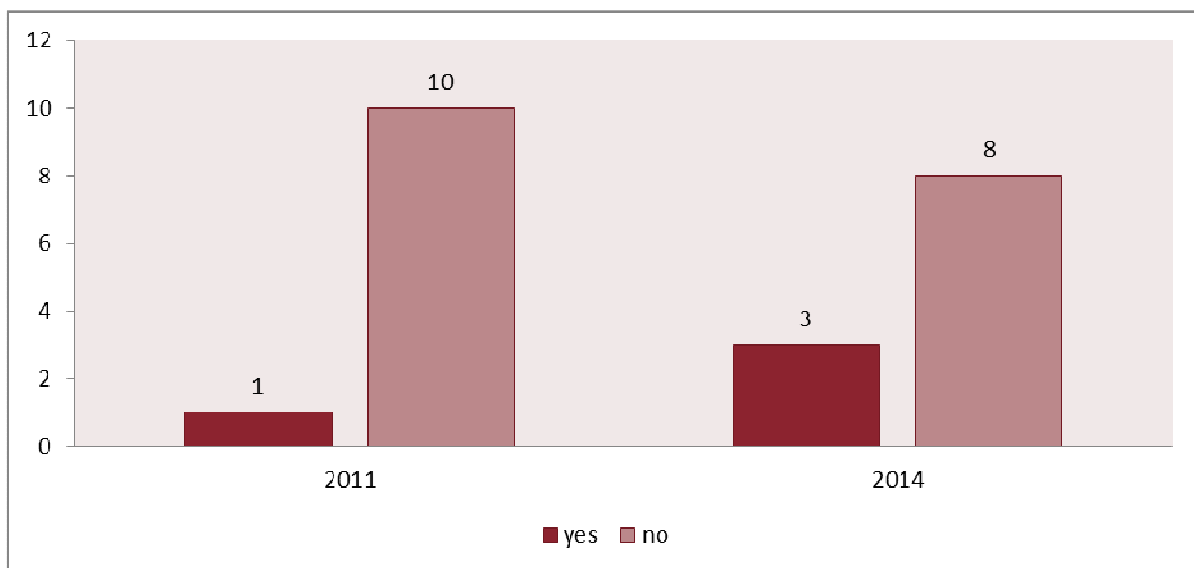
There has been limited progress with ECD centres registration with DSD. In 2011 out of 11 centres only one centre was registered with DSD; this scenario improved slightly in 2014 with 1 centre registered and 2 centres which are partially registered. It has to be noted that registering with DSD is a cumbersome process.

6.2.6. Health and Safety Provisioning by ECD centres

Figure 20: Health and safety compliance

	emergence evacuation plan	incidence/ injury file per child	Health status file perchild	fire extinguisher
2011 yes	20	100	100	50
2011 no	80	0	0	50
2014 yes	71.43	100	90.48	85.71
2014 no	28.87	0	9.52	14.29

Emergency evacuation plan

In the 2011 audit the question probed whether the ECD centres had an evacuation plan, while in the 2014 audit, the question explored whether ECD centres had an emergency plan. About 80% or nine of ECD centres reported in 2011 that they did not have an evacuation plan and by 2014 there was significant improvement with 71% (eight) ECD centres reporting that they had developed an emergency plans, reflecting an increased understanding of the importance of children safety and the need to put in place risk mitigation strategies.

6.2.4.1 Health status files
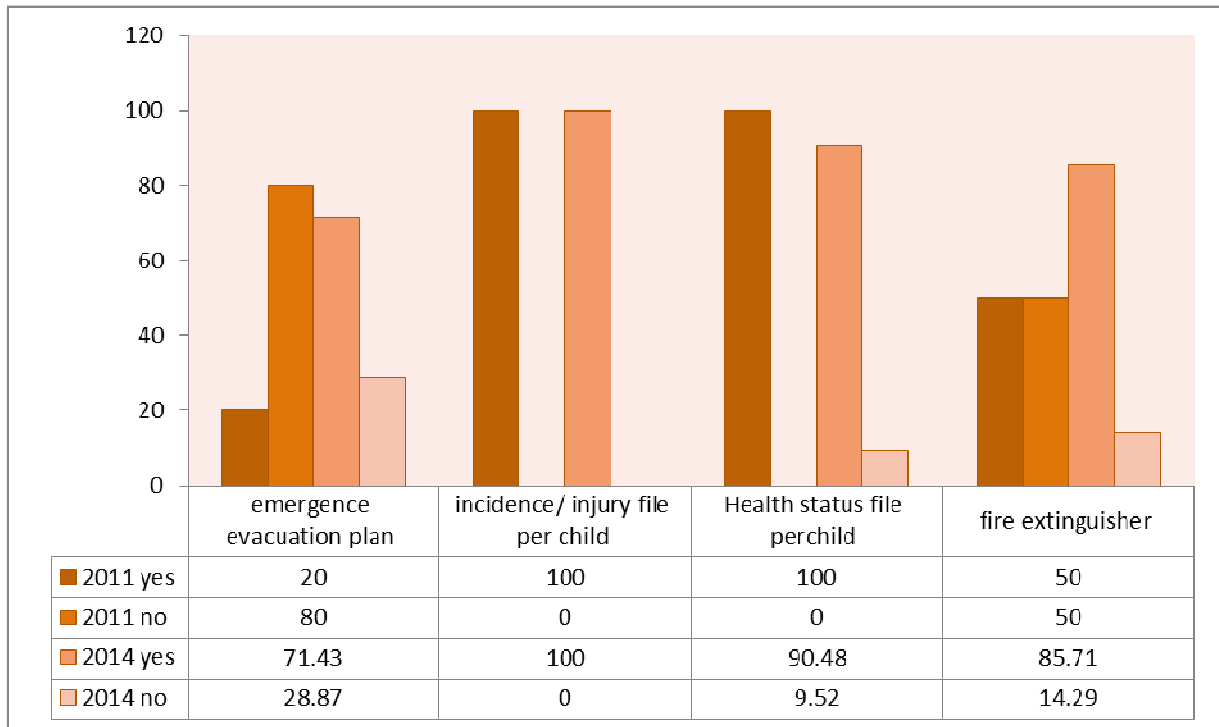
In 2011, all (unverified by interviewer) ECD centres reported having a file which maintains records of the health status of each child while in 2014 only 90% or 10 of ECDs were found to have a record of special health needs for children. Interestingly the mentor reported that despite the above report when she started in 2011 she did not see any centre with such files. Hence the drop in percentage of those health files can be explained by the fact that in 2011 the findings were self-reported while in 2014 this was verified during the audit.

6.2.4.2   Fire extinguisher

In 2011 50% of ECD centres did not have even one fire extinguisher and by 2014 there was an substantial improvement - with 86% or nine of ECD centres confirming that they have at least one fire extinguisher.

6.2.5   Child profiles

6.2.5.1   Enrolment

Seven of the 11 centres have reported lower enrolment levels in 2014 than in 2011. The drop in enrolment could likely be attributed to the time of the survey which was conducted towards the end of November 2014, a time where most parents prefer to withdraw their children from crèches in an attempt to save costs. This explanation was endorsed by the mentor in Wentworth as a common trend.

In 2011 there were 451 pupils enrolled in the 11 ECD centres surveyed within Wentworth. This enrolment figure had increased to 764 children in 2014.

Figure 21: Enrolment by race and gender
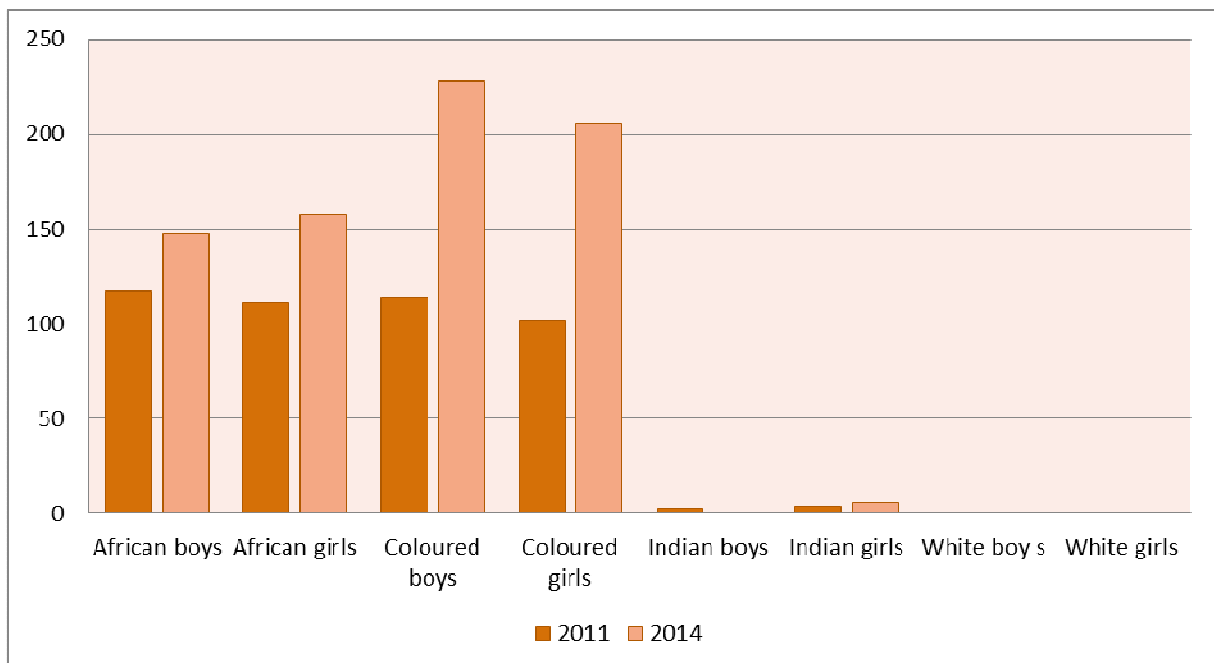
Breaking down the ECD enrolment according to race, it can clearly be noted that the majority of pupils attending ECD are of coloured followed by African children. There was no discernible

difference in gender enrolments. What is clear is that the number of African children enrolling in the centres had increased since 2011.

Figure 22: ECD enrolment rate per age group

	0 – 18 mnths	19 – 36 mnths	3 – 4 yrs	5 – 6 yrs	Above 5 years
2011	2%	10%	56%	32%	0
2014	6%	25%	19%	31%	19%
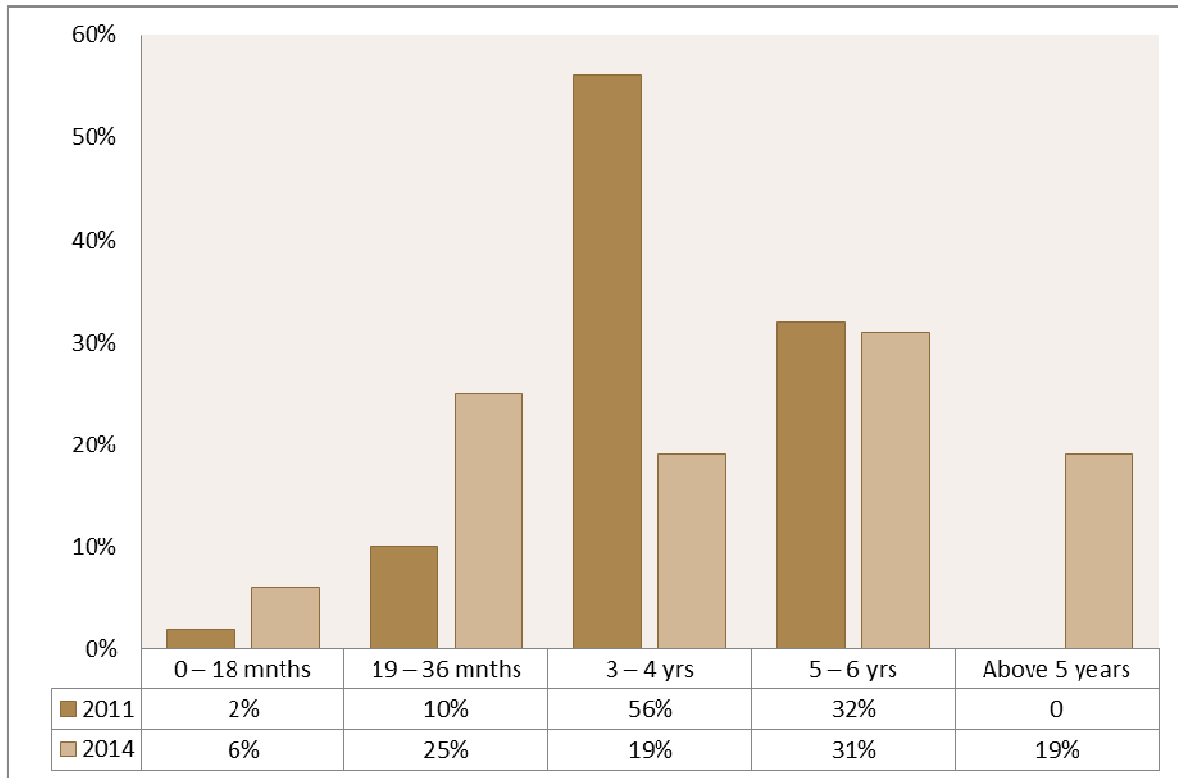
Of the 451 pupils attending ECD in Wentworth in 2011, the majority of children were between the ages of 3 and 6 years of age.

- Only 2% of children attending ECD centres within Wentworth were between 0-18 years in 2011. In 2014 this age cohort of this proportion of children attending ECD centres had increased threefold to 6% (41).

- The proportion of children in the age cohort 19-36 months had more than doubled from 10% in 2011 to 25% in 2014.

- The proportion of children in the 3-4 year cohort dropped by more than two thirds from 56% in 2011 to 19% in 2014. This is worrying and unclear what drives this trend.

- The increase in numbers of children over 5 years enrolled in ECD centres is interesting in the context of Grade R provisioning by the state which is provided free in the schooling system. This has not been rolled out to all schools as yet.

6.2.6 *Comparison of quality of ECD programming*

Figure 23: Does the centre have structured learning programmes?
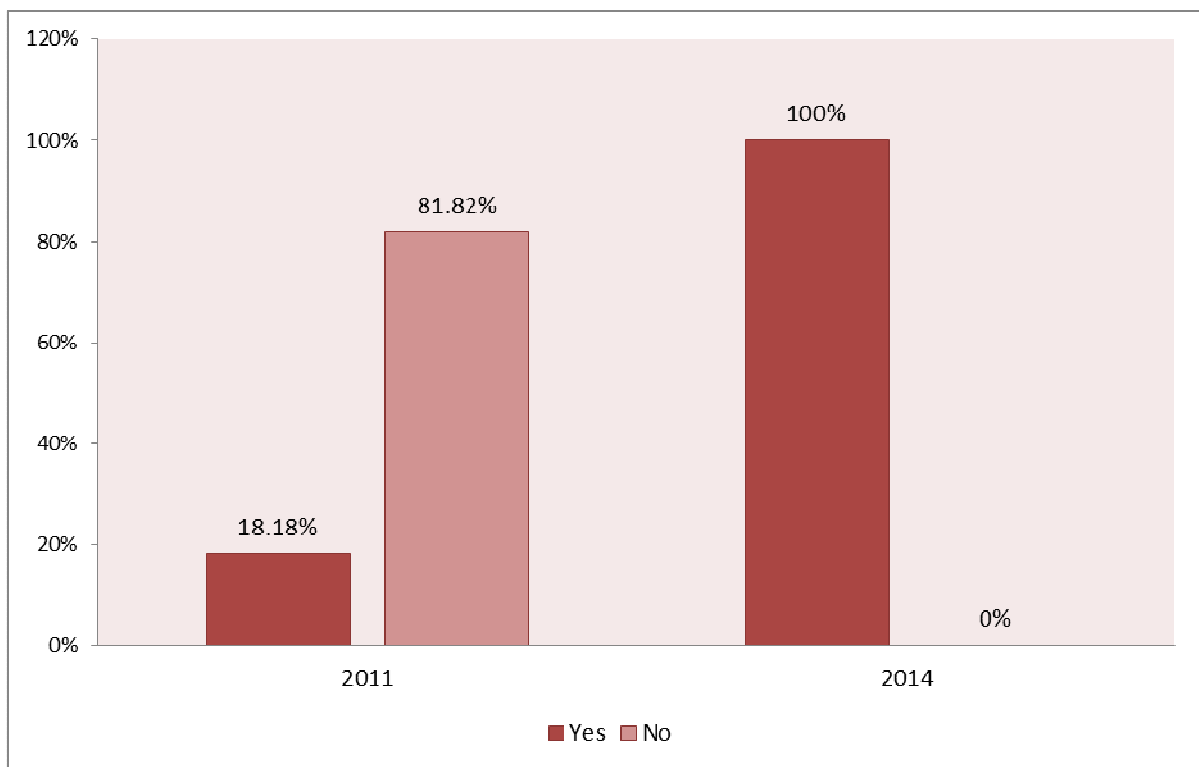
In 2011 only 18% (two) of the ECD centres reported having structured learning programmes. By 2014 all 11 ECD centres had a structured learning programme. This demonstrates improvement in the quality of services provided by the ECD services to children.

6.2.7 *ECD financing*

The exemption of school fees payment is a mechanism aimed at helping parents to access quality education for their children irrespective of their financial status. The results show that in 2011, 64% (seven) of ECD centres did not have a written school fee exemption policy, in contrast to nine (82%) in 2014.

Figure 24: School fees exemption policy

	2011	2014
No	64%	82%
Yes	36%	18%
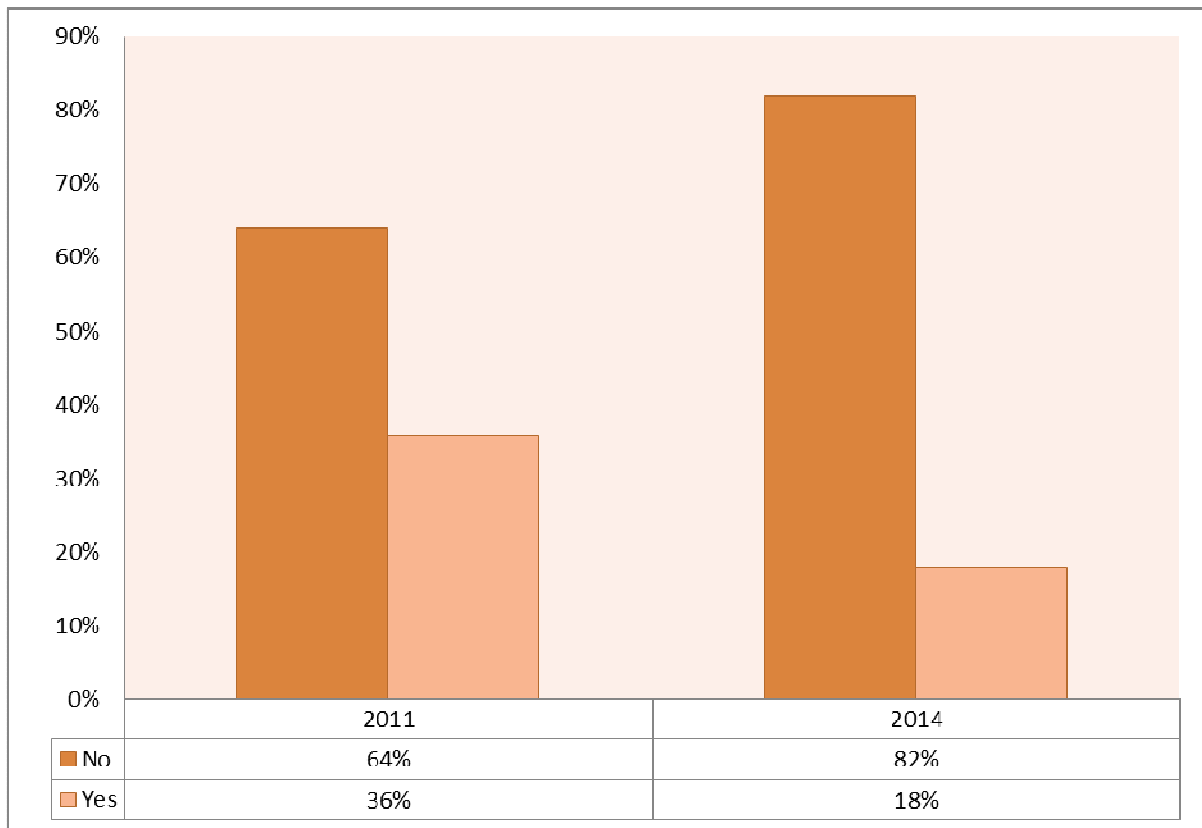
6.2.7.1 Donations

Figure 25: Donations to ECD centres
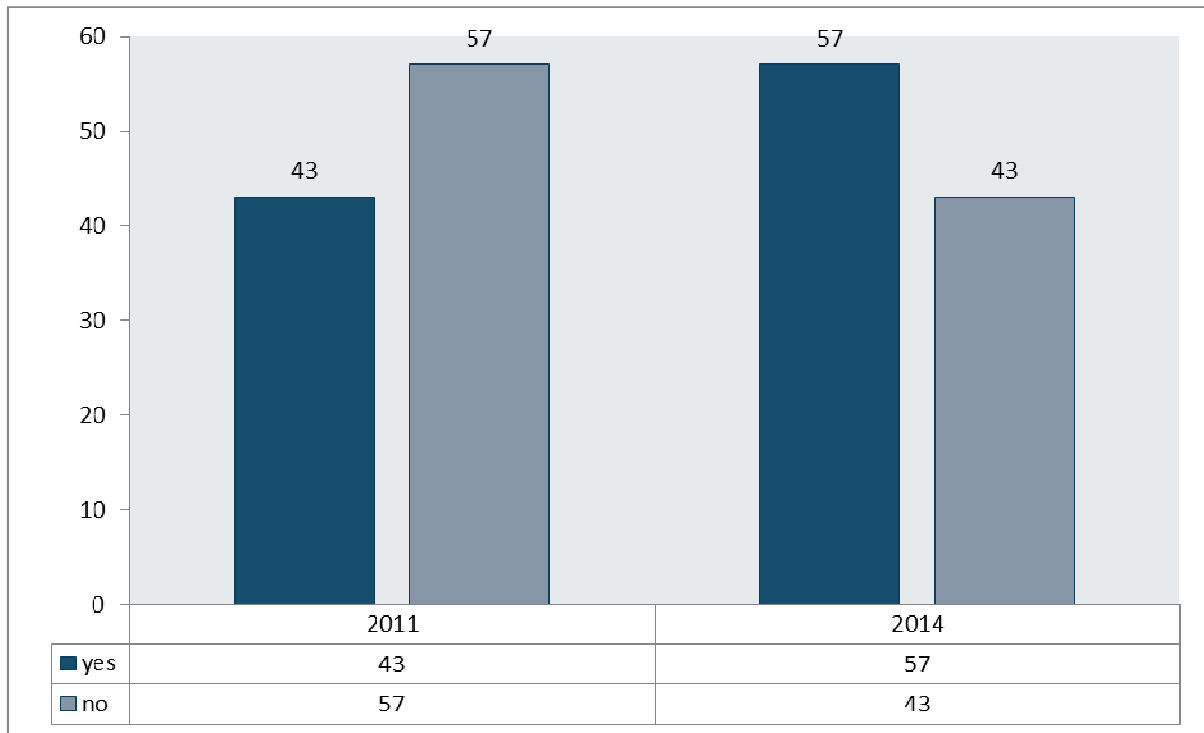
The figure above suggests there is an improvement in the level of donations which are being received by the ECD centres from 43% or five of the ECD centres receiving donations in 2011 to six (57%) in 2014.

7 SOUTH AFRICA QUALITY LEARNING ENVIRONMENT INDEX

In recent years and in line with the greater availability of multi-dimensional data there has been an increase in the use of composite indices that attempt to give a summative picture of a given phenomenon. The challenge for development planners is to summarise multiple findings in a single measure, and importantly to identify trends. The SCSA 2014 Audit collected data on a number of dimensions that have allowed for the construction of a Quality Learning Environment Index (QLEI).

Composite indices are mainly quantitative measures derived from a series of observed facts and are constructed combining a number of indicators into a single measure. Construction of the composite index has been favoured in development planning for various reasons, including (OECD, 2008):

- the ability to capture complex or multi-dimensional issues in a succinct manner thereby helping to communicate important messages to stakeholders;

- the single estimate allows for ease of interpretation;

- useful for benchmarking performance;

- allows for comparisons over time;

- Importantly, provides the benchmark against which to address development challenges and hence important for planning.

The SAVE QLE is a fit for purpose index that was developed to guide SCSA in its ECD interventions. Through a process of consultations with SCSA a number of indicators from the audit were identified. The indicators that were selected fall into two broad dimensions: quality and the learning environment. These dimensions can further be divided into 9 different sub-dimensions as follows:

1. Assessment

2.   Child protection

3.   ECD practitioner

4.   Governance

5.   Health services

6.   Nutrition indicators

7.   Programme

8.   Safety

9.   Sanitation.

Specifically, 17 indicators were used to construct the SAVE QLE index, and Table 24 gives a breakdown of indicators across the different sub-dimensions and their respective scores. For the complete breakdown of indicators and how each ECD centre performed refer to Appendix G. Essentially, the highest score per indicator is assigned to a centre whose performance is the worst, and a score of zero is assigned to centres that have attained the desired outcome with respect to that indicator. A score of 32 would indicate poor overall performance, and a score of 0 will be associated with high levels of quality and a conducive learning environment. The scoring of the different dimensions was done in a way that reflects the importance of the dimension with respect to quality and the learning environment. Two dimensions standout as being the major contributors to the QLE index; these are the safety sub-dimension and the child protection dimensions. The rationale for this weighting is related to the consequences on the child of centres performing below average in these dimensions. For example, the child protection dimension tracks indicators that have serious implications on not only the physical, but also the psycho-emotional wellbeing of the child. The safety dimension tracks three indicators; two of these are actually summative indices in themselves. Indicator 14 is constructed using four other indicators to give the *Dangerous fixtures Index*, as follows:

- 4.10 Are there cracks in the walls?

- 4.11 Are there any sharp or dangerous fixtures?

- 4.12 Condition of roof - are there leaks in pipes or at taps?

- 4.13 Condition of electrical installation - is there any exposed wiring?

Indicator 15 was constructed from the following three indicators that track the extent to which a centre is over-crowded:

- 4.5 Does the ECD centre have adequate outdoor space?

- 4.6 Does the ECD centre have adequate floor space?

- Q5.1/Q5.2 Children per classroom.

The first two over-crowding indicators are fieldworker assessments of the extent to which there is adequate space in a given centre, and as such this index assesses *potential over-crowding*.

Table 24: SCSA Quality Learning Environment Index (QLEI) indicators and scores

Dimension and Variable Names	Indicator Description	Indicator Scores	Sub-Dimension Scores
NUTRITION INDICATORS			2
Food provision	Indicator 1: Q22.1 Does centre provide food	1	
Daily menu	Indicator 2: Q22.3 Daily menu displayed	1	
HEALTH SERVICES			4
Immunization	Indicator 3: Q19.1 Immunization records	1	
Clinic	Indicator 4: Q19.12 Frequency of clinic contact	3	
CHILD PROTECTION			6
Child protection	Indicator 5: Q15.17 Presence of staff with/without CCC	3	
Report abuse	Indicator 6: Q19.4 Report abuse and neglect of children at home	2	
feedback	Indicator 7: Q21.19 Feedback to parents in meetings	1	
ECD PRACTITIONER			6
Child care	Indicator 8: Q5.1/(Q18.1 + Q18.9) Children per caregiver	2	
Post qualification	*Indicator 9: Post schooling qualification index*	*4*	
PROGRAMME			2
Support	Indicator 10: Q21.13 Adequate support materials	1	
Diff prog	Indicator 11: Q21.9 Differentiation of programme	1	
GOVERNANCE			1
Man Com	Indicator 12: Q3.33 ECD center - management committee	1	
SAFETY			7
First Aid	Indicator 13: Q19.15 EDC staff - received First Aid training	3	
Danger fix	*Indicator 14: Dangerous fixtures Index*	*2*	
Over index	*Indicator 15: SAVE Summative over-crowding index*	*2*	
SANITATION			3

Child toilet	Indicator 16: Q5.1/Q4.31 Toilet per children	3	
ASSESSMENT			
Pro assess	Indicator 17: Q11.1 Assessments by professional	1	1
Total Index Score			*32*

Table 25 gives the ranking of centres based on their QLE index scores. From this table the best performing centre is centre L with an overall score of 6. This is followed by F (7), Bethel (8), E (9), I (9) and O (9). The centres that had the highest scores, reflecting the worst performing centres overall, were J with a score of 17, followed by D (a score of 16). In order for us to understand the dimensions that drive the score received by a centre, all we have to do is analyse the centres score across indicators. For example, although centre J performed relatively well in some indicators, it failed in a few key indicators such as the ECD practitioner dimension where it received a score of 3 of a maximum of 4. This score was driven by the fact that of the 6 practitioners in that centre only one has an ECD qualification, with the rest having no qualifications at all. It also had the poorest practitioner child ratio (1:21); in contrast to a centre like T whose practitioner child ratio was 1:16. Furthermore, it also fared poorly on the sanitation indicator, together with two other centres (D and M) with the largest number of children per toilet. This analysis begins to highlight the importance of indicators in not only identifying a centre's overall performance with respect to the construct being measured but it also makes it possible to understand the factors and specific dimensions that are driving the performance of a centre.

Table 25: Ranking of centres: QLE Index

Centre	QLE Index
L	6
F	7
B	8
E	9
I	9
O	9
T	10
A	11
Q	11
R	11
U	11
C	12
K	12
M	12
P	13
G	13
H	13
N	13
S	14
D	16
J	17
Total	**237**
Group Average	**11.29**

The above ranking normalisation can be misleading especially when centre scores fall below the maximum score of the index. This problem can easily be resolved by using an above and below the group average normalisation. The advantage of this approach is that it effectively amounts to centres being benchmarked on group performance. This normalisation can be adjusted to allow for a more aggressive categorisation of centres around the group average. The current normalisation has been standardised around a normal distribution, which means that 66.6% of the centres are clustered around the group mean. This means that overall performance of the effectiveness of remedial interventions based on the indicators will be tracked by changes in the group mean from year to year whilst centre level performance will be tracked by a centre's QLE score. With respect to the construct that is being measured, ECD quality and the conduciveness of the learning environment, Table 26 and Table 27 show that two centres are top performers and these are L and F centres.

Table 26: Benchmarking centres on group performance

Assessment	Freq.	Per cent	Cum.
High Quality	2	9.52	9.52
Moderate Quality	17	80.95	90.48
Low Quality	2	9.52	100
Total	*21*	*100*	

Table 27: QLE classification of centres

Centre Name	QLE Classification
J	Low Quality
D	Low Quality
M	Moderate Quality
N	Moderate Quality
G	Moderate Quality
A	Moderate Quality
O	Moderate Quality
B	Moderate Quality
U	Moderate Quality
P	Moderate Quality
K	Moderate Quality
R	Moderate Quality
C	Moderate Quality
S	Moderate Quality
H	Moderate Quality
E	Moderate Quality
Q	Moderate Quality
T	Moderate Quality
I	Moderate Quality
L	High Quality
F	High Quality

Once the index has been constructed, it is also possible to conduct further analysis that explores the interaction between certain aspects of ECD centres and quality. For example, it might be interesting to assess whether there is an association between the QLE and ECD centre

expenditures on salaries. This can be done by computing Goodman and Kruskal's gamma, a measure of rank correlation, which measures the strength of association between two variables. The test computes a statistic with values that range from −1 (100% negative association) to +1 (100% positive association), with a value of zero indicating the absence of an association. With respect to quality and a conducive learner environment and centre expenditures on salaries the computed gamma of 0.15 indicates that there is no association between the expenditure on salaries and quality as it is being measured in this report.

8 AUDIT SUMMARY OF FINDINGS AND CONCLUSIONS

8.1 EVIDENCE BASED PLANNING AND PROGRAMMING

SCSA is commended for having undertaken ECD Centre Audits in Wentworth since 2010 and more recently in Lamontville. Evidence based planning is a process of making decisions based on empirical (objective) evidence and is aimed at producing the best outcomes for a specific development intervention. What is however evident is the need for SCSA to develop its systems to enable routine collection of information in a cost efficient manner through baseline data collection, strengthening its data analysis capacity and more importantly integrating evidence into planning processes through knowledge sharing and dissemination strategies and stakeholder engagement.

8.2 ECD CENTRE PROVISIONING: DEMAND AND SUPPLY FOR ECD 0-4 YEARS IN THE TARGETED COMMUNITIES

Population based planning is an important instrument for assessing demand and supply of ECD intervention. It is increasingly recognised that this approach must inform the expansion of ECD services in South Africa. An unmet need is to assess whether actual enrolments in the ECD centres reflects the child population in those areas. National data appears to suggest that there are huge unmet needs and in the context of the National Development Plan 2030, which aims to target 11million new jobs, the demand for child care services for working parents is set to increase and forward planning is necessary to address this. Importantly a question that would need to be probed is the factors that influence lower enrolments including fees, lack of awareness of importance of ECD, lack of services to children with special needs, poor quality service delivery etc?

8.3 OVERCROWDING IN COMMUNITY BASED ECD SITES

ECD centres in the Audit indicated having not enough outdoor space for the children. The underlying factor is likely to be the location of the ECD centre and the type of building from which they operate. The findings suggest that the vast majority of centres are housed in private homes. ECD centres require space for children to engage in intense physical activity, for quiet reflective spaces (for rest) and for food preparation and hygiene activities. SCSA needs to support ECD centres in thinking creatively about how to access space through use of communal spaces and sharing of spaces between ECD centres.

8.4 RESPONSIVENESS TO PROVIDING ECD FOR ALL CHILDREN, INCLUDING THOSE WITH SPECIAL NEEDS

Including children with disabilities in early childhood development programmes is a key child rights based principle. There is a growing body of evidence of complex relationships between disabilities and other sources of vulnerability, including HIV/AIDS and poverty and expanding access to ECD is critical to addressing the needs of this often hidden and marginalized group of children. The low scale of inclusion of children with special needs in ECD centres is a matter of concern that needs to be addressed. However the challenge of reaching such children remains with respect to stigma and ECD centres lacking the requisite background and resources to meet the unique needs of this category of children in order to integrate such children into mainstream ECD facilities.

8.5 CHILD – ECD PRACTITIONER RATIOS

Higher practitioner-child ratio, infer a smaller number of children per practitioner, are found to enhance the quality of education and facilitate better developmental outcomes of children (Tagume et al, 2013). Evidence suggests that as the ratio increases, practitioners spend more time in restrictive and routine communication with children and less verbal interaction, which results in declining quality of education offered by ECD centres.

The main area of concern in respect of child – practitioner ratios for CoJ is with centres caring for very young child in the 0 – 18 month age cohort.

8.6 ECD PRACTITIONER PROFILE, QUALIFICATIONS AND EMPLOYMENT CONDITIONS

The highest qualifications achieved by the educators in the ECD centres included in the audit were junior high school (up to grade nine). There is a mixed body of evidence of the interrelationship between practitioner qualifications and positive ECD outcomes. This recognizes that a high academic qualification in ECD is not necessarily directly linked to quality as a number of other factors contribute to quality including practitioner motivation for working in the sector, access to appropriate training (whether accredited or not) and most importantly access to quality support and supervision. Research has however shown that at least a basic secondary school education and attainment of Matric is strongly correlated with promoting language development in children.

A conundrum that the ECD sector faces is that within the 0-4 sector career pathing in ECD centres is extremely limited and once higher level accredited training is acquired such as NQF level 4 and beyond,

the practitioner is unlikely to be retained working with this age cohort group, particularly as the career possibilities of work in Grade R and foundation phase teaching is likely to be more attractive in terms of salaries and employment conditions. EPWP learner ships have been the largest source of access to accredited training for vast numbers of poor women. While there have not been any systematic tracer studies of the outcome of EPWP funded learner ships in the ECD sector, there is anecdotal evidence of learner ship hopping by young people in order to continue accessing the stipend and also to migrating away from the sector into other fields which provide better employment prospects.

Employment conditions in the ECD sector, like much of social sector care work is low paid and precarious work. The salaries earned appear to be largely on par with or below the sector determination levels for domestic workers (R 2065 pm) and farm workers (R 2440 pm) as at December 2014. More importantly in several instances appears to be below the minimum determination for special employment programmes e.g. learner ships and the Expanded Public Works Programme which is roughly benchmarked at R 1500 per month (R71 per day).

8.7   COMPLIANCE AND INFRASTRUCTURE INDICES

Compliance with local government bylaws is an important prerequisite for ensuring that partial care facilities are safe and non-stressful environments in which children can thrive. Physical features of an ECD setting can negatively impact a child's health and safety such as in facilitating the spread of infections and potentially in endangering the child's safety. Importantly evidence suggests that if a caregiver/ECD practitioner is concerned about the dangers inherent in an environment this reduces their opportunities for interacting with and stimulating children. The study found that most of the ECD centres are non-compliant with local government requirements or other regulatory requirements.

These findings raise a critical question about the relationship between centre vulnerability and compliance. Low vulnerability centres are more likely to have met most of the compliance requirements than high vulnerability centres. The index spread sheet which is included as an annexure provides details of the areas of vulnerability per centre.

8.8   ACCESSIBILITY TO ECD CENTRES FOR POOR AND VULNERABLE CHILDREN

It is accepted that ECD services can serve as both promotive and preventative interventions in the lives of children living in compromised and vulnerable environments. Two barriers to access have been identified namely physical access (proximity) and affordability. A third in respect of addressing children with special needs is addressed separately.

8.9 REGULATORY COMPLIANCE IN RESPECT OF DEPARTMENT OF SOCIAL DEVELOPMENT REGISTRATION

The need to explore how to scale up ECD centre registration is an issue that SCSA and other partners in the ECD sector have invested substantial efforts on. It requires concerted advocacy initiatives to engage the Department of Social Development at a national level to find alternate registration processes and importantly to incentivize ECD registration when subsidies are not likely to be forthcoming.

8.10 QUALITY INDICATORS

The study did not set out to undertake a comprehensive quality audit. This was not possible given that such an assessment requires baseline data and implementing a number of measurement activities at various intervals to assess quality. An audit of the nature conducted was hence not the correct instrument. This was indicated to the client at the outset.

However there are a few variables which can serve as limited proxy's for assessing quality and these were explored in the audit.

- Alignment of teaching programme to recognised curriculum. This was overwhelmingly positive with most centres using the NELDS curriculum.

- Assessment of learners. Most centres reported not undertaking regular assessments. The audit did not review the quality of the assessment instruments, although there is recognition generally that instruments in use currently leave much to be desired.

- Parent – Centre interactions was not assessed. It begs the question of the extent to which parents are able to influence the quality of the service. This needs to be strengthened.

- The presence of learning, teaching and support materials and their use in the centre was also a positive finding. The programme reflected a varied intervention programme.

- The focus on food and nutrition security within ECD centres is another quality dimension. Most centres provide food and appear to be addressing issues of dietary diversity and nutrition. However a proper assessment is required including use of anthropometric measures for assessing the quality of interventions.

The need for planned and purposive quality measurements to be put in place is urgently recommended.

8.11 FINANCIAL RESOURCE INFLOWS AND OUTFLOWS:

For an unsubsidized centre parent contribution of fees per child constitutes the largest income stream. The majority of the ECD centres don't receive any subsidy from the DSD. This is unsurprising as the national norm is 10% of ECD centres receive the state subsidy. Salaries generally represent the biggest expenditure item, followed by food, learner teaching and supply materials and then rent.

While a number of ECD centres engaged in fundraising the scale of resources mobilized is small. Similarly in kind support was largely in the form of equipment and again the contribution is small.

The ability to leverage resources by ECD centres is premised on a number of related factors including NPO registration, regulatory compliance, good governance systems which enable a centre to manage and account for public funds in an acceptable manner and finally innovative and creative leadership. Studies have shown these as key areas for strengthening among ECD centre leadership.

9 SUMMARY FINDINGS AND RECOMMENDATIONS

This section of the report brings together findings from both the qualitative and quantitative study findings in respect of addressing the two key objectives for which the study was commissioned.

To reiterate:

- Objective 1: To assess the change in ECD services based on the interventions linked to ECD forums.

- Objective 2: To identify factors that have enabled the ECD sector in communities where SCSA has worked with forums to harness the value of working collectively to address needs and access opportunities in order to provide an effective ECD service.

9.1 SUMMARY OF KEY FINDINGS

9.1.1 The SAVE the Children South Africa ECD forum model

The intervention model is a multi-faceted and multi-dimensional model. It combines networking, knowledge dissemination, partnership development, peer reviews, capacity development, resource mobilisation and collective action. The model includes both direct and indirect support. Indirect support is seen in the approach where information is provided with the expectation that those accessing this knowledge will act on it. Direct actions include mentoring and support or the leveraging of resources.

9.1.2 Value and benefit of participation in forums

The report is peppered with anecdotes which speak to the power of collective action for the ECD centre, for the ECD practitioner, for the community at large and importantly for the young child. This value is summarised in terms of Plastrik and Taylor's framework of the benefits of good networking practice, namely:

- the ability to rapidly and widely diffuse information, ideas and innovations

- the ability to build connections between forum members (bridge building)

- to build resilience amongst network members, many of whom have been members for a long time

- to develop adaptive capacity to address new or changing circumstances and respond to emerging needs

- to expand reach and scope of work, exponentially.

Evidence has been presented on how forum members have withstood stress, of displaying the spirit of 'Ubuntu', of self-regulation and for extensive leveraging of support in kind and in monetary value. The evidence is overwhelmingly presented of the positive outcomes of ECD forum participation for members, but also for external stakeholders such as the government.

Forum participation has promoted s*ocial cohesion* amongst members in terms of bonds linking them to one another outside of the core relationship as ECD forum members. The study illustrated how the social and solidarity economy has been fostered. Equally important, evidence has been presented of how forums serve a social protection function, enabling participants to be able to cope with and mitigate vulnerability to shocks and demonstrating the broader impact on advancing community development and empowerment.

9.1.3 Unevenness in the application of the model

The manner in which the forum model has been implemented appears to have privileged some stakeholders over others. The model's various dimensions are not uniformly available to all forums. Knowledge sharing and networking appear to be available to all forum members, while other interventions have been selectively directed to specific forums. In particular, the extensive investment of resources to one specific group of forum members has to be revisited as the impacts are clearly different. While it is understandable when something is being innovated that it is tested in a smaller area first, it hasn't necessarily led to a scaling up of the interventions in other areas. This is a limiting factor in the expansion of the forum footprint and its impact.

9.1.4 Leadership of the forum

There appears to be a strong perception of the ownership and leadership of forums as being vested in SCSA. This is demonstrated in expectations of the role of SCSA staff in resource mobilisation, chairing of meetings, networking with partners and of '*providing the answers*'.

There is, however, acknowledgement that SCSA is trying to change this and that this is incrementally shifting.

However, there is a perception - although not widely articulated - of the control function exercised by SCSA. An example of this was in the concern expressed by a Wentworth ECD Forum member that SCSA *'undemocratically elected the chair.'* The ability to enable 'active citizen engagement' requires an assessment of the level of participation that is encouraged inadvertently or purposively. According to Mott (2012), the most successful community forums try to serve and involve the entire community, broadening participation in its governance, decision making and activities to all kinds of citizens.

Governance is mainly responsible for steering the policy direction of the community forum as compared to management, which is responsible for rowing the community forum boat (Plastrik and Taylor, 2006). This must be the focus of SCSA's interventions with forums moving forward.

9.1.5 Sustainability

The SCSA model is in part resource-intensive, mainly in terms of the costs of the personnel who play a significant role in enabling and supporting the functioning of forums. The majority of respondents and external ECD stakeholders interviewed for the study noted that while many of these forums would not disappear if SCSA no longer provided the level of support there were concerns about the quality of the functioning of the forums. While forum members expressed the view that they were sufficiently capacitated by SCSA and were highly grateful and appreciative for the efforts and exposure from SCSA, they believed that it would be premature to do without SCSA support at present. The uncertainties relate to having sufficiently skilled leadership with the experience to manage and lead forums in the way that SCSA has done.

9.1.6 Alignment with the theory of change

The main component of the theory of change is that support to ECD Forums provides a pathway towards achieving quality ECD through a wider network. This is largely borne out in the findings from WECDF and to a lesser extent with Lamontville. It was difficult to ascertain the value contributed by the other forums to enhancing quality ECD for children in poor and vulnerable environments. The ECD Forum model needs to have as a core minimum certain elements in

particular the facilitation role of SCSA at a similar level as implemented with WECDF for it to be effective.

9.1.7 *Assessment of the level of civil participation*

Although this study's main objective was not to assess the level of active citizenry engagement in ECD through forums, a few observations were made with regards to active citizenry. The observations are:

- By virtue of SCSA intervention in the model there is evidence which shows that forum members are becoming conscious of their rights in active engagement with government. An example of active engagement is when the Wentworth forum engaged with the EDTP SETA to address the exclusion of over 35 year olds in accessing learnerships, and succeeded.

- The involvement of SCSA in ECD has mobilised various government departments to play their role in ECD. This is critical as it created a platform to understand the real issues affecting ECD from the 'ground'. This, in turn, will influence the total approach to ECD in the community and influence government policy.

- There is need for capacity building, specifically on active citizenry in all the forums. The belief is that communities will not achieve citizen control overnight but through proper capacity building. In non-SCSA supported forums there is a gap in terms of their understanding of the role of government departments in ECD. There is a mentality of not trying to influence the way government deals with forums, but to accept whatever is prescribed.

- Finally the whole point of creating forums is that communities want to take control of ECD in their community and improve its quality. The bigger question for future research is: What can be done to make government play a facilitatory role in ECD forums as is currently being undertaken by SCSA?

RECOMMENDATIONS

Key recommendations in SCSA's future work and engagements with ECD forums in KZN are:

Recommendation 1

Ensure access to training for all ECD practitioners

The current system of selecting only chairpersons and ECD centre principals is met with some disgruntlement from some quarters as it is seen as selective, as all practitioners need (not deserve/or entitled to) this training. The training is considered to be highly valuable to all levels of ECD practitioners and this was a view expressed by all forum members. While this might require considerable resources on the part of SCSA, it is nevertheless something that needs to be factored into planning for training.

Recommendation 2

SCSA to sustain and strengthen its involvement in marketing the ECD Forum Model as a concept

Although the majority of respondents and different ECD role players interviewed for the study stated that they felt they were sufficiently capacitated by SCSA and were highly grateful and appreciative of the efforts and exposure from SCSA, they still felt that they could further benefit still from future engagements. In other words, people felt that they did not want SCSA to disappear from the scene yet; and while it is no longer an issue of needing their hands to be held, they believed that SCSA could assist in providing strategic support and guidance.

Recommendation 3

Enabling strategic level engagements with government stakeholders in the ECD sector to champion active support from the state for increasing regulatory compliance. SCSA is urged to facilitate such processes.

Recommendation 4

SCSA to rethink the ECD Forum model to be implemented at area based and provincial levels.
Currently the provincial forum is run using a slightly different model from the one being used in local forums. The provincial forum at the present moment is an information sharing platform with no guarantee that the information filters down to the individual forums. For the provincial forum to have the same impact as local forums there is need by SCSA to reconsider its intervention approach.

Recommendation 6

SCSA must strengthen processes for the monitoring and evaluation of forum interventions in order to measure the successes and failures of all their interventions. Without proper monitoring and evaluation it is difficult to assess the impact of the model on the quality of ECD services being delivered by the ECD forum members. The Quality Learning Environment (QLE) index has highlighted the ability to identify centres based on group performance. Furthermore, it has also highlighted the ability to understand the factors that drive individual centre performance. This information can be used to inform targeted remedial interventions that allow SCSA to track the effectiveness of its interventions.

Recommendation 8

There is need for **SCSA to strengthen leadership capabilities of forum leaders**

A particular focus would be in resource leveraging and management skills. This will foster sustainability in the event of SCSA pulling out. Without sound resource leveraging skills and management training, forums will lose their effectiveness.

CONCLUSION

The Save the Children South Africa ECD forum story is a story that doesn't have an ending. In telling the story, we opened a window and found many more windows that needed to be opened, many more layers of experience to unpack and more doors to open in order to understand, to draw meaning and to reflect on the implications thereof. We are careful, therefore, not to make claims to have fully comprehended the model.

In assessing the feasibility of the model for replication our intention is never to suggest that a one-size-fits-all recipe exists; formulae that if applied in the exact proportions prescribed will replicate the experience, outcomes and impacts that the SCSA funded forums have had. In telling the story we wanted to illustrate the power of the collective and how working together can reap positive outcomes for young children.

The report captures in various places the successes enjoyed and the tangible benefits reaped; and it celebrates the work of SCSA as well as the many community stakeholders, mostly women, who are daily transforming the lives of young children, living in compromised, poverty-ridden

environments. The report also identifies that much more remains to be done. This is what must occupy the focus of SCSA as it moves forward. The signs are encouraging. Early this year SCSA shared its Vision 2020 with its South African partners, sub titled '***Every child deserves a chance.*** A holistic ECD programme is a cornerstone strategic goal of the 5 year strategy.

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11 LIST OF ANNEXURES

Appendix A: Wentworth Audit Findings

Appendix B: Audit Instrument

Appendix C: Key informant interview schedule - SAVE Staff

Appendix D Focus Group Schedule: ECD forum members

Appendix E Key informant Interview schedule: External Stakeholders

Appendix F: Key informant Interview forum members

Appendix G: SAVE ECD Centre Index and Indicators