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# FACULTY OF ECONOMIC AND MANAGEMENT SCIENCES INSTITUTE FOR SOCIAL DEVELOPMENT

School Readiness and Community-based Early Childhood Development (ECD) Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province

By

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### ABSTRACT

South African children's access to ECD facilities has significantly improved over the years. However, persistent negative learning outcomes nationally call into question whether children are being adequately prepared for schooling. Most children in South Africa live in communities characterised by limited resources and poverty. These children start their learning trajectory with poor-quality early learning opportunities. The lack of quality early learning means that poor children not only enter the schooling system ill-prepared to cope and excel, and remain behind children who have had access to high-quality, well-resourced ECD facilities, but their poor educational start continues to limit their learning and life opportunities well into adulthood. The key to changing this is adequate school readiness preparation (SRP), including key aspects of physical, socio-emotional, language and cognitive development.

Many factors determine how community ECD facilities and caregivers in poor communities prepare children for schooling. Informed by the classical theoretical perspectives of Vygotsky, Erikson, Piaget and Froebel, this study explored how ECD facilities' infrastructure, management, registration, practitioner skills and parental socioeconomic status affect the SRP of poor preschool children in Gugulethu, a poor urban settlement in the City of Cape Town in the Western Cape. A qualitative study was conducted involving a sample of 12 communitybased ECD centres in Gugulethu. Interviews and focus group discussions were conducted with direct role-players, including principals, practitioners, training professionals and caregivers. In addition, data was enriched through direct observation of operations at each facility. The data was analysed qualitatively. The study found that, regardless of registration status, all community-based ECD centres struggle to provide quality SRP. Contributing factors include limited ECD practitioner training, education resources, infrastructure, facility management and registration status. Although they understood the concept of SRP, parents of children in Gugulethu struggle with supporting SRP at the centres and at home because of poverty and their low educational level and limited resource capacity to incorporate SRP at home. The study concludes by suggesting ways in which quality SRP can advance through policy reform, improved funding, professional development and onboarding of parents/ caregivers in SRP processes.

**Keywords**: School readiness, SRP, ECD, early learning, community-based ECD centre/facility, Children's Act of 2005, NELDS, Gugulethu

# DECLARATION

I declare that 'School Readiness and Community-based Early Childhood Development (ECD) Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province' is my own work and has not been previously submitted for any degree or examination at any university. All sources quoted have been indicated and duly acknowledged through referencing.

Signed by M. Chikwanda .....

Date: 16 August 2022



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# LIST OF ABBREVIATIONS

CECD	Centre for Early Childhood Development
DBE	Department of Basic Education
DoE	Department of Education
DoH	Department of Health
DSD	Department of Social Development
ECCE	Early Child Care and Education (ECCE)
ECD	Early Childhood Development
ECDP	ECD Practitioner
ECE	Early Childhood Education
ECEE	Early Childhood Environmental Education
ECERS	Early Childhood Environment Rating Scale
ECL	Early Childhood Learning
ELCC	Early Learning and Childcare Centre
ELRU	Early Learning Resource Unit
EPPE	Effective Provision of Preschool Experiences
EPWP	Expanded Public Works Programme
FET	Further Education Training
FGD	Focus group discussion
KII	Key Informant Interviews
KZN	KwaZulu-Natal
NCF	National Curriculum Framework for children from Birth to Four
NDP	National Development Plan
NELDS	National Early Learning Development Standards
NGO	Non-Governmental Organisation
NIPECD	National Integrated Policy for ECD
NIP	National Integrated ECD Policy
NPO	Non-Profit Organisation
NQF	National Qualifications Framework
QUEST	Quality Evaluation Support Tool
REPEY	Researching Effective Pedagogy in Early Years
SES	Socioeconomic Status
SLP	Site Learning Programme
SSI	Semi-structured interview
SSO	Social Service Organisation
SRP	School Readiness Preparation
SRQR	Standards for Reporting Qualitative Research
TIMSS	Trends in International Mathematics and Science Study
TVET	Technical and Vocational Education and Training
UNICEF	United Nations Children's Fund
WCG	Western Cape Government

## **CHAPTER ONE: INTRODUCTION**

#### 1.1 Introduction and Background

In modern society, the tasks of rearing and teaching children under the age of six years tend to be shared between primary caregivers<sup>1</sup> and early learning and childcare centres (ELCCs). In South Africa, ELCCs are known variously as crèches, nursery schools, kindergartens, day-care centres, preschools, educare centres or early childhood development (ECD) centres<sup>2</sup>. These ECD centres are expected to prepare children for school readiness (Meier, Lemmer & Niron, 2017). School readiness in South Africa is a concept that dates back to the 1990s and emphasises holistically preparing a child (i.e. meeting the physical, cognitive, emotional, linguistic and social needs) to transition to and thrive in the formal primary schooling curriculum (Munnik & Smith, 2019).

Lack of quality school readiness leads to children struggling with a negative cycle of learning problems, antisocial behaviour and withdrawal from the school environment (De Witt, Du Toit & Franzsen, 2020; Van Zyl, 2011), while being ready for schooling contributes to a positive attitude to school attendance and successful completion rates (Bakken, Brown & Downing, 2017; Munnik & Smith, 2019). High-quality early learning in the USA, Bangladesh, Kenya, India, Cambodia and South Africa was associated with improved cognitive language development, communication skills and mathematical and literacy skills (Biersteker et al., 2016). These skills are essential for school readiness (Sherry & Draper, 2013). Moreover, quality SRP reduces discipline referrals and leads to better social interaction skills and emotional maturity (Bakken et al., 2017). In the long run, these learning outcomes produce empowered and capable youth who contribute to economic growth through sustainable entrepreneurship and employment (GEM, 2017). Determined initiatives to improve the early development of all children, particularly those whose opportunities to grow are denied, benefit at the environmental, social and personal levels. This boosts education, productivity, health and social adjustment for two to three decades after interventions are

<sup>&</sup>lt;sup>1</sup> The term 'caregiver' in this research means an adult who consistently takes care of the child's overall wellbeing. This includes an adult related to a child, a foster parent or official guardian as well as a biological parent. The term 'parent', when used, may include or exclude any of the meanings of 'caregiver' and the terms may, therefore, be read interchangeably.

<sup>&</sup>lt;sup>2</sup> This mini-thesis uses the terms 'preschool' and 'ECD centre' interchangeably. Some respondents have used 'crèche' as an equivalent term. ECD 'facility' and ECD 'centre' have the same meaning in the South African context.

employed (Biersteker et al., 2012). Early childhood development is critical to a child's short and long-term development.

For underserved communities, investment in quality SRP through ECD centres is a cost-effective approach to strengthening social capital (Alderman, 2011; Biersteker et al., 2012), reduces school dropout and teenage pregnancies, improves emotional wellbeing and ultimately increases adult productivity (Jules-Macquet, 2016; Meier et al., 2017; Munthali, Mvula & Silo, 2014). These pedagogic and socioeconomic outcomes are only achievable if the quality of learning is maintained very early on within ECD centres and with the active support and cooperation of children's caregivers.

More than 68% of South African children live in poverty (Bruwer, Hartell & Steyn, 2014; Statistics South Africa, 2016). Typically, children from poor communities are more likely to enter the schooling system with limited literacy and numeracy skills (Visser, Hannan & Juan, 2019).

The paucity of school readiness preparation (SRP) in South Africa is a major concern, as indicated by a study in Gauteng that found that 49% of children entering Grade 1 failed school readiness assessments in both low and high-quintile<sup>3</sup> public schools (Janse van Rensburg, 2015).

#### **1.2 Problem Statement**

# The ECD policy review<sup>4</sup> (see Chapter 3) shows that SRP has featured consistently in South African policies, plans and legislation. ECD policy implementation has been challenged by the government's inconsistency, and lack of material support and commitment. These challenges stem from unequal funding allocations and a lack of programme cohesion between government departments. This hampers the achievement of policy objectives (Ashley-Cooper, Van Niekerk & Atmore, 2019). The implementation of SRP through ECD services is lacking in quality, resulting in children in marginalised communities suffering the most drastic consequences. While there has been an overall increase in the numbers of children enrolled in private ECD centres<sup>5</sup> and Grade R

<sup>&</sup>lt;sup>3</sup> The South African basic education system uses a quintile system to apply national norms and standards for resource allocation to schools whereby the learners and schools in the poorest quintiles receive proportionally more government funding (but also have the parents least able to contribute to their children's education).

<sup>&</sup>lt;sup>4</sup> Chapter 3 section 3.4.1 discusses the ECD policy transition in South Africa in detail.

<sup>&</sup>lt;sup>5</sup> Operated by non-profit organisations.

in public schools, the majority of children in poorer communities rely on community-based ECD centres for access to ECD services.

These community centres are significant entities that warrant strong consideration in high-level ECD policies and legislation (Van der Walt, De Beer & Swart, 2014). However, their operation relies on limited funding support from the state, a situation which has dire consequences for community centres across South Africa (Baloyi & Makhubele, 2018). In the Western Cape, one of the more economically developed provinces, many community-based ECD centres struggle to provide quality early childhood education (ECE). In 2013, 75% of the community-based ECD centres required state subsidisation through the government Department of Social Development (DSD) to function (Sherry & Draper, 2013). Yet, the majority of community-based ECD centres can't access DSD subsidies as they are not registered and fall short of the DSD's registration requirements in areas of infrastructure, practitioners' qualifications and facility management skills (Baloyi & Makhubele, 2018). Public school-based ECD centres tend to receive more support and be compliant with registration requirements, thus benefiting from state subsidisation. Public school ECD centres also benefit from incentives such as the Department of Basic Education (DBE) National School Nutrition Programme, which unregistered community-based ECD centres can't access.

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As a result, the community centres' challenges related to poor infrastructure, lack of nutrition programmes and lack of funding for practitioners' professional development are further exacerbated (Atmore et al., 2012; Baloyi & Makhubele, 2018). Children who live in poor households where families cannot afford tuition fees tend to access poor-quality early learning for SRP (Atmore et al., 2012; Biersteker et al., 2016). The need to address community ECD challenges competes for resources with other pressing socio-economic crises within communities such as high unemployment, crime, substance abuse and child neglect. This has led to efforts to support community-based ECD centres by the government, churches, non-governmental organisations (NGOs) and the private sector. However, these interventions are inadequate as the support is usually conditional, partial and inconsistent (Atmore, 2013). Evidently, much needs to be done to maximise the support provided to poor community-based ECD centres to enhance the quality of SRP (Atmore, 2013; Atmore, Van Niekerk & Ashley-Cooper, 2012).

Parental involvement is critical to improving SRP (Reynolds & Shlafer, 2010). However, many factors hinder the support of SRP by the majority of parents living in poor communities, particularly those reliant on state social grants. These include low levels of education, and low income to purchase learning resources or send children to ECD centres. Parents may also be physically absent due to long work commitments or imprisonment, or emotionally absent due to domestic abuse, grief, substance abuse and associated mental health problems (Mampane & Bouwer, 2011; Sheridan et al., 2010, in Pitt et al., 2013). Single caregiver-headed households are common in South Africa and are a further risk to support for childhood development and learning (Du Toit, Van der Linde & Swanepoel, 2021). Due to these factors, parents in marginalised communities cannot make time for home stimulation, resulting in children being under-stimulated cognitively, physically, emotionally and linguistically (Biersteker, 2012; Draper et al., 2012; Pitt et al., 2013; Rossi & Stuart, 2007; Sherry & Draper, 2013; Woldehanna, 2011). Consequently, by the time they reach school-going age, most poor children are half as likely to have accessed quality ECD programming than more economically privileged children. Therefore, children from poor households are half as likely to be school ready, with serious long-term consequences for schooling and educational success.

Given these policy, operational and contextual problems with ECD service provision for SRP, it is important to understand the capacity of community-based ECD centres to contribute to imparting quality early learning skills and readying children for formal schooling. The DSD commissioned surveys and audits of ECD centres to obtain an understanding of the challenges faced by registered ECD centres (Kotzé, 2015; Pitt et al., 2013). Until the recent ECD census in 2021, there had been no reliable data that could enable regular monitoring of the quality of early learning programmes (DBE, 2022). Further, many of the marginalised community-based ECD centres attended by the majority of poor children are unregistered and therefore not in the government database and but less is known about the quality of services they provide.

#### 1.3 Research Scope, Question and Objectives

**Scope**: This study was conducted at community ECD centres in Gugulethu, a township which is located in the peri-urban part of the City of Cape Town municipality in the Western Cape province of South Africa (Section 4.3.1 of this mini-thesis provides details of the study area).

#### 1.3.1 Research question

This study investigated factors that influence the SRP of children in low-income community-based ECD centres in the community of Gugulethu in the Western Cape. The key research question is:

What factors affect community-based ECD centres' school readiness preparation of pre-Grade R children in Gugulethu?

#### 1.3.2 Objectives

The purpose of this study is to shed light on how facility factors such as infrastructure, learning systems and the registration process, and household factors like parental involvement, affect community-based ECD centres' ability to prepare children for schooling.

The following research objectives were set to answer the research question:

- Determine how key elements of school readiness are incorporated in Gugulethu community ECD teaching and learning, including factors affecting and/or enabling this incorporation.
- Investigate the extent to which the Gugulethu community ECD centres' environment and infrastructure are conducive to the SRP of children aged nought to four years.
- Ascertain how the DSD registration process affects the ability of Gugulethu communitybased ECD centres to function and support the SRP of children aged nought to four years.
- Investigate the extent of caregivers' knowledge, attitudes and practices of SRP.
- Recommend improvement measures to strengthen Gugulethu community ECD centres' SRP provision.

#### 1.4 Relevance of the Research

South Africa has one of the worst-ranked education systems among middle-income countries, including low basic literacy and numeracy rates. The 2016 Progress in International Reading Literacy Study (PIRLS) found that 78% of the Grade 4 learners in the study were unable to reach the lowest benchmark for reading for meaning (there were 50 countries in the study and South

Africa was ranked last) (Howie et al., 2017). This finding was consistent across South Africa's main languages. South African public-school Grade 3 average performance for literacy was found to be 35% and 28% for numeracy (Letseka, 2014). By the time they reach high school, learners' competence in vital subjects such as maths and science is astoundingly low (Fleisch, 2008; Hazell, Spencer-Smith & Roberts, 2019). According to the Trends in International Mathematics and Science Study (TIMSS) cross-national study, international Grade 8 tests were too difficult for South African students (Spaull & Kotzé, 2015). The high drop-out rate and poor matriculation outcomes of the schooling system lead to poor access to higher education and training opportunities and/or poor throughput and graduation results. The poor overall performance of the education system has lasting repercussions on social capital economic growth and development. It is imperative that the impact of poor ECD and SRP is understood to effect urgent improvement in early learning and better schooling outcomes.

- Research that only focused on school-based ECD centres and DSD-registered ECD centres does not provide a true picture of ECD services provision in South Africa since a substantial number of community-based (unregistered) ECD centres serve as early learning platforms for many poor children while operating on limited or no support. This study explored community-based ECD centres that are usually not reached for support or research, thus contributing to the knowledge of ECD in the Western Cape.
- The findings of this mini-thesis will contribute to policy and decision-makers' understanding of community-based ECD and strategies to enhance social returns from investment in quality early learning and teaching.
- This research may provide local insights for the DSD to inform future explorative studies on community-based ECD centres on a large scale.
- While many children who perform poorly in Foundation Phase schooling did not access ECD at all, many others who perform equally poorly experienced some formal ECD. It is essential to understand what levels of service are being achieved at unregistered, unmonitored and under-resourced ECD centres. This research seeks to illuminate the functioning of registered, partially registered and unregistered ECD centres operating in Gugulethu.
- Although the area of study has received more attention, the literature on ECD is substantially still rooted in the context of the United States of America (Meier et al., 2017).

There have been very few studies on understanding preschool attendance and cognitive, social, emotional and moral development in low-middle-income countries (Woldehanna, 2011). Equally, there is limited local data available in the Western Cape for townships such as Khayelitsha and Gugulethu (a notable recent addition was Madyibi's 2021 study of the impact of facility and household factors on ECD in Philippi). This study will therefore add to the knowledge of local ECD and SRP provision.

#### 1.5 Organisation of the Study

The mini-thesis consists of six chapters. **Chapter 1** describes the background, problem statement, research question, objectives and relevance of the study. **Chapter 2** reviews theoretical theories from developmental psychology, education and socioeconomic perspectives that are related to the motivation of early development and SRP. **Chapter 3** reviews local and international empirical studies in relation to the impact of quality ECD, factors affecting SRP, parental involvement in SRP and improvement measures for SRP. **Chapter 4** outlines the research methodology, including the research approach, sampling, data collection and analysis, ethical considerations and limitations. **Chapter 5** discusses the findings regarding factors impacting SRP in Gugulethu. **Chapter 6** concludes the study by summarising the key points and scholarly contribution of the study, implications for the ECD sector and recommendations for future research.

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# **CHAPTER TWO: THEORETICAL LITERATURE REVIEW**

#### 2.1 Introduction

Theorists, early learning professionals and policymakers' different perspectives on school readiness are embedded in their varied theoretical views (Munnik & Smith, 2019). This chapter considers four theoretical views through which early development and school readiness can be understood. The psychosocial development theory understands a child's readiness for societal settings such as schools to be fostered by achieving age-related developmental milestones. The sociocultural perspective takes an interactionist approach to conceptualise school readiness as a function of cultural experiences, peer learning and skills implementation. The theory of cognitive development adopts a constructivist view of how children play an active role in developing learning abilities. The early education theory sees optimal educational growth as child-directed and initiated through play (Green, Kalvaitis & Worster, 2016).

This theoretical literature, including the contributions of the originating theorists and detractors, is discussed below.

#### 2.2 Developmental Psychology's Early Learning Perspective

#### 2.2.1 Erik Erikson's psychosocial development theory

The degrees to which caregiving and environmental factors influence children's future growth and societal outcomes are best described by psychoanalyst Erik Erikson's theory of psychosocial developmental stages (Erikson, 1959). Erikson's theory posits that humans undergo eight major psychosocial dilemmas or stages that develop their identity over the course of their life spans and the successful passage of each stage results from resolving a specific crisis (Cross, 2001; Green et al., 2016; Sigelman & Rider, 2009). The negotiation of each crisis stage is accompanied by a basic 'virtue': hope, will, purpose, competence, fidelity, love, care and wisdom (Cross, 2001). Progression through each stage is determined by children overcoming 'outer and inner' struggles attributed to healthy development (Erikson, 1980, in Green et al., 2016). Regardless of whether each stage is positively resolved, the individual is pushed into the next stage by caregivers and social demands. However, each unsuccessfully resolved stage influences how the following stages are resolved (Sigelman & Rider, 2009). According to Frey (2018), this theory is fundamental in understanding personality development through the interaction of biological, psychological,

social/ cultural and historical factors (Frey, 2018) and how an individual's personality determines their engagement in societal settings such as schooling. Although Erikson's theory suggests eight developmental stages, only the first three stages are of interest to this study as they pertain to the target group of children aged nought to four years<sup>6</sup>.

Erikson's first stage of conflict – 'Trust vs Mistrust' – develops during infancy, from birth to 18 months. During this time the child has to develop a sense of trust starting with the caregivers they completely rely on for the provision of their needs (Cross, 2001; Sigelman & Rider, 2009). When needs are unmet during infancy, an imbalance of mistrust of the environment and those in it forms (Cross, 2001). The infancy stage is therefore a crucial and delicate period for holistic personal development. The first 1 000 days of life (the 270 days of pregnancy and 365 days in each of the first two years) are also critical for brain development and beyond that, the environment plays a vital part in development (Biersteker, 2012). Where the environment proves to be unfavourable, the deficits become more complex and costly to address when children grow older. At this stage, factors such as lack of stimulation and learning encouragement, malnutrition and harsh discipline have negative impacts on children's development (Biersteker, 2012).

When trust outweighs mistrust, a child between 18 months and three years will gain a sense of autonomy in Erikson's second stage – 'Autonomy vs Shame and doubt' (Sigelman & Rider, 2009). Successful resolution of this stage will propel the child's sense of independence, which is encouraged if children are allowed to explore age-appropriate tasks (Cross, 2001). If discouraged, children will develop shame and doubt and lose the will to explore and learn. For Erikson, autonomy is vital to children's ability to construct their own meaning of the world through inventing, planning and tackling projects (Green et al., 2016). Autonomy propels the child into the third stage of 'Initiative vs Guilt' during the preschooling ages of three to five years. Successful completion of this third stage results in a child mastering a sense of industry, which is important to learning and social skills in the later formal schooling years (Sigelman & Rider, 2009). According to Erikson, unresolved crises of each stage will impact negatively on negotiating succeeding stages and later, life (Cross, 2001; Knight, 2017). Thus, the accumulation and culmination of unresolved crises will reduce the likelihood of children's use of their gifts and

<sup>&</sup>lt;sup>6</sup> Stages 4—8 are Industry vs Inferiority; Identity vs Confusion; Intimacy vs Isolation; Generativity vs Stagnation; and Integrity vs Despair.

talents for a better chance of psychosocial development (Cross 2001; Erikson, 1980, in Green et al., 2016; Knight, 2017).

Erikson's first three psychosocial developmental stages relate to this study, as developing a sense of trust, autonomy and industry is essential for pre-schoolers' future development in school and society. Such development requires having attentive and involved caregivers, which accords with the study's focus on the influence of parental caregiving in preparing children for school. Thus, caregivers contribute positively to children's development of basic foundational skills (and progression through Erikson's initial stages) that are fundamental for future growth and productivity within a school setting. Aside from formal and informal learning experiences, healthy relations with adult authority figures such as parents, caregivers and teachers are critical to children's evolution through the psychosocial stages (Green et al., 2016).

Erikson's theory has been criticised for being western-biased (Kağitçibaşi, 2007; Morelli and Rothbaum, 2007; Rasmussen, 2009, in Green et al., 2016). For instance, the notion of autonomy is an individualistic concept whereas collectivist and community-oriented cultures may discourage individual independence in favour of more reliance on family members and community ties (Rasmussen, 2009, in Green et al., 2016). Another limitation of the theory is that the success of these psychosocial stages is difficult to test and it lacks in-depth descriptions of how successful development manifests (Sigelman & Rider, 2009). This study explores how the community ECD and home environments function to reinforce children's ability to successfully navigate formal schooling and is, therefore, less concerned with psychosocial stages. As ECD centres can be considered important social interaction environments that impact the growth of children's cognitive development, the theory of Lev Vygotsky is discussed below.

#### 2.2.2 Vygotsky's sociocultural perspective on cognitive development

While Erikson's theory provides insight into the successive developmental stages that a child goes through to acquire the skills and develop the aptitudes that will either positively or negatively shape future growth, it did not shed much light on how these are achieved. Russian psychologist Lev Vygotsky's sociocultural perspective (Cole et al., 1978) usefully emphasises the importance of social interaction in shaping a child's cognitive development for learning capabilities (Smolucha & Smolucha, 2021). Cognitive theories of child development suggest that the interaction between children and their classmates is one of the mechanisms through which development occurs (Cole

et al., 1978). Children's active engagement with other children, especially those who are older and more academically and behaviourally skilled, can facilitate their cognitive and socio-emotional development over time (Ansari, Purtell & Gershoff, 2016). Cognitive development is one of the factors that determine school performance and progress later in life (Munthali et al., 2014). Vygotsky stressed that children's minds develop in three ways of social interaction:

- 1. Through responses to exposure to various aspects of culture that affect how children think.
- 2. Through collaborative interaction on tasks with skilled partners and alongside likeminded peers.
- 3. By incorporating what they learn from skilled partners and internal dialogue children are helped to internalise problem-solving skills (Sigelman & Rider, 2009).

Vygotsky recognised that culture affects children's interest in play. Children reproduce what they learn using tools to encourage learning through play (Aronstam & Braund, 2015). Vygotsky recognised differences in performance between what a child can do autonomously and what a child can do when assisted or guided by another child or adult. He called the span of these differences the zone of proximal development. Vygotsky theorised that working with others in this zone constituted a structured learning support process that he called *scaffolding*, which allows a child to be guided to solve problems and gradually enhances the ability to tackle complex interpretations (Aronstam & Braund, 2015; Modise, 2019a). Scaffolded learning builds on what a child already knows, with the support provided decreasing as the child's abilities increase until they require no further guidance. According to the Vygotskian perspective, the social interaction and scaffolded learning received during early schooling serve as promoters of cognitive development. In line with this theoretical perspective, play involving object substitution creates the zone of proximal development that translates learning through play into the highest form of preschool development (Smolucha & Smolucha, 2021). Thus, preschool education ought to focus on providing learners with social opportunities (including opportunities to learn through play) and scaffolded school experiences that are crucial for the development of the coping abilities required in Grade 1 and beyond (Janse van Rensburg, 2015).

From Vygotsky's perspective, community-based ECD centres promote the zone of proximal development by serving as social interaction environments in which the ECDPs and peers present

a platform for cognitive development. ECDPs promote this development by encouraging the learning of cultures (Modise, 2019b). Within these social interactions, children spend most of their days away from home, provided with 'tools' such as toys, books and instructions. These tools have a fundamental effect on how a child develops cognitively to be able to eventually thrive in a structured learning environment such as a school. While it emphasises the importance of a child's social context in his or her development, including aspects of culture, history and politics, this theory also places great value on the role that a child's caregivers can play in optimising development. This study reflects Vygotsky's insights in seeking to explore factors affecting how community-based ECD centres function to adequately promote children's readiness for schooling.

#### 2.2.3 Jean Piaget's theory of cognitive development

Jean Piaget's theory (Piaget, 1976) provided a constructivist view of how children play an active role in gaining knowledge (Kholiq, 2020). When children get new information, they actively try to adjust to the experience using the knowledge they have acquired before (Bada, 2015). Like Freud, Piaget believed that the development of the structures of the brain is key to the developmental tasks for each stage (Kolb & Fantie, 2009, in Lefmann & Combs-Orme, 2013). Piaget's cognitive developmental theory states that the developing child progresses through multiple stages of cognitive development (Patterson, 2021). According to Piaget, there are four stages of human cognitive development (Kholiq, 2020; Lefmann & Combs-Orme, 2013). For this study, given its specific focus on preschool age groups, only the first two stages, the sensorimotor stage from birth to two years, and the Preoperational stage of ages two to seven years, will be explored<sup>7</sup>.

Sensorimotor stage: In this stage, the child forms an understanding of the world by coordinating sensory experiences such as seeing and hearing with physical, and motoric actions (Orey, 2010; Patterson, 2021). At the beginning of this stage, newborns only have a reflex behaviour pattern. By the end of the sensorimotor stage, two-year-old children can produce complex sensorimotor patterns and use primitive symbols (Marocco & Belpaerme, 2010, in Kholiq, 2020). Thinking is limited in this stage, but children reach several key cognitive milestones throughout the sensorimotor stage (Patterson, 2021). These include *object permanence* (the awareness that an object continues to exist even when it is not in view), the beginning of representational thought

<sup>&</sup>lt;sup>7</sup> The other two are *Concrete operational* (aged 7—11 years) and *Formal operational* (from adolescence to adulthood).

(the capacity to form mental images, as evidenced in the child's increasing language capabilities and capacity for deferred imitation), and understanding of causality (Patterson, 2021).

The sensorimotor stage is divided into six sub-stages. Movement through these sub-stages is characterised by several overarching trends in development: movement from reflexes to goaldirected activity, the transition from acting on the body to acting on the outside world, and the increasing ability to coordinate multiple actions to achieve a goal (Patterson, 2021).

- Sub-stage 1: the infant's behaviours are limited to innate reflexes (e.g. sucking and grasping).
- Sub-stage 2: the infant gains greater control over these reflex responses and engages in repeated physical actions for the enjoyment of these behaviours (such as kicking the legs or sucking a thumb).
- Sub-stage 3: the infant moves beyond the bounds of the body and engages with objects in the environment (e.g., repeatedly banging a rattle against the floor to hear the sound that it makes).
- Sub-stage 4: the infant can coordinate actions to reach a goal (e.g., crawl across a room, reach for and grasp a desired object, and use the arms and hands to place the object in the mouth).
- Sub-stage 5: the infant begins to explore new possibilities with objects. This sub-stage sees the emergence of the "little scientist" who understands the world through trial and error.
- Sub-stage 6: the beginnings of representational thought are evident. The child now has a basic understanding of using symbols (including words) to represent objects.

*Preoperational stage:* In this stage, children begin to communicate with words, and identify shadows and images (Kholiq, 2020; Patterson, 2021). There is a symbolic phase at the age of two to four years when the child gains the ability to mentally represent objects that are not seen. This ability extends the mental world of children as indicated by the ability to randomly describe people, homes, cars, clouds, etc. In addition, there is a phase of intuitive thinking (4—7 years) when children begin to practice primitive reasoning and want to know the answers to various questions. According to Piaget, during this stage, the mode of intuitive thinking applied is characterised by free fantasy and unique associations that sometimes make no sense (Enose, 2010). Preoperational stage children tend to be egocentric thinkers (i.e., they have difficulty taking in the perspective of

others and often do not recognise that others do not necessarily see what they see or know what they know). Piaget viewed this egocentrism as contributing to the lack of logical thinking at this stage (Patterson, 2021).

Thinking in the Preoperational stage also tends to be characterised by centration—a focus on one particular element of an object or situation and a tendency to ignore other relevant features. This cognitive centration is evident in children's performance of conservation tasks, which measure the ability to recognise that a quantity remains the same despite a change in appearance. For example, in a task intended to measure understanding of the conservation of liquid volume, a child is first shown two short, wide glasses, each containing the same amount of water. The water from one glass is then poured into a taller, thinner glass. Children in the preoperational stage will often say that the thin glass now contains more water than the wide glass because the level of liquid in the thin glass is higher. This reflects the fact that children's thinking was centred on one salient element (the level of the water) and did not include other relevant elements (e.g. the shapes of the two glasses) (Patterson, 2021).

Piaget proposed that these stages were universal and invariant (i.e. one must move through each stage in order and stages cannot be skipped) and that thinking was qualitatively different across stages. Children in each stage approach, interact with and conceptualise the world in meaningfully different ways. Thinking in each stage is characterised by certain cognitive accomplishments and limitations. Although Piaget indicated approximate age ranges for each stage, it is important to note that individuals of different ages may think in various ways, depending on factors such as environmental support and task demands (Patterson, 2021).

#### **Evaluation of theory**

Piaget's influential cognitive developmental theory has several major strengths. First, Piaget's theory was one of the first theories of child development to focus on cognitive processes and to examine children's thinking and reasoning (Patterson, 2021). Piaget's view of the child as an active seeker of knowledge, rather than a passive recipient of environmental conditioning, was appealing and influential to many researchers and educators. Piaget also used ecologically valid methods, examining how children solved a variety of academic and social problems (Patterson, 2021).

#### 2.3 Educational perspective

The educational perspective on school readiness posits that early learning includes the stimulation of children from birth and all aspects of childhood experience: physical, emotional, social, intellectual and spiritual (Janse van Rensburg, 2015). ECE is an integral part of basic education developed for the attainment of future skills (Cunha et al., 2006; Currie, 2000, in Kotzé, 2015; Heckman et al., 2006, in Kotzé, 2015). Education in and from the environment concerns directing experiences outdoors or in nature to inspire a sense of wonder and relationships with the natural world (Chawla & Rivkin, 2014, in Green et al., 2016). Education for the environment is mainly directed toward promoting conservation behaviours and actions for sustainability (Davis, 2010; Palmer & Neal, 1994, in Green et al., 2016). Small children should be encouraged to explore the world and opportunities for stimulation should be provided from infancy onwards (Janse van Rensburg, 2015). Children's independent exploration has to be enhanced through the social context, support and encouragement from caregivers, educators and peers (Green et al., 2016).

#### 2.3.1 Friedrich Froebel's early education theory

Friedrich Wilhelm August Froebel's (1782–1852) contributions to early learning theory include the recognition of children's unique capacity and potential and a holistic view of individualised child development (Nishida, 2019; Ransbury, 1982; Smedley & Hoskins, 2019). This view meant developing a child's wellbeing, physical development, the environment, emotional wellbeing, mental ability, social relationships and spiritual aspects of development (BAECE, n.d.). For Froebel, childhood was not merely preparation for adulthood but part of a continuous development in which every stage was significant (Froebel, 1889: 27, in Chung & Walsh, 2000). Froebel's theory is concerned with education as the social development of human activities (Baader, 2004). His systematic method displayed his understanding of learning as a process based on a method centred on encouraged self-activity (Baader, 2004). Froebel's great legacies were inventing an educational institution for early learning (the *kindergarten*), recognising the educational importance of self-activity and learning through play, contact with the world (first-hand experience) and manual training activities (Baader, 2004).

#### A Froebelian approach to ECE: concepts and principles

Froebel's early education theory is underpinned by a set of principles (below) that emphasises children's development, learning and wellbeing as being best served through play and creativity that is 'child-initiated and child-directed' (Hoskins & Smedley, 2019).

- 1. *Validity of Childhood*: Childhood is seen as valid in itself, as part of life and not simply as preparation for adulthood. Thus, each child's capacity and potential are unique and should be holistically explored for each child's development both as an individual and as part of a community. He recognised childhood in its own right and that the child must have a sense of the purpose, meaning and joy of activities that involve wonder, concentration, unity and satisfaction (Watts, 2021).
- Recognition of the universality of childhood: Focusing on the whole child is considered to be important in early education. Physical, mental, emotional and spiritual health aspects are emphasised (Alper, 1980; BAECE, n.d.). Froebel believed children's self-directed play was an expression of their imagination, creativity and understanding (Smedley & Hoskins, 2020). Educators have derived strength from Froebelian philosophy or traditions to hold in mind developing the whole child and family involvement (McNair & Powell, 2020).
- 3. *Learning is not compartmentalised* as everything is linked. Teaching should not only focus on overt facts, skills and techniques (Alper, 1980; BAECE, n.d.). Froebel emphasised observing children rather than taking an overtly didactic stance that could undermine children's autonomy (Liebschner, 1991, in Smedley & Hoskins, 2019). Froebel emphasised that educators had to "begin where the learner is, not where the learner ought to be" (Smedley & Hoskins, 2019).
- 4. Acknowledgement of children's natural abilities and inclinations: Children's natural and spontaneous self-activity (intrinsic motivation) leads to opportunities for physical movement. Froebel consistently acknowledged and dignified children's natural capabilities and interests. His work in helping children actualise, in addition to merely receiving knowledge or reflecting upon experiences, gave new focus to children's creativity and their executive, receptive and reflective qualities (Alper, 1980). This approach to learning recognises children as active, feeling and thinking beings, seeing patterns and making connections within their own lives (Watts, 2021).

- 5. *Learning through self-discovery*: Acquisition of knowledge is enforced by implication and realisation from within oneself (Alper, 1980; BAECE, n.d.). Froebel advocated a problem-solving approach to learning and would often present children with genuine, 'authentic' problems and then leave them to solve these in their own time and ways. Once a problem was solved, Froebel would express great pleasure in their solutions, give new ideas and inspiration, and leave the children to find further answers (Watts, 2021).
- 6. Cognisance of learning stages: There are especially receptive periods of learning at different stages of development (Alper, 1980; BAECE, n.d.). Froebel characterised early childhood as having limited intellectual ability that calls for children to have special schooling to match their developmental characteristics (Chung & Walsh, 2000).
- 7. Fostering present abilities: Child education should focus on what children can do rather than what they cannot do (Alper, 1980; BAECE, n.d.). Children need to be given help sensitively, in ways that build their confidence, skills and autonomy. Children are self-motivated when they are encouraged to be so and their intrinsic motivation to learn is not crushed but nurtured by ECDPs that understand them. Children need to be given choices, allowed to make errors and decisions and offered sensitive help as and when it is needed. This will help children to learn in ways suited to each individual. In this way, ECDPs will support and extend their learning (BAECE, n.d.).

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- 8. Importance of an enabling environment: Each child is respected and understood as unique. There is an inner life in the child, which emerges especially under favourable conditions. Froebel also saw the location, the 'site' of learning, to be important (Watts, 2021), including appreciating and learning from nature and the environment. This inspired his notion of a children's garden where the focus was on a space that surrounds the children with a wide variety of local plant species that are useful for humans (Marín Murcia & Martínez Ruiz-Funes, 2020). Engagement with outdoor play, the natural world and the wider community are centrally important to Froebel's theoretical perspective (Smedley & Hoskins, 2020).
- 9. Interaction of children with others: Children are to be supported by adults who understand that learning is holistic (Smedley & Hoskins, 2020). In Froebel's time, the teacher's task was to ensure 'freedom with guidance', so that creative play corresponded to each child's

developmental needs and interests, commonly using the 'gifts' and 'occupations' that he designed (Watts, 2021). He emphasised the importance of the family in learning, particularly for very young children (Watts, 2021). He wanted parents and educators to work in harmony and partnership, highlighting the importance of mothers caring for their children and teaching them to be observant and attentive (Watts, 2021). Froebel had an enormous influence on establishing the professional foundations for many women in developing careers as skilled kindergarten teachers, being 'efficient mediators between the mother and child (Froebel, 1887, in Watts, 2021). He described this close partnership as promoting independence as well as interdependence, individuality as well as community, freedom and responsibility. It was a demonstration of education as an integral part of the community it serves (Watts, 2021).

10. Froebel's three-factor symbolic view of education: Quality education is achieved from the interlinkage of three aspects: the child, the context in which learning takes place, and the knowledge and understanding that the child develops and learns. Quality education requires knowledgeable and appropriately qualified teachers and nursery nurses – a sound knowledge of children was a prerequisite for successful teaching (Watts, 2021). Education relates to all faculties and abilities of each child: imaginative, creative, linguistic, mathematical, musical, aesthetic, scientific, physical, social, moral, cultural and spiritual (Watts, 2021). The study of science, often in the form of nature, design, construction and mathematics is an integral – if not central – part of the curriculum for each child. Skilled and informed observation of children underpins effective teaching and learning; a system based on encouragement rather than punishment (Watts, 2021).

#### Theorising play from a Froebelian perspective - the role of play in developing character

According to Froebel, children construct their understanding of the world through direct experience with it during play. One of his greatest contributions to education was his emphasis on the affective development of very young children.

Froebel opened a play and activity institution for young children in Bad Blankenburg, Germany, which he later renamed the *kindergarten* (children's garden), where Froebel's educational principles of learning in close contact with the natural environment were put into practice (Marín Murcia & Martínez Ruiz-Funes, 2020; Nishida, 2019; Watts, 2021), including the use of music as

a basic learning tool (Alper, 1980). As his ideas spread about learning through nature and the importance of play, kindergartens were established in many countries (BAECE, n.d.). A kindergarten was a space where children aged between three and seven could freely learn through play in hygienic conditions to promote their healthy development. Kindergartens were designed to be physically safe but intellectually challenging, promoting curiosity, enquiry, sensory stimulation and aesthetic awareness. Children could play freely and observe and interact with nature away from adult imperatives, allowing free access to a rich range of materials to promote open-ended opportunities for play representation and creativity. This was an extraordinarily progressive approach in an age when children were expected to behave like miniature adults (Watts, 2021).

#### Learning elements

Froebel called mathematics the science of learning and stressed its importance in education. A range of play activities was developed for young children to understand the mathematical and natural logic underlying all things in nature, elements that Froebel ascribed to God's handiwork (Nishida, 2019).

Froebel's pedagogical system involved a coherent system of graded activities, progressing from the simple to the complex, which would develop both the child's sensory experiences and understanding of spatial relationships (Nishida, 2019).

Froebel believed that education in language was paramount because it represents the unity of all diversity and is a self-active outward expression of the inner self. Children's attributes and phenomena of life must be revealed in human speech (Lee & Evans, 1996). In other words, language was a means to represent the inner perceptions and the human mind. He developed various ways of teaching children language including music, writing, reading and storytelling (Lee & Evans, 1996).

Art and appreciation of art were considered an integral part of education. Art enabled children to see the universality of humanity and, particularly, to enable them to understand and appreciate the product of true creativity (Lee & Evans, 1996) Froebel created simple tools to encourage children to use their imaginations to express themselves and their ideas in construction (Liebschner, 1991, in Smedley & Hoskins, 2020).

Froebel's theory was not universally welcomed, with some accusing him of destroying family ties, based on the belief that children had to be kept at the 'family hearth' (Baader, 2004). Kindergartens were even banned for a few years in Prussia with Froebel accused of promoting atheism and socialism. Hailed as a pioneer of women's introduction to the teaching profession, Froebel has been simultaneously criticised for promoting the benefits of 'innate' maternal characteristics (McNair & Powell, 2020).

#### 2.4 Social Transformation perspective

#### 2.4.1 Capabilities approach to quality early learning

Pioneered by the economist and philosopher Amartya Sen in the 1980s, the approach views human development as being conjured by a set of 'beings and doings' of functionings in relation to evaluating the quality of life and human capability to function (Robeyns, 2005; Sen, 2004). Thus, the approach focuses on what people are effectively able to achieve and to be – their capabilities in terms of quality of life (Robeyns, 2005). Achievement of quality of life is dependent on the ability to remove obstacles to allow for more freedom to live a preferred valuable lifestyle (Robeyns, 2005). In this context, the approach will explore whether ECD managers, ECDPs and caregivers can alleviate the struggles they face to be able to support the provision of quality early education.

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The approach's key analytical distinction is between means and ends of wellbeing and development. Achieving wellbeing, justice or development is conceptualised in terms of capabilities to function, i.e. people exercising opportunities to undertake relevant actions to be who they chose to be. Examples of functionings for quality that are relevant to this study include, for children, being school ready; for practitioners, being skilled to teach early learning; and, for parents, being able to earn enough to enrol a child in a competent ECD facility.

The distinctive relationship between functionings and capabilities stresses that a capability set consists of a combination of potentials to achieve functionings. This distinction emphasises the importance of having the freedom to choose one kind of life over another. Choosing to provide quality early education, therefore, sets for children the freedom to live a desired life of value later in life. Children's ability to exercise the freedom to choose a different life over another will directly depend on the acquired early education. Therefore, the development of the educational sector may have a foundational connection with the capability-based approach (Sen, 2004). In the capability

approach, educational expansion has these distinguishing roles that have a vital bearing on the development of valuable capabilities contributing to the process of human development (Sen, 2004):

- 1. Education can help with productivity.
- 2. Expansive sharing of educational advancement can contribute to a better distribution of the aggregate national income across populations.
- 3. Access to quality education contributes to the conversion of income and resources into functionings and lifestyles.
- 4. Education helps with making intelligent choices on different types of life that one can lead.

This approach, therefore, stresses that functionings have to be examined and the capacity of the person to achieve them has to be valued in view of having the freedom to choose a desired life (Sen, 2004). Freedom can either be intrinsic or instrumental. Intrinsic freedom, in the sense that available alternative combinations are relevant for judging one's advantages. Instrumental freedoms offer one opportunities to achieve valuable states. However, value is placed on the achieved states, not the opportunities (Sen, 2004, 2014). Freedoms are a means to achievement, whether or not it is intrinsically important, so that the instrumental view must be among other things present in the capability approach (Sen, 2004). The greater the freedom, the more enhanced the ability of people to help themselves and contribute as agents to the world around them (Sen, 2015). Sen stresses the importance of considering the effects of poverty on capability inadequacy. The capability approach, therefore, seeks to enhance an understanding of the nature and cause of poverty and deprivation.

Another crucial distinction to make in this approach is that of means (goods and services) versus functionings. Means ought to have certain characteristics that make them of interest to people. For example, ECD centres are not to be chosen as childminding platforms but as spaces to provide children with the necessary skills to start preparing them to adjust to a schooling setting. The relation between means and functionings to achieve being and doings is influenced by three groups of conversion factors. These are: (i) personal conversion factors such as physical conditions (e.g. ECD centres); (ii) social conversion factors (social norms, policies, etc.); and (iii) environmental conversion factors (egg. availability of resources in poor communities). All three influence

characterisation of good or means and how a person converts means into functionings to achieve a better life.

The capability approach was developed further by other scholars. The most popular is the work of Martha Nussbaum (Anand, Hunter & Smith, 2005; Robeyns, 2005).

The capability approach is not a theory used to explain complex phenomena such as poverty, wellbeing or education (Robeyns, 2005). As such, this study will use this approach as a framework to be employed in conjunction with the above theories to conceptualise and identify critical elements for discussion of factors affecting school readiness in community-based ECD centres. In South Africa, caregivers and education practitioners decide what constitutes quality school readiness for children (Munnik & Smith, 2019). As such, it is important that this study seeks to understand the capabilities of these stakeholders to prepare children for schooling.

#### **Capability Approach to develop Human Capital**

ECD has been argued to be crucial for human capital development. Improving access to good ECD services has been strongly argued from a child rights perspective. ECD also promotes social equity by giving disadvantaged and vulnerable children a better start in life and can be seen as a long-term cost-saving measure in society. These are compelling motivations for investment in ECD, which is a particular responsibility of the government (Hall & Woolard, 2012; Kotzé, 2015). The appeal of investment in ECE lies in an effective government understanding that initial endowments through ECD programmes will pay dividends in reducing negative outcomes later in life (Cunha et al., 2006; Currie, 2000, in Kotzé, 2015). The provision of ECD shows clear societal benefits and supports a strong rationale for government, civil society, businesses and households to provide essential resources to ensure children have equitable economic and social opportunities in their early years (Mbarathi et al., 2016; Meier et al., 2017; Munthali et al., 2014).

The governmental policy challenge is to expand provision in the current system of quality early education and care to all children and support to parents and families through attractive and affordable services, regardless of social class or status. There is convincing evidence that focusing attention on systemic, structural and process ECD elements brings significant dividends for the less advantaged (Evangelou, 2009).

#### **Professional development**

Despite the availability of DBE bursaries for a Bachelor in ECD degree qualification, most ECDPs in registered and unregistered centres lack qualifications (Modise, 2019a). ECDPs need to undergo in-service training in the skills required to cope with the demands of teaching young children. This will ensure the provision, expansion and improvement of quality SRP (Cheruiyot, 2019). Play-based learning is an important curriculum concept and improving its understanding should be at the core of professional development (Aronstam & Braund, 2015). Universities, NGOs and Technical Vocational Education and Training (TVET) colleges should provide more in-depth training to support the efficacy of incidental teaching moments that occur while children are playing (Aronstam & Braund, 2015).

Positive morale and attitude to teaching can be encouraged through effective training programmes with all-inclusive and long-term approaches. Professional development should be characterised by facilitated teaching and learning experiences that are transactional and designed to support the acquisition of knowledge in practice (Fourie, 2014). ECD training interventions that take this experiential route will help ECDPs adapt learnt skills through implementation in their work environments. This means transitioning from the current crisis alleviation approach of focusing on rapidly training large numbers of ECDPs to more systematic support and follow-up of ECDPs and centres. This approach will likely be a meaningful catalyst for significant improvement or desired change (Fourie, 2014).

#### 2.5 Conclusion

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The relevant theoretical literature was reviewed from the fields of developmental psychology, early education and social transformation to gain an understanding to inform the conduct of the study. Several key theories proved useful. The psychosocial development theory contributed to an understanding that children go through stages of growth and their ability to thrive psychosocially in the future is influenced by their primary care and environmental exposure. Ensuring that children successfully pass each developmental stage allows them to succeed as competent adults whereas the inability to foster trust, autonomy and initiative restricts a child's likelihood to thrive later in social settings such as a school, where addressing psychosocial challenges (when children are older) is costly and likely ineffective. The theory recognises that caregivers, in form of parents, family members and educators, play a crucial role in children aged nought to four years. While this theory is criticised for being westernised and lacking consideration of individuality and

cultural influences, it is useful for conceptualising children's development, their own relationships with their environment and the essential role of caregiving in the process of growth.

The sociocultural theory shed light on how children's social skills and cognitive development are acquired through social interaction. These developmental areas are crucial for early learning. Exposure to culture, interaction with peers and guidance from adults are anchoring factors for social interaction and developing problem-solving skills. In terms of this theory, the community-based ECD centres included in this study are the zones of proximal development, serving as social interaction environments in which cognitive development is promoted and guided. Piaget's theory of cognitive development provided useful insights into how children are active constructors of their learning building on the knowledge they receive. Between the ages of nought and seven years, children learn to expand their movements from within the bounds of the body to their environments (sensorimotor stage) and develop intuitive abilities (preoperational phase) using language, memory and imagination to represent their world.

The educational perspectives of Froebel stressed the holistic development of the child in areas of physical development, relation to the environment, emotional wellbeing, mental ability, social relationships and spiritual aspects of development. The notion of children being free to explore and foster their present abilities in a safe and encouraging environment (kindergarten) is particularly relevant to the study's interest in not only whether quality education is achieved, but whether the context in which learning takes place and the knowledge and understanding which the child develops and learns contribute to school readiness preparation.

Lastly, the social transformation theory of capabilities stresses that education, treated as a capability, should lead to freedom to live a desired life. In the capability approach, educational expansion has distinguishing roles that have a vital bearing on the development of valuable capabilities and the process of human development.

Having reviewed the relevant theoretical literature, the global and local empirical literature on the school readiness of children aged nought to four years is explored and described in Chapter 3.

# **CHAPTER THREE: EMPIRICAL LITERATURE REVIEW**

This chapter discusses empirical evidence from across the globe, including South Africa, on the impact of ECD, how ECD centres function to prepare children for school (SRP), how parental involvement affects this preparation and improvement measures for ECD centres' capability of providing SRP.

#### 3.1 Introduction

Enrolment of children aged nought to four years in community-based ECD centres sets a foundational pace for children's schooling careers (Kotzé, 2015; Munthali et al., 2014). Children's exposure to ECD services enhances physical and mental health; school readiness-related outcomes such as improved enrolment, retention and academic performance; and, in the long run, reduces high-risk behaviours like unsafe sex, substance abuse and criminal activity (Hall, 2012). In line with this study's aim to explore factors affecting quality ECD servicing for SRP in community-based ECD centres, it is necessary to begin by clarifying the key essential elements and components of SRP.

#### **3.2** SRP Essentials

SRP is a multidimensional construct of specific aspects of life that directly contribute to a child's ability to cope with a formal school setting (McGettigan & Gray, 2012: 16, in Bruwer et al., 2014). Apart from the personal readiness of the learner, school readiness also includes the readiness of the school to support learners' diverse needs (Bruwer, 2014). A distinction has been made between readiness to learn and readiness for school (Munnik & Smith, 2019). While readiness to learn refers to having the aptitude to grasp new content, readiness for school is associated with abilities that enable a child to benefit from the academic curriculum within a formally structured setting (Kagan, 1990, in Munnik & Smith, 2019). In this study, readiness to learn is treated as a component of SRP.

According to the American National Education Goals Panel, the criteria for determining learners' readiness for school entry include physical wellbeing, motor development, socio-emotional development, ability to learn, language and communication skills, cognitive skills and general knowledge (Bruwer, 2014; Mashburn et al., 2008). This study assumes that holistic SRP encompasses academic/ cognitive, physical and motor skills, adequate socio-emotional

development, language usage and cognitive abilities (De Witt et al., 2020). A child who has successfully developed in these areas has been adequately prepared to cope with learning in a formal school setting (De Witt et al., 2020; Wesley & Buysse, 2003). Since this study did not conduct a formal assessment of school readiness in children, it relied on understanding these key SRP developmental areas to guide its assessment of where SRP was applied or not.

#### 3.2.1 Impact of quality ECD on holistic development and learning outcomes

New insights from neuroscience, behavioural science and social sciences underscore the importance of nurturing children's social skills as part of early learning (Hall & Woolard, 2012; Letseka, 2012a). Bakken et al. (2017) found that ECD learners in a study in the USA developed social skills that expanded as they grew. By the time the children in the study approached the Fifth Grade, they were increasingly displaying appropriate behaviours, establishing relationships, interacting socially and responding to stimuli in an emotionally mature manner (Bakken et al., 2017).

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ECD centres form part of early child care and education (ECCE)<sup>8</sup> services that place children on a vital early educational trajectory for school readiness (Bakken et al., 2017; Biersteker et al., 2016). ECD centres expose many children to their first formal agent of socialisation outside their homes (Kibera & Kimokoti, 2007, in Shumba, Rembe & Pumla, 2014). ECD centres lay a foundation for a child's holistic and integrated education, thus reducing educational and social wastage and forming the foundation of all future linguistic, socio-emotional and cognitive development (Githinji & Kanga, 2011).

Social skills help children with social interactions that are necessary to be successful in adolescence and adulthood. Children who had been in an ECD programme were able to conduct themselves well with their peers. According to their teachers, from preschool onwards, they were significantly more able to behave appropriately than the other children in their classroom (Sherry & Draper, 2013). By early adolescence, children need relationships with others to continue to develop their sense of self, their self-esteem, their sense of belonging and their sense of wellbeing (Bakken et al., 2017). Learning social skills early in life is predictive of children's ability to adjust

<sup>&</sup>lt;sup>8</sup> Services and programmes that provide care and developmentally appropriate educational stimulation for groups of young children in centres and/or in community or home-based programmes are very important aspects of ECD (Biersteker et al., 2012: 17).

to society and to likely be productive members of their culture (Elksnin & Elksnin, 2000; Webster-Stratton, Reid & Hammond, 2004, in Bakken et al., 2017).

Social skills are also impacted during early learning and are implicated in the successful regulation of thinking and behaviour necessary for school success (Blair, 2002; Rimm-Kaufman, Pianta & Cox, 2000, in Mann et al., 2017). Children who enter kindergarten with greater social skills often develop more positive attitudes toward school and experience greater success in adjusting to school, in addition to better grades and higher achievement (Ladd et al., 1999, in Mann, Moni & Cuskelly, 2016). In addition, research suggests that children with higher social skills are more accepted by their peers and teachers, have an easier time making and keeping friends and initiating positive relationships with teachers and feel more positive about school (Denham, 2006; Ladd et al., 1999). Moreover, academic competence and social competence predicted one another from the Second to Third Grade. Together, these findings underscore the interrelated nature of social skills and academic achievement in compulsory subject areas of literacy and numeracy (Mann et al., 2017). Learner competency in literacy and numeracy contributes to future academic success. Mann et al. (2016) found that early maths skills and reading were the best predictors of academic achievement. The Bakken et al. (2017) longitudinal study in the USA found more than 50% of the treatment group learners exceeded standards in math by the Fourth Grade, whereas the control group had fewer than 40% performing the same in the Fourth Grade. In reading skills, 55% of the treatment group exceeded standards in the Fourth Grade, whereas the control group had fewer than 40% exceed standards in reading. Overall, by the Fourth Grade, treatment group learners were 28% less likely to be placed in special education status (Bakken et al., 2017).

The criticalness of social skills in a positive learning achievement cannot be viewed in isolation from the influence of the various risks and protective factors. Children from low socioeconomic status (SES) families in South Africa often enter preschool with less social stimulation at home and this makes them vulnerable to poor school attendance and school dropout and unable to pursue tertiary education or develop entrepreneurial skills (Du Toit et al., 2021). In South Africa, Munthali et al. (2014) found that children who were properly socialised and also participated in ECE-related programmes generally remain in school, are unlikely to repeat classes and their class performance is much better than those who had never attended pre-primary programmes.

Although there is growing recognition of the importance of ECD as the foundation of lifelong outcomes, the evidence emanates from a few longitudinal studies of interventions in developed countries. Very few studies exist on African programmes, such as the Madrasa Early Childhood programme that has been running in Kenya, Tanzania and Uganda for more than 30 years, to provide insight into the importance of access to quality ECD in the African context (Britto, Engle & Super, 2013). Moreover, less evidence exists indicating the degree to which poor socioeconomic conditions hinder children's ability to reach their potential (Alderman, 2011). Also, school readiness studies in South Africa (Janse van Rensburg, 2015; Pretorius & Naude, 2002; Wildschut, Aronstam & Moodley, 2016) seem to focus on assessment at Reception year (Grade R) or Grade 1 levels, while little is known about support for readiness before the foundation phase of schooling. These limits in evidence are what compelled this study to focus on the capability of ECD programmes offered at community-based ECD centres to foster poor children's potential to thrive in school. It is critical that factors influencing children's school readiness while at preschool, rather than shortly before they start primary school, are investigated, understood and addressed.

South African research on learning outcomes, albeit less extensive, shows comparable patterns of the SES effects on child learning outcomes in literacy and numeracy in the lowest and highest quintiles (Ashley-Cooper et al., 2019). Researchers found that children from poor backgrounds enter formal schooling on a significantly unequal footing with huge discrepancies in their development and school readiness levels when compared to their wealthier counterparts (Ashley-Cooper et al., 2019). The quantity or frequency of programmes attended is also a major factor in early learning provision. For optimum child outcomes, a minimum attendance of 15—30 weeks of ECD programmes is required, while two years of ECD programming is better than one year. Children benefit the most from attending a quality programme before the age of four years (Ashley-Cooper et al., 2019). Access to quality ECD programme provision is imperative to improve child outcomes, especially in low-income settings.

Other scholars have argued that social skills alone are not a predictor of later academic achievement (Blair, 2002, in Mann, 2016; Rao et al., 2014). Emotional wellbeing is connected to positive approaches to learning where children are eager to learn, curious, welcome challenges, take initiative and can tolerate frustrations (Bruwer et al., 2014; Khusnidakhon, 2021; Ngwaru, 2012, in Munnik, Wagener & Smith, 2021). This view considers teaching children self-

understanding and awareness, self-confidence, empathy, emotional growth and emotion regulation. In short, children ought to grasp the basics of interpersonal and intrapersonal skills (Munnik et al., 2021). Understanding, regulating and expressing emotions are attributes of school readiness (Bruwer et al., 2014). Similarly, self-control that emanates from prosocial behaviour is identified as an attribute of school readiness (Mohamed, 2013, in Munnik et al., 2021). Bulotsky-Shearer, Fantuzzo and McDermott (2008) posited that emotional wellbeing promotes the ability to obey class rules, form friendships and adhere to the social expectations of the learning situation while Farver et al. (2006) add the ability to cooperate, communicate effectively and follow instructions.

Emotional intelligence is learnt through being allowed to play with others. Children learn to assert their needs, collaborate with others and be accountable for their actions through play. By the time they get to Grade R, they have learnt how to engage respectfully and work and collaborate with their peers. Graziano et al. (2007) claim a correlation exists between insufficient emotional readiness at school entry and the learners' limited ability to pay attention, troublesome behaviour and inability to keep up with curriculum requirements. Hindman et al. (2010) and Munnik and Smith (2019) refer to studies where teachers indicated children's emotional competence, particularly their ability to control their own behaviour, attentiveness and cooperation with teachers and peers, as the most important school readiness skill for children in the early grades.

Physical development is also vital for SRP as part of holistic development. According to Sherry and Draper (2013), all aspects of formal learning depend on sufficient physical skills as the absence of these skills may result in poor academic progress and social and behavioural problems. Physical development is enhanced through sufficient sleep and exercising gross and motor skills. Children who experience insufficient sleep exhibit deprived energy levels, poor attention span, mood swings and negative behaviour towards learning (Barbarin et al., 2008). Children require physical wellbeing and adequate energy levels to be ready to learn. These are usually promoted through motor skills development and good nutrition (Sherry & Draper, 2013).

Physical activity programmes provide young children with the environment for motor skill development, with motor skills being the foundation of physical activity during early and successive years (Jones et al., 2011). Insufficient proficiency in motor skills is a common challenge in children aged below four years (Hardy et al., 2010). Hence, ECD settings play a significant role

in the promotion of physical activity participation and motor skills development. These settings generally have the resources to implement physical activity and motor skill programmes (Khan & Hillman, 2014; Ward et al., 2010). Therefore, interventions to improve young children's motor skills and physical activity have been priorities. A systematic review of the effects of activity-based interventions on young children's motor development highlighted the fact that nearly 60% of the included studies reported statistically significant improvements at follow-up (Riethmuller, Jones & Okely, 2009).

#### 3.3 Enabling environment for SRP

In South African socioeconomically poor communities, ECD centres are the dominant form of foundational ECCE spaces. Much effort has been made to increase children's access to centres as a measure to reduce disparities between young children (Atmore et al., 2012; Biersteker, 2012; Excell, 2016). In 2021, the ECD census commissioned by the DBE estimated that over 1,6 million children (based on the enrolment numbers volunteered by the ECD centres counted) were attending early learning programmes (DBE, 2022). However, income and resource disparities persist in the ECD centres that are being accessed and service quality tends to be worse for younger and poorer children (Biersteker, 2012). Since quality improvement is urgent in relation to incorporating SRP, the following sections review factors affecting quality improvement in the current operation of community-based ECD centres. Most of these factors are highly controlled by policy structures currently in place.

## 3.3.1 Quality of infrastructure

Merely enrolling children in ECD centres does not translate into children becoming adequately prepared for school. ECD centres in poor communities lack the human and infrastructural resources to stimulate children cognitively and non-cognitively, and therefore there is a tendency for them to only function as childminding facilities instead of childcare and educational facilities (Kotzé, 2015). The DSD's guidelines for ECD services (DSD & UNICEF, 2006) require ECD centres to adhere to these minimum standards:

• Health and safety in and out of buildings to protect children from physical, social and emotional harm (e.g. the risks of fire, accidents or other hazards) or any threat of harm to children from themselves or others.

- Adequate space: There must be 1,5m<sup>2</sup> of indoor play space per child and 2m<sup>2</sup> of outdoor play space per child to allow children to move about freely.
- Availability of adequate equipment and resources that are developmentally appropriate for the number and different ages of children in the ECD facility.

These standards aim to ensure that ECD centres provide a conducive environment with the necessary foundations for early learning and socialisation. The government acknowledges the need for substantial investment to support children's broad educational and social needs. However, the South African ECD sector often faces infrastructural problems that impact the provision of comprehensive development (Baloyi & Makhubele, 2018). Poor infrastructure impacts children's safety, has health implications and leads to poor ECD service provision (Ashley-Cooper et al., 2019).

In recent years, the public, NGO and private sectors have expanded their support (including infrastructure improvement support) for ECD services (Van der Walt et al., 2014) and greater attention has been paid to government programmes and NGO support models. However, there is little evidence of support being provided to poor community-based ECD centres (Bidwell, Watine & Parry, 2014). A study commissioned by the DBE, DSD and UNICEF (DBE, DSD & UNICEF, 2010) reported that centres in poor quintile areas are characterised by infrastructure that does not meet the required standards to register with DSD. In addition, facilities wanting to upgrade infrastructure undergo laborious approval processes through various governmental departments whose requirements constantly change, making DSD registration almost unattainable. Since the DSD only subsidises learners at registered centres, such community-based unregistered facilities remain more poorly resourced than the private and public school-based centres (Ashley-Cooper et al., 2019; Mbarathi, Mthembu & Diga, 2016). Given the limited funding available for ECD centres face serious infrastructure and the lack of support from municipalities, poorer ECD centres face serious infrastructural challenges related to building specifications, utilities and space (Kotzé, 2015).

Poverty is a major factor in ECCE service provision and limits children's development through many mechanisms. These include stunted growth, poor cognitive stimulation, nutritional deficiencies, parental depression, diseases and exposure to violence (Sherry & Draper, 2013). Ensuring optimal growth during childhood is crucial, particularly for marginalised children

(Sherry & Draper, 2013). Interventions for children lacking support to promote their development during this critical period can be costly and caregivers and schools struggle to help them catch up later (Harrison, 2020). The most effective interventions found have adopted an integrated approach, considering poverty's impacts on development and synergising multiple interventions such as health, nutrition, training and stimulations to provide a holistic intervention (Sherry & Draper, 2013). ECD policies and legislation can substantially affect the design and implementation of ECD programmes to benefit children and their societies.

**Quality of buildings**: Unregistered ECD centres tend to be built of non-permanent materials – compromising on quality (Bidwell et al., 2014). In Kotzé's (2015) study in North West province, ECD facilities, some situated in residential homes and others in separate ECD buildings were ranked between 'very modest' to 'poor'. None of these centres complied with the DSD regulations and most were non-compliant with the building regulations for normal housing. Also, none of the sites was zoned for use as early learning centres (Van der Walt et al., 2014). Similarly, Ashley-Cooper et al. (2019) found that the main reason for unregistered facilities in the Western Cape not being registered was that their buildings were in very bad condition. Kotzé (2015) also found that infrastructural challenges were faced by both registered and unregistered centres in rural and urban areas.

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**Water and sanitation**: A study in the Eastern Cape found that only 30% of ECD centres had piped water, flushing toilets and electricity (Letseka, 2010). In North West, some centres fetched water from a tap in the street (Van der Walt et al., 2014). In Soweto, most ECD facilities had flushing toilets and only a few of the unregistered centres used buckets and potties or did not have toilet facilities (Bidwell et al., 2014). In general, a significant number of facilities needed to substantially improve the standard of the toilets provided (Van der Walt et al., 2014).

**Physical space:** Educators can give individual and personal attention to children if the educatorto-children ratio is not exceptionally large (Van der Walt et al., 2014). The DSD requires accommodation capacity to be limited to an ECDP-to-child ratio of 1:6 for children aged 1—18 months, 1:12 for children between aged 18 months—three years and 1:20 for children aged three four years (DSD & UNICEF, 2006). These requirements are rarely adhered to as overcrowding is characteristic of community-based ECD centres. Van der Walt et al. (2014) and Ashley-Cooper et al. (2019) confirmed overcrowding so severe that play appeared seriously impeded. Few competent ECDPs could manage overcrowded classrooms. In addition, in the study of Van der Walt et al. (2014), although 29 of the 31 facilities had gates that could be locked during the day, their survey could not determine how safety was ensured at these facilities. In general, safety measures such as fencing are not found at unregistered centres.

#### **3.3.2 ECD facility registration process**

As mentioned in the problem statement (Chapter 1) community-based ECD centres' lack of registration prevents state subsidies and other forms of support for effective operations, thereby negatively impacting the provision of quality SRP (Baloyi & Makubele, 2018; Sherry & Draper, 2013). ECD centres have to meet registration criteria that include sound building structures, child-friendly toilets, adequate sanitation and safe playing areas (Blose & Muteweri, 2021). Meeting these requirements without support is not feasible for community-based ECD centres such as those in Gugulethu (Blose & Muteweri, 2021). Registration of ECD centres entails completing two forms, namely:

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- 1. Form 11: This is completed by ECD managers seeking to apply for full registration (full approval for meeting all requirements), conditional registration (i.e. provisionally approved for meeting some of the requirements), renewal of registration status or reinstatement of a deregistered ECD facility/ centre (i.e. registration denounced after failing to meet most or maintain registration requirements) (Jules-Macquet, 2016) catering to educating children below the age of five years during the day. Submission of this form is accompanied by 13 other requirements as indicated in Table 1 below.
- 2. Form 16: This form is completed by ECD managers seeking applications for the registration, conditional registration and renewal of registration status of an ECD programme (City of Cape Town, 2015; Jules-Macquet, 2016). Submission of the form is accompanied by 11 other requirements shown in Table 1 below).

Partial Care Facility Registration		ECD Programme Registration			
1.	Form 11	1.	Form 16		
2.	Needs assessment form	2.	Identifying details of applicant		
3.	Written municipal environmental health and safety	3.	Address of applicant		
	approval	4.	Contact particulars		
4.	Approved copy of Business Plan/ Organisational Plan	5.			
	(Hours of operations, care plan, fee structure, staff	6.	ECD programme implementation		
	composition and disciplinary policy)		plan		
5.	Qualifications and skills of applicant	7.	F8		
6.	Description of content of programme to be offered		composition		
	including aims and objectives	8.			
7.	Constitution of organisation, i.e. name of partial care	9.	Clearance certificate issued by the		
	facility, types of services provided, composition, power		Director-General, certifying that		
	and rank of management, procedures of amending		the applicant does not appear in		
	constitution and commitment from management to		the National Child Protection		
	ensure compliance with national norms and standards		register or National register for		
8.	Emergency plan	10	sex offenders		
9.	Health permit certificate	10	). Health clearance certificate issued		
	Clearance certificate	11	by the municipality		
	Weekly menu	100 million (1977)	. Staff job descriptions		
12.	An appropriate land use or zoning certificate from the municipality	12	2. Menus		
13.	Building lease/ rental agreement	J[]			
14.	Social worker/ Social service practitioner inspection		2		
	report				

Table 1: DSD's ECD centre/ programmes registration requirements

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In line with section 94(2) of the Children's Act, Act 38 of 2005<sup>9</sup>, the DSD imposes norms and standards (Figure 1 below) to be followed by every registered ECD centre for both operational and programmatic aspects. Each of the listed norms and standards contains detailed explanations of the meaning of the requirements (DSD, 2014). While this amount of detail is aimed at enabling an easy understanding of the ECD centre registration process, the process has not been met with positive reviews (Ilifa Labantwana, 2021).

<sup>&</sup>lt;sup>9</sup> Now by the Children's Amendment Act, Act 41 of 2007.



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The Cape Town ECD Centre Registration Helpdesk operated by the non-profit organisation (NPO) Ikamva Labantwana reported that ECDPs considered the registration process to be complicated with unattainable and fastidious requirements (Ilifa Labantwana, 2016). Most of these requirements meant dealing with municipal departments such as the fire department and the Cape Town municipal office (Ilifa Labantwana, 2016). These departments follow their own protocols and pace that differed from the DSD's, resulting in ECD owners struggling to meet all the requirements (Ilifa Labantwana, 2016). The ECD census of 2021 indicated that only 40% of early learning programmes were either fully or conditionally registered with DSD, while 16% were in the process of registering, leaving 42% unregistered<sup>10</sup> (DBE, 2022).

As seen in Table 1 and Figure 1 above, the registration process is demanding. For ECD centres and programmes facing resource challenges, achieving a registration status for state subsidy and

<sup>&</sup>lt;sup>10</sup> A further small percentage of early learning programmes 'did not know' whether they were registered or not.

support becomes unattainable. This results in a perpetual state where community centres remain under-resourced and unable to provide quality holistic stimulation for SRP. Thus, registered ECD centres are preferable as parents believe that their children are better prepared for schooling (Ilifa Labantwana, 2021).

Failure to reach full registration often results from a lack of adequate infrastructure and this hampers proper ECD service provision (Kotzé, 2015) This was evident in the South African audit study where many ECD centres, particularly unregistered, were reported to be housed in buildings in dire conditions (DSD, 2014). The main cause of delayed registration appears to be municipalities refusing or delaying approval of re-zoning applications to allow ECD centres to be operated in houses or on residential properties (Baloyi & Makhubele, 2018; Kotzé, 2015). Such centres inhibit the holistic provision of SRP-related stimulation as their lack enough physical space to cater for child's physical activities (Hall, 2012; Harwood et al., 2013; Kotzé, 2015; Van der Walt et al., 2014). Some ECD centres are unable to meet the DSD norms and standards (or municipal hygiene norms) because they lack access to basic utilities such as running water, electricity or suitable sanitation (Baloyi & Makhubele, 2018).

Unregistered centres do not qualify for nutritional programmes, even if the centres are providing ECD services in disadvantaged areas to the poorest residents (Martin et al., 2014; UNICEF, 2014). Lack of a pertinent service such as nutrition affects cognitive function and stimulation and inevitably impacts children's ability to learn (Kotzé, 2015). Despite the pressing need to provide high-quality ECD services to children, lack of support restricts these centres' ability to raise funds to improve their service environment. Moreover, parents in these areas struggle to support centres through fee payments (Sherry & Draper, 2013). Public funding tends to favour centre-based ECD sites over community-based ones (Sherry & Draper, 2013). This suggests that the policies may have overestimated the capacity of ECD providers to self-fund their activities and development (Sherry & Draper, 2013).

Although the Western Cape province's draft 2011—2016 policy contains a commitment to conduct ongoing research to identify the most effective approaches, government information on unregistered ECD centres in informal urban areas is negligible. Not only are registration challenges addressed minimally but operational challenges are as well. These include a lack of proper management structures and monitoring and evaluation mechanisms at informal ECD centres, a

deficiency in nutrition programmes, a lack of trained ECD personnel and a high personnel turnover (Atmore et al., 2013; UNICEF, 2009).

Although the DSD, the Department of Public Works and many NGOs provide some support for infrastructure development, such support tends to be once-off and inadequate (Baloyi & Makhubele, 2018). The government is not actively involved in developing ECD centres' infrastructure (Baloyi & Makhubele, 2018). ECD representatives in the Western Cape have voiced their dissatisfaction with the government's limited funding and high expectations of ECD centres without giving them the needed support that would assist these unregistered centres to improve their facilities and qualify for subsidies (Sherry & Draper, 2013).

## 3.3.3 Promoting SRP through ECD facility and programme management

Although guided by governmental standards, ECD centres and programmes operate under different internal governance. How each ECD centre's system works affects the children's SRP outcomes. In England, early learning programmes with clearly set early learning standards such as developmental milestones of what children can do at a particular age are believed to improve instruction in pre-schools (Bingham & Whitebread, 2012: 49). Thus, they increase the likelihood that children will be ready to do what is expected of them at school (Bingham & Whitebread, 2012: 49). This study consequently focused on assessing ECD teaching and learning systems in terms of: (i) how governance and management influence the delivery of quality SRP; (ii) how skilling of ECDPs influences their teaching methods; and (iii) ECD programming for quality SRP.

#### 3.3.3.1 ECD Centre and programme governance and management

Community-based ECD centres are managed by principals, in some cases in collaboration with a Grade R teacher (Fourie, 2018). This means that the principal is usually responsible for sourcing funding, registration of the centre, approval of teaching programmes, sourcing teachers and other staff, and ensuring that ECDPs meet and comply with the National Curriculum Framework (NCF) (Fourie, 2018). Fourie (2018) and Van der Walt et al.'s studies gathered that ECD principals of community-based ECD centres in South Africa were less skilled in bookkeeping, financial management, office administration, computer literacy, organisation management, child health and nutrition. These principals struggled to create favourable conditions to link the work of teaching and learning with organisational goals and results (Fourie, 2018). Centre management variables,

although not usually considered in quality assessment, have implications on quality ECD centre provision for SPR (Biersteker et al., 2016).

Other studies of South African townships done by Fitzgerald and Zientek (2015, in Fourie, 2018) and by Mafora and Phorabatho (2013, in Fourie, 2018) showed that female managers face challenges in relation to acquiring basic management skills. Management of ECD centres has not received sufficient attention in the past, with few available programmes focused on specific management skills. Therefore, ECD principals' continuing professional skilling should become a critical aspect of educational reform (Krieg et al., 2014, in Fourie, 2018).

According to the South African government, ECD programme teaching standards require ECDPs to be qualified to implement ECD programmes and be equipped with basic information, knowledge and skills to assess and address children's wellbeing needs (DSD & UNICEF, 2006). Moreover, the NIP recognises that all ECDPs should be supported as professionals with a career path (Van der Walt et al., 2014). Professional development is therefore crucial for the delivery of ECD programmes and ensuring that children are well-prepared for school. Van der Walt et al. (2014) and EACEA, 2009: 38, in Du Toit et al., 2021 found that ECDPs usually require training in: (i) preparation and implementation of daily ECD class programmes; (ii) meeting children's school readiness developmental needs, including rendering emotional support and addressing learning difficulties; and, (iii) providing first aid, office administration, basic computer literacy, time management and nutrition (Van der Walt et al., 2014). Van der Walt et al. (2014) prove the possibility of professional development in informal status facilities. Bursaries for educational upgrading are available from the DBE and professional development seminars such as the UNICEF-supported Early Childhood Development Knowledge Building Seminar have been held annually since 2006 (Harwood et al., 2013). Merely working in an unregistered or informal ECD centre does not, therefore, preclude ECDPs from obtaining formal training and qualifications.

ECD programmes for children from underserved communities can contribute to combating educational disadvantages if certain criteria are met (EACEA, 2009: 38, in Du Toit et al., 2021). Essential ingredients of a successful ECD programme for preparing young children for schooling and life include settings of care, emotional warmth, exposure to a variety of age-appropriate stimulating experiences, honouring the principle of play-based learning, and nutrition (Biersteker et al., 2016; Van der Walt et al., 2014; OECD, 2000).

Uneven resource provision to community-based ECD centres compromises the provision of quality programmes. Current ECD policies assume that adequate learning materials for intellectual stimulation will be available to the children (Mbarathi et al., 2016). The delivery of ECD programmes depends on the availability of furniture, learning equipment, toys, books, posters, etc. The City of Cape Town channels funds through its Social Development and ECD (SDECD) Directorate to procure and distribute ECD educational toolkits and materials to aid the numeracy, literacy and social skills learning of children aged nought to four years in unregistered ECD centres. The SDECD Directorate also established a toy library to support the children of Harare, Khayelitsha. Despite these efforts, one in every five centres in the Western Cape lacks basic learning and teaching support materials (Kotzé, 2015). Many ECD centres not only lack outdoor equipment such as jungle gyms but also educational materials such as books, puzzles and other educational toys, or even tables and chairs. This study found no data on material provisioning for ECD centres in the Gugulethu community.

The role of play: ECDPs' knowledge and incorporation of play-based learning in classrooms is crucial for SRP (Fesseha & Pyle, 2016). Two projects in the USA on the Effective Provision of Preschool Experiences (EPPE) and Researching Effective Pedagogy in Early Years (REPEY) found that children's free play can be used as opportunities to identify critical moments for learning through scaffolding, conversation or instruction (Aronstam & Braund, 2015). A South African study showed that Grade R teachers are not clear on the concept of play and seem to prefer formal play where they can control the outcomes (Aronstam & Braund, 2015). In a Canadian study of elementary educators at Ontario preschools, only 19% of educators confirmed incorporating playbased learning in their kindergarten programmes (Fesseha & Pyle, 2016). ECDPs have an erroneous perception of free play as meaning a lack of teacher involvement (Aronstam & Braund, 2015). This view departs considerably from Piaget, Vygotsky and Bruner's view of play as an opportunity to contract knowledge without manipulation (Aronstam & Braund, 2015). ECDPs ought to learn the differences between informal (child-directed) and formal (teacher-directed) play and how they can facilitate learning in both (Aronstam & Braund, 2015; Fesseha & Pyle, 2016). Teachers from poor communities may lack an understanding of the concept of play because of their limited training opportunities.

**Classroom composition**: Governmental official standards require that children of different ages are accommodated in age-appropriate classes (DSD & UNICEF, 2006: 62). It is argued that mixed-age classrooms would be beneficial for younger children but may be deleterious to older children's skill development. Although age-restricted classrooms may be more effective than mixed-age classrooms (Moller, Forbes-Jones & Hightower, 2008), it may not always be feasible to separate age cohorts, e.g. three and four-year-olds in separate classes, as mixed-age classrooms are sometimes created out of necessity. Ansari et al. (2016) found that mixed-aged classrooms appear to have negative implications for the academic achievement of older children. Specifically, four-year-olds who were enrolled in mixed-aged classrooms demonstrated fewer gains in maths and language and literacy skills than four-year-olds who were in classrooms with fewer three-year-olds. In every classroom structure, ECDPs should modify their activities to accommodate children's range of skill levels (Urberg & Kaplan, 1986, in Ansari et al., 2016).

In general, many informal ECD facilities can provide the centre programming elements described above. Van der Walt et al. (2014)'s survey results of South African ECD facility principals revealed that facilities exposed to the same financial and resource-related challenges had different results, some with better programmes presented than others. The differences were not brought about by funds and facilities, but by initiative and commitment, supported by relevant training and mentoring processes (Van der Walt et al., 2014). Moreover, programming services succeeded despite a low fee structure (Van der Walt et al., 2014).

#### 3.4 Parental Involvement in Supporting SRP

Studies have confirmed positive links between caregiver involvement and children's socialemotional and pedagogical outcomes (Arnold et al., 2008; Desforges & Abouchaar, 2003; Marcon, 1999; Topor et al., 2010, in Murray, McFarland-Piazza & Harrison, 2015; Wessels, 2012). Most of the research in this area, however, has focused on families with school-aged children and not much on the involvement of parents of children in preschools (Murray et al., 2015; Waanders, Mendez & Downer, 2007). Wessels (2012) found that, despite the identified need for programmes that support parents with skills to support children's growth in South Africa, there appear to be limitations on the range of existing programmes in the quality of services provided.

Parental involvement is usually encouraged in home settings. Home learning activities with children aged below four years involve reading with the child, singing songs, drawing, learning

about letters and numbers, visiting libraries and museums and supporting children to have opportunities to play with other children (Sylva et al., 2004, in Murray et al., 2015). In China, home-based parental involvement, in particular, parent instruction, language and cognitive activities and homework involvement, were found to be the significant predictors of SRP. Parents are thus viewed as partners, collaborators and advocates for early learning while the ECDPs are considered co-learners and collaborators with the child, not just instructors (Baldwin, 2011; Cook, Hirst & Nutbrown, 2005, in Janse van Rensburg, 2015). The ultimate purpose should be for caregivers to align their support with the work of ECDPs in support of SRP.

#### 3.4.1 Nature of parental involvement and profiling caregivers associated with communitybased ECD centres

Parental involvement refers to the specific practices or techniques that parents employ to support their children's development and education (Fan & Chen, 2001, in Xia, Hackett & Webster, 2020). As a multifaceted construct, three major dimensions of parental involvement have been identified (Xia et al., 2020). These involve school-based involvement, such as attending school events and volunteering in the classroom; home-based involvement, which includes providing a literacy-rich home environment, assisting in coursework and discussing concepts with children, and home-school conferencing, which includes activities such as communicating with teachers regarding children's progress and problems (Xia et al., 2020).

The path to early learning for SRP involves providing an environment where children can experience the world around them with support from common household objects, toys and simple interaction with a caregiver. For example, the NCF suggests that caregivers can provide common household objects like empty pots or cans to help a child learn about objects' feel and quality (Pierce, 2021). Early learning ensures that children are prepared for adaptation to the changing circumstances of school through simple day-to-day interactions. Additionally, parents can narrate common tasks such as meal time or bath time to help children learn about other people, the flow of life and routines (World Health Organization, 2018, in Pierce, 2021).

Previous research proposed that determining the influence of demographics is crucial when examining parental perceptions and views (Baldwin, 2011). Caregivers' perceptions of school readiness are influenced by factors such as SES, ethnicity, single-parent households, educational status of parents and the child's attendance at a preschool facility (Bierman et al., 2015; Campbell,

2008; Coley, 2002; Munnik & Smith, 2019). Globally, parental involvement is positively associated with parents' efficacy regarding education and negatively associated with perceived economic stress and neighbourhood disorder (Lau, Li & Rau, 2011; Mbarathi et al., 2016; Munnik & Smith, 2019; Waanders et al., 2007; Xia et al., 2020).

Families with lower SES tend to have higher stress that may lead to adult depression and can hinder optimal caregiver-child reciprocity and caregiver responsiveness (Du Toit et al., 2021). These parents may lack the skills to initiate tasks suggested by ECDPs or the clear understanding of learning outcomes that stems from reading to young children and, consequently, are hindered from supporting SRP (Pitt et al., 2013). As poverty is a contributor to a lack of interest in early learning, poor parents should receive guidance on stimulating their children (Fourie, 2014). This can involve informing them on applying principles of SRP to developmental areas (Janse van Rensburg, 2015).

The majority of South African children are from low SES backgrounds and live in households with adults who have very low literacy levels. Typically, children from these homes are seldom exposed to books or regular literacy practices such as storybook reading (Pretorius, 2014, in Kotzé, 2015). Lack of regular literacy practices could potentially have lasting detrimental effects on their development. Families in peri-urban Cape Town areas such as Gugulethu live in high-density neighbourhoods (see section 4.3.1) typically characterised by low SES, low levels of education and persistent cycles of poverty (Pitt et al., 2013). Poverty limits caregivers' ability to engage with their children resulting in many children in poor households receiving less stimulation and interaction with parents (Bierman et al., 2015). In the Soweto community in South Africa, for example, less than 2% of parents took an interest in providing learning materials to their preschoolers in comparison with parents in Kenya and Ghana (Bidwell et al., 2014).

Regarding family structure, it is common in South Africa for both parents not to be involved in raising children or for children to live in the care of other relatives or friends. This is attributable to factors of poverty, labour migration and psychosocial concerns (Mbarathi et al., 2016). These living arrangements do not provide the consistent care that children could receive from a dual parenting system of present caregivers (Stats SA, 2016). If ECDPs are to get parents involved in their children's work, they (parents) need to be sensitised on the importance of early learning (Mbarathi et al., 2016). Du Toit et al. (2021) postulated factors that contribute to resilience to

developmental delays, including living with two caregivers, married parents and higher caregiver education levels. Certain factors influence parents' buy-in to SRP or lack thereof.

De Witt et al. (2020) found that parents with the highest level of education and better SES have a better understanding of school readiness and are highly likely to actively support their children's learning. Higher education levels also contribute to lower psychosocial risks, reducing children's developmental delays (Du Toit et al., 2021). Knowledge of the importance of early learning prompts parents to consider pertinent factors such as teaching quality (i.e. the relation to the curriculum, or teacher qualifications, motivation and attendance) (Du Toit et al., 2021).

Programmes that provide parents with learning materials to use with their children at home extend children's learning beyond ECD centres (Bierman et al., 2015). Through programme interventions that are facilitated using quality methodologies, parents prioritise education and are likely involved in supporting their children's holistic development (Fourie, 2014). Successful intervention approaches are known to encourage parents to use specific parent-child learning activities that promote emergent literacy and numeracy skills (Bierman et al., 2015). For example, parents are taught to ask questions and use active listening and descriptive expansion when reading with their children, prompting their children to describe story pictures and events (Bierman et al., 2015). Parents should be taught play-based learning that involves the identification of letters, colours and numbers (Bierman et al., 2015). In India, a play-based approach that involved parents was found to be useful for contributing to early learning outcomes that continued contributing later to better school performance and creativity (Qadiri & Manhas, 2009). Ebrahim, Killian and Rule (2011) and Pitt et al. (2013) describe adult education workshops where parents learned fundamental skills in eye control, hand-eye coordination, visual discrimination and matching skills, motor planning, foot-eye coordination, dexterity, sitting posture, listening skills and communication. To improve fostering of child development practices, caregivers need to learn how to form secure relationships with their children. In South African communities, however, such training of caregivers by ECDPs is challenged by ECDPs' lack of capacity and resources (Messner & Levy, 2012; Munthali et al., 2014).

Reluctance to work with ECDPs is common among caregivers in poor communities for various reasons (Grace, Bowes & Elcombe, 2014). ECDPs have struggled with parental involvement due to a lack of communication with parents (Munthali et al., 2014). In South Africa, parents expressed

embarrassment at struggling to perform tasks expected of their children (Pitt et al., 2013). Some parents found the activities to be too 'suburban' (relevant to middle and upper socioeconomic contexts and experiences), according to Pitt et al. (2013). This calls for inclusive strategies during workshops such as allowing the parents to suggest contextual methodologies relevant to them as parents are often unfamiliar with more western and complex ideas (Pitt et al., 2013). Bierman and Motamedi (2015) also suggest using drop-offs or home visits to ease caregivers slowly into the ECD programme ideas. ECDPs who build relationships with caregivers have reported positive parental involvement. Support groups and workshops have also been formed to help women support each other in coping with daily stresses in the community (Bierman & Motamedi, 2015). Ebrahim et al. (2011) found that women from poor communities appreciate stress-relieving support groups, networking with each other, realising their common interests and engaging in incomegenerating activities. In turn, ECDPs' interventions help build social cohesion in the community that eventually strengthens cooperation in early learning involvement. ECDPs can also include parents in advocacy roles, campaigning to create awareness of ECD in the communities (Ebrahim et al., 2011).

Parents who are actively involved in programmes see positive results in this engagement. Parents from Qadiri and Manhas's (2009) study perceived preschool education as fundamental for future learning and imparting social skills. When parents take an interest in their children's learning they also develop an interest in ECD policies. Qadiri and Manhas (2009) observed that parents knew the prominent institutions to approach for various issues related to ECD. They were able to contribute to discussions on issues of quality of nutrition, involvement of institutions in quality ECD service provision, lack of proper training of educators, lack of a proper curriculum schedule and inadequate learning content.

#### 3.5 Influence of ECD policies and legislation on SRP

South Africa subscribes to the Sustainable Development Goals of the United Nations (UN) including SDG 4.1, which aims for all girls and boys to be able to complete free, equitable and quality education that leads to relevant and effective learning outcomes by the year 2030.

To date, several South African policies and plans have been developed that purport to prioritise quality ECCE as the foundation for education. South Africa's first democratic government recognised the need to expand the provision of ECD, specifically linked to post-apartheid

reconstruction and development, from the outset. ECD was included in the Department of Education's White Paper on Education and Training in 1995 and the Department of Social Development's White Paper for Social Welfare in 1997. The DoE also released the Interim Policy for Early Childhood Development in 1996 and conducted a 'National ECD Pilot Project' until 1999, which resulted in the government's acknowledgement of the need for a Reception Year in the basic schooling system (DoE, 2005: 4). South Africa's prioritisation of early learning was formalised with the affirmation of children's access to education as a basic human right in Education White Paper 5 on Early Childhood Education (DoE, 2001). A National Integrated Plan for ECD (NIPECD) was adopted in 2005, covering the 2005–2010 period and setting ambitious targets for expanding access to ECD for all children aged nought to four, as well as assigning various responsibilities for early childhood to the Departments of Health, Social Development and Education and the Presidency (which initially housed the Office on the Rights of the Child) (DoE, 2005). The Children's Act, Act 38 of 2005, succeeded the White Paper, setting minimum norms and standards for ECD centres' optimal operation (Republic of South Africa, 2008: 23). At this point, although Grade R was considered crucial for entry into the primary school education system (Atmore, 2013), preschooling was still not provided as a fundamental right, despite the fact that all government ECD documents and legislation to date appeared to show the government accepting its role as a direct provider of ECD resources. Effectively, by not prioritising SRP, the government had increased the likelihood over the first decade of democracy of children entering the schooling WESIEKN system unprepared.

The Children's Amendment Act, Act 41 of 2007, provided a legislative mandate for ECD sector supervision. The national Department of Health (DOH) was allocated responsibility for children's health from nought to nine years old, the national Department of Social Development (DSD) took on the responsibility for children's welfare and development aged nought to four years, while the national Department of Education (DoE) (now the DBE) was responsible for the education of the five to nine-year-old Foundation Phase cohort (Atmore et al., 2012; Biersteker, 2012).

In 2009, the National Early Learning Standards (NELDS) were developed, which guided ECD practitioners (ECDPs) on the age-specific developmental outcomes to achieve to ensure that children reach full development and learning capacity (DBE, 2009; Ebrahim, 2014; Matjokana, 2021). It was expected that the NELDS would improve children's early learning through holistic

child-centred practices for optimal development. It would be a resourceful guide for ECDPs/ educators, parents and trainers to support children (Pill & Nichols, 2020; Sherry & Draper, 2013). Policymakers were to use the NELDS to formulate, monitor and evaluate school readiness indicators on a national scale. Child rights activists would advocate for SPR for children aged nought to four years (Ebrahim, 2014).

The NELDS accommodate age categories for children 0—18 months, 18—36 months and 3—4 years. It outlines "desired results" or "broad competencies" that children should obtain encompassing the social, physical, emotional, cognitive, perceptual, language, moral and spiritual domains of development that should be developed through ECD programmes (DBE, 2009: 14). Competency outcomes for various age groups and examples of activities are provided (Ebrahim, 2014; Pill & Nichols, 2020).

While the NELDS are seen as a curriculum initiative and a "critical nodal point for the country's social and economic transformation and development" (Hindle, 2009: 3, in Ebrahim, 2014), some scholars assert that the document failed to fully live up to expectations (Ebrahim, 2014; Matjokana, 2021). The NELDS is not context-specific but contains westernised notions of child development (Ebrahim, 2014: 73). In practice, the implementation of the NELDS has been lacking because most children, particularly in impoverished communities, enter formal schooling without proper SRP (Matjokana, 2021).

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The National Development Plan (NDP) adopted in 2012 called for the introduction of compulsory pre-primary education for four and five-year-olds (NPC, 2012: 300). Yet another attempt at coordinating an integrated response to children's learning and development was introduced in 2012 by the short-lived Department of Women, Children & People with Disabilities (DWCPD), the National Plan of Action for Children in South Africa 2012—2017 (NPAC), which was the latest reboot of the NPAC adopted by the Mandela government in 1996. Again, universal access to quality ECD was promised as well as "universal access to quality Grade R by all children in South African [sic] by 2015" (DWCPD, 2012: 37). The National Integrated Policy for ECD (NIP) adopted in 2015 stated that South African government recognised ECD as a "fundamental and universal human right to which all young children are equally entitled without discrimination" (Republic of South Africa, 2015: 22). The South African Cabinet approved the NIP's comprehensive integrated package of ECD programmes for children aged up to seven years

(Ashley-Cooper et al., 2019). Also in 2015, the provincial Western Cape Government (WCG) emphasised ECD service implementation to enhance school readiness-related outcomes such as improved enrolment, retention and academic performance (City of Cape Town, 2015). However, the implementation of the NIP did not materialise (Ashley-Cooper et al., 2019). Despite all these consultative processes in developing policies and plans, pre-schooling, although acknowledged as an important constitutional right, continued to be disregarded (Biersteker, 2012).

The South African National Curriculum Framework (NCF) for children from Birth to Four was published in 2015, which provided a curriculum focus on SRP for children aged nought to four years (Ebrahim & Irvine, 2012; DBE, 2015). The NCF promotes viewing nought to four-year-old children as competent, capable (adults should value them in their present state) and living in diverse cultural contexts. It identifies three themes with 12 accompanying principles expressed from a child's viewpoint and prompts children to be competent, to view their learning and development as important and to emphasise the importance of strong connections with adults (Murris, 2019). The NCF was criticised for hinging on the westernised view of individualism and deliberately omitting to address ethical proportions of education (Ebrahim & Irvine, 2012; Murris, 2019).

Most recently, in April 2022, the DSD handed over the responsibility for the ECD sector to the DBE, with the minister of the DSD confirming that the idea mooted in the NDP of making two years of ECD compulsory before children enter the formal school system in Grade 1 would be implemented in 2024 (Zulu, 2022). This means that the government has now begun committing to taking direct responsibility for prioritising the education of children within the pre-Grade R (sometimes called Grade RR) phase.

#### 3.6 Conclusion

The concept of SRP is guided by set criteria for preschool children's development in areas of physical growth and motor skills, adequate socio-emotional skills, language ability and cognitive abilities. Strength in these developmental areas will determine a child's ability to cope in a formal schooling system. Long-term benefits of quality ECD for SRP have emerged in high-income countries and low-income countries (Bakken et al., 2017). Early psychosocial development was proved to enhance children's ability to display appropriate behaviours, establish relationships, interact socially and respond to stimuli in an emotionally mature manner (Mann et al., 2017).

Learning outcomes associated with cognitive development include exceeding standards in maths and sciences and reducing learning disabilities in the early years of schooling. Pre-school emotional development enables children to productively engage and collaborate with peers in school. The physical development of children's fine and gross motor skills is essential for children's stamina for schooling, while language and cognitive development allow a child to grasp and communicate learning concepts. The benefits accrued from the provision of quality ECD development in an enabling environment, especially for SRP, are universally accepted.

However, South African ECD centres in marginalised communities struggle with providing quality ECD and learning environments while being challenged by poor and inadequate infrastructure, lack of trained ECD centre principals, unskilled ECDPs, lack of quality ECD programmes, inadequate parental involvement due to poor parenting skills and lower SES, and funding problems. In essence, the improvement of SRP is underpinned by inclusive South African policies and legislation. The involvement of SRP in policies and legislation has seen a long journey over the years. Now that there is a framework and a designated state department focusing on early learning for children aged nought to four years it is envisaged that these mark the beginning of SRP prioritisation for this age group.

The next chapter provides a detailed explanation of the research methodology employed in this study.

http://etd.uwc.ac.za/

# CHAPTER FOUR: METHODOLOGY

#### 4.1 Introduction

This chapter details the overall research methodology applied in the study. The methodology elements will be described using the Standards for Reporting Qualitative Research (SRQR) (Rezaeian, 2019).

#### 4.2 **Research Design and Methodology/ Approach**

The researcher employed a qualitative methodology. The purpose of qualitative research is to comprehend the settings of individuals or groups and the circumstances in which their viewpoints or practices are situated (O'Brien et al., 2014). A qualitative approach was decided upon with the expectation that it would provide in-depth, explorative, descriptive data that cannot be captured quantitatively (Babbie & Mouton, 2001). Using a qualitative methodology is appropriate for detailing experiences, perceptions, opinions and attitudes that cannot easily be measured. Due to the small scale of this study, the researcher considered a qualitative methodology appropriate to better understand the perspectives, opinions and attitudes of the ECDPs and caregivers that would inform and assist in achieving the aim of the study, which was to determine what factors affect community-based ECD centres' school readiness preparation of pre-Grade R children in UNIVERSITY of the Gugulethu.

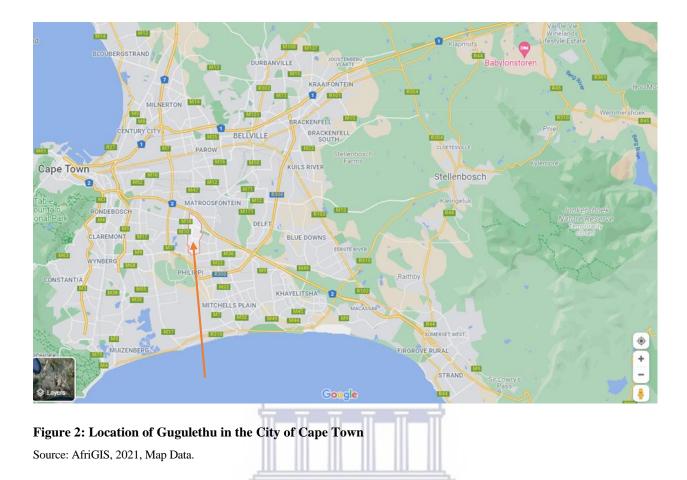
#### WESTERN CAPE 4.3 **Research Framework – SROR**

According to O'Brien et al. (2014), there is much debate about standards for methodological rigour in qualitative research, notwithstanding widespread agreement about the need for clear and complete reporting of data. Unlike quantitative research, qualitative research lacks widely used reporting standards. Hence, the SRQR, a list of 21 items or 'standards' considered essential for complete, transparent reporting of qualitative research, was developed to improve the transparency of all aspects of qualitative research by providing clear reporting guidelines (O'Brien et al., 2014). The research title, abstract, problem formulation and research question constitute the first four items (standards S1 to S4) in the SRQR as used at the beginning and first chapter of the study. The remainder of the study follows the SRQR sequence: Chapter 4 outlines the research design and methods of data collection and analysis (S5 to S15); Chapter 5 discusses and interprets the results obtained (S16 and S17) and Chapter 6 concludes the study by summarising the findings and considering their significance (S18) and limitations (S19). Standards 20 (conflict of interest) and 21 (funding) were considered irrelevant to this study and not followed (O'Brien et al., 2014).

## 4.3.1 Study contextual setting

This research investigated how ECD centres in the peri-urban community of Gugulethu (see Figure 2) apply and achieve SRP through ECDPs and parents/ caregivers. The motivation for selecting Gugulethu for this study was that it is one of the City of Cape Town's most underserved areas where the lowest learning outcomes have been reported (City of Cape Town, 2013). Gugulethu falls within the Ward 41 local government demarcation of the City of Cape Town metropole in the Western Cape province. According to the 2011 Census, it is home to about 25 000 people, with a median age of 28 years (City of Cape Town, 2013). The early learning to foundational age cohort of nought to nine years constitutes 19% of the total population of the community (City of Cape Town, 2015). Gugulethu is a generally poor community of low SES. About 15,4% of Gugulethu's population are informally housed in shacks (City of Cape Town, 2013). The average annual household income is reportedly R29 400 and the unemployment rate is 36,5% (City of Cape Town, 2013). Only 78,2% of the adult population in Gugulethu have attained Grade 9 and only 44,2% have completed Grade 12 (City of Cape Town, 2013).

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#### **Target groups**

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This mini-thesis's target is multifaceted. The thesis targets principals and practitioners working in community-based ECD centres, particularly those teaching children who are aged between nought and four years. This thesis also targets caregivers/ parents whose children aged nought to four years attend the targeted ECD centres. Children within this age range are known to be at a critical stage of overall development. During this time children's growth and development have to be nurtured to be able to cope later in school and further on in life. The rationale for selecting children in this age range is premised on an understanding that SRP does not begin in the year before enrolment in the school system. SRP begins in infancy and continues until reaching school-going age. The thesis also targets key informants. These are qualified personnel working to improve early learning in targeted ECD centres by either supporting centre registration or training practitioners.

#### 4.3.2 Sampling

A sample type is a strategy employed to select the study component while the sample size is the number of people selected per stakeholder group (Singh & Masuku, 2014). Due to the research study's academic requirements, costs and time constraints, the researcher selected a small sample of the population to be studied.

#### 4.3.2.1 Sample type and size for ECD facility observations

Simple random sampling was used to choose ECD facilities. Random sampling was used to manage the researcher's conscious or inclusion bias and also to provide a basis for estimates of population parameters and estimates of error (Babbie & Mouton, 2001: 176; Etikan & Bala, 2017).

Although there are no fixed rules for determining sample sizes for qualitative inquiry, the purpose of the study guided the sample size. The sample size, therefore, depended on the research questions, the study purpose, what information will be useful and credible, and practical issues of time and resources available to investigate the cases (Patton, 1990). Thus, since the study aimed to assess community-based ECD centres' experiences with SRP, it made sense to focus on examining in-depth the experiences of carefully selected ECD centres rather than gathering standardised data from a larger population. Patton (1990) argues that the diminishing return of collecting data from a larger sample in qualitative inquiry is saturation. This is the point at which the same information keeps coming up over and over again (Patton, 1990). The researcher received a list of 36 community-based ECD centres in Gugulethu from the DSD-appointed Gugulethu ECD centre coordinator<sup>11</sup>. From this list, the researcher allocated blindly drawn numbers to the facilities to select a sample of 12 ECD centres as the sample for the study. The researcher ensured that the selected ECD facilities were widely spaced by selecting a different number if a previous number was within 20 meters of the previous centre. This sample initially aimed to include four registered ECD centres, four unregistered ECD centres and four conditionally registered ECD centres (including two deregistered centres). The researcher sought to ensure some similarities in the contextual characteristics of all ECD centres to allow for comparison. The selected centres were contacted to confirm their availability and willingness to take part in the study. The inclusion criteria of the ECD centres in the study consisted of the following:

 $<sup>^{\</sup>rm 11}$  She is also responsible for coordination of the Gugulethu ECD Principals' Forum.

- Each ECD centre was a community centre serving children aged between nought and four years.
- Each ECD centre was physically located in the Gugulethu municipal area.

Table 2 below shows the original number and registration categories of the ECD centres known to the Gugulethu ECD centre coordinator. Table 3 shows the total number and registration categories of the researcher's final sample.

Table 2: Original Gugulethu community-based ECD centres sample frame

Centre	Registered	Unregistered	Deregistered	Conditional	
Туре				Registration	
Total	15	16	2	3	36

#### Table 3: Final sample

Centre type	Registered	Unregistered	Deregistered	Conditional registration	
Total	4	<sup>5</sup> UNIVE	<b>RSITY</b> of t	3	12
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Although no deregistered centres were in the final sample, there was a good balance between the other centre types, which was also reflected in the final selection of respondents, as shown below.

## 4.3.2.2 Sampling type and size for respondents

Purposive convenience sampling was used to choose a sample of respondents representative of all the stakeholders involved in the ECD centres (NGOs, principals, ECDPs, caregivers). This means that respondents were selected from within the target population, based on ease of access (Patton, 1990). This sampling is suitable where there is no sample frame available.

**Key informants:** Those working in ECD centre management who were also willing and available to take part in the study were targeted. A total of three key informants was selected: one official from the Early Learning Resource Unit (ELRU), which oversees operations and registrations of

ECD centres in the province, an ECD organisational programme coordinator from the Centre for Early Childhood Development (CECD) and a Gugulethu ECD centre coordinator. Selecting these ECD managers from different organisations was expected to enrich the range of perspectives obtained from respondents.

**Caregivers:** The researcher selected caregivers whose children receive early learning at the sampled ECD centres, to ensure that the data results pertained to the study purpose and objectives. The research targeted caregivers who could be accessed at the sampled ECD centres. Applying convenience sampling, the researcher approached the caregivers regarding the research and, on obtaining their consent, scheduled appointments to conduct group interviews at the relevant ECD centre.

**ECD centre principals and ECDPs**: Selecting of principals and ECDPs at the sampled ECD centres was purposive and convenient in that these principals and ECDPs were easily accessible at the ECD centres. Also, their responses could be triangulated for a better understanding of the dynamics and contexts at each centre.

#### **Total sample of respondents**



Table 4: Aggregation of the total sample of all respondents who took part in the study

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Facility Registration	Principals	Practitioners	Caregivers	Key	
Status				informants	
Registered	3	13	11	3	
Unregistered	4	5	16		
Conditionally registered	2	9	2		
Total	9	27	29	3	

In total, 68 people participated in the study.

#### Method of approach

Using the ECD centre sample frame list the researcher contacted the randomly selected ECD centres via telephone to invite the principals' participation in the study and gain permission for the researcher to visit the ECD centres. The first four ECD centres to confirm interest in each category were selected. The researcher and principal then agreed on a date when visiting would be

convenient for the centre and the staff. Centre observations would take place on the agreed date. During the call, the principals who consented were asked to convey the message to the ECDPs regarding the researcher's pending visit.

#### 4.4 Data Collection

This section covers the data collection methods used in the study including how the collected data was managed and analysed. Research limitations that were encountered during the study are recounted in section 4.6 of this chapter.

## 4.4.1 Data collection setting

The researcher visited the ECD centres whose principals had confirmed interest in participating in the study and explained the study purpose and process in detail before obtaining consent. The interviews with the ECD principals, the focus group discussion (FGD) with ECDPs responsible for children aged between nought and four years and group interviews with the caregivers all took place at their ECD centres. At each centre, after an interview with the principal was conducted, observations of the ECD facility followed, including an hour of lesson observation per class of children aged nought to four years. The FGDs with ECDPs had to occur during nap time to avoid interrupting the daily programme. Group discussions with caregivers took place when caregivers were available. In some cases, the centres organised the caregivers' group in advance while in other cases the research had to request parents' and caregivers' participation in the morning as they dropped off children, to return at a later time for the discussion. The researcher could not meet caregivers in their homes as that was prohibited by the COVID-19 regulations in force at the time of the study.

## 4.4.2 Data collection methods and instruments

The data was collected through five questionnaires (Appendices A to J are attached showing the interview and observation guides and letters of consent used in the study), namely:

- 1. Key informant interview guide.
- 2. Principal semi-structured interview (SSI) guide.
- 3. ECD practitioners FGD guide.
- 4. ECD facility and lesson observation guide.
- 5. Caregivers' FGD guide.

All the data collection instruments were designed to allow in-depth questioning by the researcher while also allowing some flexibility to obtain clarifications of information provided by respondents. The researcher ensured that the questions that would be answered by respective selected sample groups addressed the research objectives (see section 1.5.2) of the study. Table 5 below shows the alignment of key questions posed in the questionnaires and the research objectives (the asterisk indicates inclusion).

Research Objective	Research Question	Key informants' interview guide	Principals' interview guide	EDC practitioners' FGD guide	Caregivers' FGD guide	Observation guide
Determine how key elements of school readiness are incorporated in Gugulethu township community ECD teaching and learning, including factors affecting and/or enabling this incorporation.	<ol> <li>How are the key elements of school readiness (i.e. socio-emotional, physical, linguistic and cognitive development) incorporated into ECD teaching and learning?</li> <li>What are the enablers and/or barriers to incorporating school readiness in ECD teaching and learning?</li> </ol>	*	*	*	*	
Investigate the extent to which the Gugulethu community ECD centres' environment and infrastructure are conducive for the SRP of children aged 0—4 years.	<ol> <li>Which aspects of the ECD Centre set-up support SRP in children?</li> <li>How does ECD centre management promote SRP in areas of governance and management, professional skills development, and programme development?</li> </ol>	the PE	*	*		*
Ascertain how the registration process affects the ability of Gugulethu community-based ECD centres to function and support SRP for children aged 0—4 years.	4. How does the registration process affect the quality of community-based ECD centres' functioning in relation to SRP?	*	*		*	*
Investigate the extent of caregivers' knowledge, attitude to and practices of SRP.	5. To what extent are caregivers knowledgeable of the importance of supporting SRP and how to they currently exercise SRP? What enables or hinders caregivers' ability to support SRP?	*	*	*	*	
Recommend improvement measures necessary for strengthening Gugulethu community-based ECD centres for better SRP.	<ul> <li>6. What would be recommended as improvement measures necessary for strengthening SRP in community-based ECD centres in terms of:</li> <li>Policy changes;</li> <li>Professional development;</li> <li>Services integration and future research?</li> </ul>	*	*	*	*	

 Table 5: Research questions framework

**Key informant interviews (KIIs)**: Three separate interviews were conducted. One was with an official from the Early Learning Resource Unit (ELRU), which oversees operations and registrations of ECD centres in the province. The other two informants were an ECD organisational programme coordinator from the Centre for Early Childhood Development (CECD) and a Gugulethu ECD centre coordinator. ELRU and CECD are long-serving ECD research and training NGOs. These interviews explored their understanding of SRP incorporation in early learning, and governmental expectations in areas of teaching, learning, facility set-up and facility management. KIIs also shed light on the impact of ECD centre registration on SRP. The extent of parental involvement in SRP and recommendations for strengthening ECD centres for SRP were also covered in the KII guide (see Appendix F).

**ECD principal interviews:** Questions were posed to the ECD principals related to ECD centre management, finances, parental involvement and the impact of the ECD policies of the government. The application of open-ended questions in individual interviews and FGDs contributed to clarifying the research focus and exploration of broad topics. The principal's interview guide sought to capture data on how school readiness is incorporated in the ECD centres, how the management of the facility promotes school readiness, attitudes to parental involvement and recommendations for improving ECD centres' SRP (see Appendix G).

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**ECD practitioners' FGDs:** FGDs have been acknowledged as an efficient means of collecting data from multiple sources (Kothari, 2004). FGDs proved to be a resourceful, interactive way of collecting information that allowed ECDPs to collectively reflect on their work. The content covered by the ECDP interview guide is similar to that of the principal's guide (see Appendix H).

Lesson and facility observations: Non-participant observations using structured observation guides were conducted at each of the ECD centres in the study. Aspects of the Quality of Early Childhood Care Tool (QUEST) (Goodson, Layzer & Layzer, 2005) and the DSD norms and standards for ECD centres were considered to develop an observation guide for case study observations. The study, therefore, incorporated aspects that align with the contexts of DSD norms and standards for ECD operations. The observer compiled analytical observation reports backed up with examples instead of just providing scale ratings. The main objective of this method was to reduce or eliminate subjective bias within the study (Kothari, 2004). The researcher observed the interior and exterior environments of the ECD centres and the children's programme from

commencement at 09:00 to when they took their break for lunch at 12:00. An hour-long observation of pre-schoolers interacting with their ECDPs during lessons was included in each of these observation periods (see Appendix J).

Observation measures are the most popularly used forms of assessment in ECD and a long list of assessment tools has been devised to gauge quality in early childhood care and education settings (Halle, Vick Whitaker & Anderson, 2010). To achieve a full explorative effect, the researcher treated each ECD centre as a unique unit bearing its own experiences. In compiling the facility questionnaires, the researcher drew on the 2014 nationwide audit of ECD centres (DSD, 2014) and the Western Cape 2009 Audit of ECD Quality (DSD, 2010) as guidelines as the audits shared somewhat similar mandates to this research study, although different in scope, of investigating the state of ECD facilities as well as their quality.

**Group interview guide with caregivers:** Group interviews were conducted to enable the study to compile research data with insight into how ECD centres engage with caregivers of children attending ECD centres. Caregivers' interviews sought to reveal their perceptions of ECD centre incorporation of SRP, understanding of parental roles in SRP and recommendations for improvement of SRP by ECD centres. Based on the known demographic profile of Gugulethu, the researcher decided that caregivers would be comfortable communicating in isiXhosa and an isiXhosa FGD guide was made available (see Appendix I for the English version).

#### 4.4.3 Data capturing and storage

Once informed written consent forms were signed by participants, audio recordings were used for data collection in interviews and FGDs. Photographs that were taken during the centre observations were then anonymised and included in the observation reports. Soon after the interviews were completed, the researcher listened to the audio recordings to ensure quality. To ensure safe and ethical management of the data, recordings were transferred to a password-protected Google Drive file immediately after the interviews and FGDs.

## 4.4.4 Data analysis

Data was translated into English and transcribed into interview notes. Transcripts were imported into NVIVO12, which allowed for the analysis of multiple documents simultaneously. Codes were created to identify common themes, patterns and relationships. A codebook was created to begin

the coding process by selecting words and phrases that have meaning and assigning them labels. These codes were then further grouped into categories and then into major themes. Additionally, observation reports were compiled based on data contained in the observation instruments. A final compilation of all collected data or findings, including comparisons of recordings and document reviews, was linked, identifying key concepts from theoretical frameworks. Research questions from the interview guides and observation tools were used to formulate theoretical frameworks to allow for the easy flow of the data analysis process. Recommendations for future study areas also formed part of the final report.

#### 4.4.5 Rigour

The process of triangulation of data sourcing methods – namely interviews, secondary data and observations – allowed for in-depth data collection and strengthened the validity of the study, which cannot be achieved by using only one data collection method. Qualitative research does not allow for the generalisation of findings because it is context-specific. The themes that emerged from this study may be transferrable with the provision of a thick and rich description of the research context as a reflection of how this relates to literature (Mays & Pope, 2000). This study's small sample size restricts the extent of transferability. However, despite this limitation, the triangulated results that developed from this study do provide some understanding that could be applied to similar contexts.

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## 4.5 Ethical Considerations

Ethical approval for the research was sought from the University of Western Cape (UWC) and the DSD before proceeding with the research. Research committees of both UWC and DSD gave written approval to conduct the research: the DSD's approval was received in July 2019 and UWC's in September 2019.

All key informants, ECD principals, ECDPs and caregivers provided written informed consent to participate in the study after being informed in writing of the background and purpose of the study (see Appendices A to E). The signed informed consent forms were obtained before the researcher conducted the interviews and observations. Participants willingly consented to take part in the study as their ECD area coordinator had alerted them beforehand about the researcher's arrival. Participation was voluntary. The participants were alerted to the fact that they were free to withdraw from the study at any time without penalty. Participants were assured of confidentiality

as outlined in the participant information sheet. The exploration of ECD centres was not a controversial or sensitive topic and did not result in any known trauma or harm to the participants. Interviews and observations were conducted at the ECD centre premises at intervals such as break time and lunch time; thus, no disruptions were incurred by the ECD programmes.

**COVID-19 regulations:** COVID-19 protocols were adhered to and the researcher provided participants with face masks and hand sanitisers. For face-to-face engagements, a well-ventilated venue was selected while maintaining a safe physical distance. In addition, upon arrival, the researcher asked each ECD principal if there were any specific safety or hygiene measures to adhere to while on the premises.

#### 4.6 Research Limitations

This mini-thesis's initial data collection process commenced in 2019 under the supervision of a professor who later resigned from the university and relocated to a different province. Without adequate support from the initial supervisor, the researcher gathered data from a very small sample, which the examiners deemed insufficient to support an acceptable mini-thesis submission. Supplementation of data to allow for a detailed picture of the ECD context in Gugulethu could only be undertaken in the 2020—2021 academic year due to the COVID-19 pandemic debut in the year 2020 that disrupted access to ECD centres.

The research sample was obtained from a list of ECD centres whose principals were members of the Gugulethu ECD Principals' Forum. This excluded many ECD centres in the Gugulethu community from being considered for sampling, although the research sample would still have been small. It is possible that a larger or more wide-ranging sample could have amended the picture obtained of the community contextual situation. Another factor influencing selection was that most of the unregistered centres were not reachable at the contact numbers available, excluding them from possible selection for the study.

#### 4.7 Conclusion

This chapter discussed the qualitative methodology employed in the study, which gathered and analysed primary data to respond to the research question. The data collected from ECD facilities and caregivers through in-depth interviews, observations and focus group discussions, as well as the information provided by key informants, provided rich data to inform the findings and conclusions discussed in the next chapter of the mini-thesis.



# **CHAPTER FIVE: DISCUSSION OF FINDINGS**

#### 5.1 Introduction

This chapter discusses the findings of the study on the factors affecting SRP in the context of ECD centres in Gugulethu, including examining the extent to which key elements of school readiness are incorporated in community-based ECD centres, factors influencing SRP such as the role played by parental involvement and measures to improve SRP. The findings are drawn from the data collected (see samples of the data collection tools in Appendices F to J). It is noteworthy that while the principals responded in the context of their roles and on behalf of the entire ECD facility, particularly regarding questions related to the general facility administration, management, registration and supporting ECDPs' teaching in the classroom, the ECDPs responded in relation to their direct work with children in the classrooms, and the caregivers responded in relation to the extent that the ECD centres involved them in their children's learning. The observations assisted the study to draw conclusions about the operation of ECD facilities and useful glimpses of ECDPs' teaching styles and class management.

#### 5.2 Incorporation of key elements of SRP in ECD learning

#### 5.2.1 Understanding of SRP

The key informants in this study indicated that the implementation of the NCF has not been enforced adequately. In this study, only three principals mentioned awareness and use of the NCF and NELDS in their ECD work. Since these documents form the basis of ECD and early learning policy it was expected that ECDPs would be aware of how they are pertinent for SRP. The concept of SRP as a multidimensional construct contributing to children's ability to cope in school (Bruwer et al., 2014) was well understood mostly by the key informants, all principals and a few ECDPs (n=7/25) across the ECD centres. Key informants and principals understood that SRP occurs in key areas of physical, social, emotional, language and intellectual preparation (as can be seen in the responses quoted below).

Stimulation of a child happens emotionally, physically...intellectually and socially. Those are the four areas in which children have to be stimulated if we want the child to prosper later on in school. – Key informant, interview.

The child must be well developed mentally, emotionally, physically, socially and you can see this development when the child is playing with educational toys...we observe how they play with building blocks, pretend kitchen and other knowledge, for example, if they know which tools are used by a nurse. – Principal, Facility 9 (registered), interview.

What we do here, we develop children holistically – Principal, Facility 3 (conditionally registered), interview.

School readiness include being able to follow a routine, children ought to know how to differentiate play time from serious activity time. Following instructions. They have to learn to respect others and know their social boundaries when interacting with others. Language development is important because children should be able to pronounce words correctly and that way, they are able to stand in front of other and speak with confidence. It's important to teach children English because it is spoken world-wide and it's easy for a child to be fluent in their mother tongue so being multilingual is important as well. – Principal, Facility 11 (unregistered), interview.

The child must know primary colours, their name, address of residence and parents' names and contact numbers, may know the name of practitioners. The child must be developed physically, socially, emotionally. – Principal, Facility 12 (conditionally registered), interview.

A school-ready child knows how to differentiate the colours, understand working and correct pronunciation of basic language in English and Xhosa, child must know his/her clan name because they have to know their heritage. – Principal, Facility 22 (unregistered), interview.

A child may know how to speak, greeting and interact with other in peace and be accountable when they do something wrong. – Principal, Facility 23 (unregistered), interview.

These views align with those of De Witt et al. (2020) who deemed these SRP areas of development as necessary for a child to adequately cope in a school environment. Conversely, although most ECDPs (n = 18/25) exhibited an understanding of different areas of development to ensure holistic development in a favourable environment, they did not link class activity to SRP. The ECDPs' views on their SRP work concur with those found by Jules-Macquet (2016) in his study of ECD centres recognised as foundational learning platforms. The differences in comprehension of SRP between principals and ECDPs show that communication of the long-term vision of ECD has not filtered down to centre activities with children and may indicate that the NELDs standards have not been well enough enforced in ECD to enable a wider understanding of linkages between ECD and SRP. This is particularly so for principals and ECDPs working in unregistered centres where it appeared that principals and ECDPs are more focused on cognitive development as a key area of SRP and that they viewed readiness to learn as a key factor of SRP. The ability of principals and EDPs of fully and conditionally registered centres to focus on holistic development (i.e. specific use of the terms mental, emotional, physical and social development) shows that they are more knowledgeable about the concept of SRP than their counterparts working in unregistered centres. This is possibly because unlike those from unregistered centres, principals and ECPs from fully and conditionally registered centres have access to the ECD training workshops of the DSD. As such, the benefits of registration do seem to contribute to the understanding and execution of SRP within the centres.

Regarding when SRP should be employed, only a few principals (n=2) and ECDPs (n=8) concurred on an early start of SRP, that is, before the age of four years.

Our school readiness preparation begins from the nought to two years group because children learn from what they see and manipulate object, nothing comes from the minds on its own. -Principal, Facility 11 (unregistered), interview.

So the early learning start with the one to two years and increases with age groups. – Practitioner, Facility 3 (conditionally registered), focus group discussion.

I work with 0 to 18 months children and in my class, I teach them to count from 0 to 5. I let them scribble on papers so that they know how to grasp crayons for writing. If we are painting, I let them finger paint, so that when they go to the next class they know the basics, even if they can't talk yet I sing to them so that they know songs and try to sing - that way improving their language. – Practitioner, Facility 12 (conditionally registered), focus group discussion.

So when they arrive to the two-year class I teach them to sing, painting, singing, talking, eat on their own. Teach them how to share. So they learn from observing. So, our teaching system is to develop what was done in the previous class so adding more complexity as the years progress so if the previous teacher taught counting from 1 to 5 the next teacher adds on teaching from 6 to 10. – Practitioner, Facility 12 (conditionally registered), focus group discussion.

These respondents' understanding aligns with the theories of Froebel, Erikson, Vygotsky and Piaget and the postulation that learning in the first 1 000 days of human life is sustained through

social interaction (Biersteker, 2012). Therefore, allowing children exposure to early interaction in a preschool setting increases their future ability to cope with schooling. Contextual influence could be the reason that the majority of respondents didn't mention the importance of early SRP. In the South African context, early exposure to SRP has had a slow progression. A key informant indicated that the South African ECD sector only recently had a transitional shift from beginning SRP at the reception year (Grade R) to now including nought to four-year-old children. Research has proven that preparing children for schooling only at the onset of the reception year is inadequate (De Witt et al., 2020; Wesley & Buysse, 2003). With the oversight of the ECD sector shifting from the DSD to the DBE, it is anticipated that this will be accompanied by an emphasis on SRP to start before the age of four years.

Among the practitioners and ECDPs who indicated an understanding of the importance of early SPR, a peculiar difference in understanding was noted. While the principal from an unregistered centre seemed to understand that SRP should start before the age of one, there was no elaboration offered revealing an understanding of the long-term benefits of this. EDPs from fully and conditionally registered centres exhibited an understanding that starting SRP earlier strengthened children's readiness for school in the upcoming years. This suggests shows that conditionally and fully registered ECDPs have been better trained and supported in grasping the concepts of SRP.

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The study probed further to gain an understanding of how respondents understood their implementation of the SRP.

## 5.2.2 Implementation of SRP in five key developmental areas

**Preparation for physical readiness**: Regarding how children were prepared for schooling in the developmental area of physical abilities, most ECDPs (n=25/27) understood physical development. ECDPs indicated that they developed children's fine motor skills using activities such as finger painting and correct grasping of crayons and pencils to prepare children for writing skills. Children's readiness to learn requires physical wellbeing and adequate energy levels which are usually promoted through both gross and fine motor skills development (Sherry & Draper, 2013). ECDPs also understood that motor skills development should begin from infancy by allowing children to hold objects of different sizes. Body movement and naming body parts in class or outdoor play activities were also mentioned by ECDPs as ways to enhance physical abilities. ECDPs also understood the importance of children's physical autonomy in SRP, such as

learning to eat and dress on their own and potty/ toilet training. The NELDS' desired results for physical development (results 2 and 6) are that "children are becoming more aware of themselves as individuals, developing a positive self-image and learning how to manage their own behaviour" and "children begin to demonstrate physical and motor abilities and an understanding of a healthy lifestyle" (DBE, 2009). It appears that the ECDPs' work with children mainly aims to achieve these desired results.

The study observed some differences in how physical development was practically incorporated by centres. The fully and conditionally registered centres had resources such as spacious playgrounds, designated eating areas and age-appropriate potties. These allowed for better physical development whereas physical space and resources were more limited in unregistered centres. Evidently, the quality of exercising physical development was affected by centres' variations in available resources as the subsidies received following registration contributed to better SRP.

Preparation for social readiness: The NELDS' desired results for social development (results 2, 3 and 4) state that "children should know how to manage their own behaviour", "children demonstrate growing awareness of diversity and the need to respect and care for others" and "children are learning to communicate effectively and use language". Most ECDPs (n = 25/27) and principals (n=8/9) across the ECD centres understood that preparing children for social development meant teaching them how to interact with one another and with adults. ECDPs and principals taught children their 'place' in their society to instil a sense of belonging. In one ECD centre, children were taught to know their cultural heritage from an early age. Regarding interaction with each other, children were taught to share resources, not to engage in physical fights, to be accountable for unacceptable behaviour and to be respectful of social boundaries. One principal also mentioned teaching children social safety – that children should not talk to strangers. Children were taught to be respectful. Principals and ECDPs recognised the importance of instilling self-confidence to encourage positive interactions. Munnik and Smith (2019) found that children's social competence encouraged behaviour control and cooperation with teachers and peers and that these skills are important in school later. ECDPs and principals also taught children to differentiate between play time and serious activity time. This would assist children to know how to interact in different settings. Compliance with rules, interpersonal skills and pro-social behaviour are attributes indicating school readiness (Bruwer et al., 2014; Mohamed, 2013, in

Munnik et al., 2021). Based on the findings, community-based ECDPs and principals across ECD centres do teach basic social interactions that will benefit children in a school setting.

**Preparing children for emotional readiness**: The abilities to regulate and express emotions are school readiness attributes (Bruwer et al., 2014; Ștefan et al., 2021). A key informant confirmed that ECDPs are meant to ensure that children are emotionally ready to cope in a schooling environment. ECDPs should also make referrals of emotionally distressed children to social, health and adult education authorities (Biersteker et al., 2016). However, the incorporation of emotional readiness in ECD learning was minimal in most of the ECD centres observed. From observations, it appeared that most respondents across centres did not know how to respond to or address the emotions of distressed children. Very few principals (n=3/9) and ECDPs (n=7/27) from fully/conditionally registered centres understood and incorporated emotional development in preschooling. One ECDP of a conditionally registered centre used a game to allow children to easily identify emotions and encouraged children to share their feelings in class. A few ECDPs (n=5/27), a principal and a key informant also recognised the value of understanding a child's home psychosocial situation to better assist the child's emotional wellbeing.

The NELDS's desired results for emotional development call for children to learn to express emotions and to respond to those of others. Secondly, children should learn to regulate themselves and follow routines. From the findings, it appears that emotional wellbeing and regulation are incorporated in very few of the community-based ECD centres, namely the fully or conditionally registered ones. This shows that the knowledge and skills for addressing emotional wellbeing are accessible to those who are better supported with training in their practice. This indicates cause for concern for holistic SRP for children in unregistered centres, especially as Bruwer et al. (2014) indicated a correlation between insufficient emotional readiness at school entry and learners' inability to limit troublesome behaviour or to keep up with curriculum requirements.

**Preparing children for language development**: According to the NELDS, the desired results for language development (result S4) are that "children learn to communicate effectively and use language" (DBE, 2009). Most principals (n=8/9) and ECDPs (n=26/27) indicated practising language development with children of all ages in their ECD centres. The dominant language used was isiXhosa, which is the mother tongue of most people in Gugulethu, but ECDPs also taught English and Afrikaans, languages spoken at nearby schools where children were likely to enrol.

The focus on the mother tongue first and then adding additional languages is emphasised in the NELDS (DBE, 2009) as being important for teaching children new concepts. Language acquisition is best taught through speech, singing, reading and listening, letter naming, writing and simple verbal sentence construction (DBE, 2009; De Witt et al., 2020; Zuilkowski et al., 2012).

This study found that children were taught the pronunciation of words, starting with their names and surnames. The ability to pronounce words correctly was also linked with developing confidence and improving interaction. For some ECDPs (n=15/27), having children socialise in a class setting or playing outdoors was also beneficial for their language development through interaction. It was observed that ECDPs used singing, storytelling, reciting, vowels, number sequences, the alphabet, days of the week and reciting the names of the months of the year as other forms of teaching language. Some caregivers (n=11/19), particularly of children attending fully/ conditionally registered centres were impressed with their children speaking English words at home. To some extent, ECDPs seem to be achieving language development. The researcher observed that there were a few unskilled ECDPs in unregistered centres who hardly conversed with children in class, resulting in children finding it difficult to express themselves. Vygotsky postulates that children learn from interacting, therefore the failure of these ECDPs to inculcate fundamental language skills could have dire effects on how the children interact later in school (Smolucha & Smolucha, 2021). Unregistered centres seem to employ unqualified ECDPs, which affects the quality of work done with the children. Thus, how ECDPs are able to engage with children in terms of the quality of SRP seems to correlate somewhat with the differences in their centres' registration status.

**Preparing children for cognitive development:** According to the NELDS (DBE, 2009), the desired results (1 and 5) for cognitive development are that "children are learning how to think critically, solve problems and form concepts" and "children are learning about mathematical concepts". This study shows that cognitive development in line with the NELDS was largely taught to children. Most ECDPs (n=20/27) and principals (n=8/9) across the ECD centres understood cognitive skills preparation to be teaching basic concepts of mathematics and science. Children between ages three and four years were taught to recognise numbers and use objects to match quantities, and to identify primary colours during painting activities:

We teach them how to...identify colours, counting and dividing, how to identify parts of their bodies. – Practitioner, Facility 8 (unregistered), focus group discussion.

I teach them how to count – four-year-old even count up to 100 forward and backward – Practitioner, Facility 3 (conditionally registered), focus group discussion.

We teach them maths, reading, they can count up to ten because when they go to school, they should at least know how to count to ten, their names ...they should know colours and basic shapes, they also know how to fix an appropriate puzzle. – Principal, Facility 3 (conditionally registered), focus group discussion.

...numeracy we teach them to count, identifying key shapes (circle, triangle, rectangle and circle) ...So here they leave with the knowledge of identifying letter that make up their names and they are starting to learn how to write their names and basic numbers even though it not perfect writing but they will have a basic understanding. – Practitioner, Facility 9 (registered), focus group discussion.

ECDPs also considered children's age in their cognitive development. For example, children below the age of two years were taught to count up to five but counted up to 100 by the age of four years. It appeared that the main aspect of developing intellectual abilities was to focus on inculcating the ability to retain learnt information. ECDPs ensure this through the repetition of rhymes, the alphabet and basic mathematics. Children were taught to build on their skills in identifying the letters of their names before they were taught to write. Some ECDPs were observed using questions to incite children's thinking instead of providing answers and solutions. While most ECD centres practice cognitive development, it is more prominent for older children than it is for those below the age of two years. This was mainly due to available resources or ECDPs' understanding of SRP. Piaget theorised that cognitive abilities begin in the sensorimotor stage within the first two years of a child's life (Patterson, 2021). Very few ECDPs seemed aware of this concept as, in most centres, children in this age group were prevented from exploring their environments. Bierman et al. (2008) argue that learners' academic knowledge due to exposure to early stimulation and/or instruction in a preschool is important for school readiness. If children are only allowed to explore and problem-solve when they are older or about to transition into school, it's questionable how potent their cognitive abilities will be at the school level. In relation to the capability theory, the short-term lack of capability sets that children in unregistered centres seem

to suffer due to the inadequate functioning of their unskilled ECDPs could have negative effects on their freedom to live a desired well-rounded quality of life in the long run.

Having gained an understanding of how key school readiness developmental areas are addressed and incorporated into teaching and learning, the study explored factors that enable or discourage SRP incorporation.

# 5.2.3 Factors influencing implementation of SRP in the five key developmental areas

According to the South African ECD policy guidelines, quality ECCE is mainly determined by the structural and process quality inputs such as 'physical infrastructure, learning programme, group size, teacher-child ratio, the presence of developmentally appropriate education equipment, materials and resources, governance and financial management' (Atmore, 2019: 29). This study found that principals' and ECDPs' ability to incorporate the five key developmental areas of SRP in their work is highly determined by the following factors:

- 1. ECDPs' training and expertise.
- 2. Resourcing and collaboration.
- 3. Human resources.
- 4. Infrastructural conduciveness for SRP.
- 5. ECD centre facility management. VERSITY of the
- 6. ECD centre facility registration. **TERN CAPE**

# 5.2.3.1 ECDPs' training – expertise and competence

Training determines how well SRP is incorporated in ECD (Chandra, 2021). According to the ECD centres coordinator, ECDPs in the Gugulethu community can access NELDS curriculum training provided by NGOs such as ELRU and Grassroots Educare Trust. ECD qualifications can be obtained at different National Qualification Framework (NQF) levels at TVET colleges. ECDPs with at least an NQF level 4 qualification are considered equipped for the entry-level of teaching ECD (DSD & UNICEF, 2006). The sector standard for full qualification is NQF level 6, which is a diploma in ECD (a bachelor's degree is level 7). The wide availability of training facilities may lead to an assumption that ECD staff are qualified. However, a considerable number (n=15/27) of the ECDPs in the study teaching children aged between nought and three years did not have the minimum required NQF level 1 ECD qualification to be an assistant. Some (n=10/27) had been on the waiting list for enrolment in TVET courses for years. ECDPs of children aged nought to two

years old in unregistered centres did not know that the basic qualification was a prerequisite to practice. ECD teacher training that is less intensive, low-dosed, delayed or mono-systemic is less effective (Van der Walt et al., 2014). Yet, most unqualified ECDPs (n=15/27) relied on ad hoc unaccredited workshops provided by ELRU, the DSD and Grassroots, which only a few ECDPs could access as it was not always possible to leave their centres to attend training.

How effective ECDPs are in being able to deliver SRP techniques is questionable. In observations, ECDPs teaching children aged nought to two years across the ECD centres did not exhibit teaching fundamentals such as the importance of allowing independent learning through play (that is, informal play) (Zosh et al., 2017). The evidence from this study supports that of Aronstam and Braund (2015) regarding unskilled ECDPs' understanding of the importance of play, a concern in terms of the perspectives of Piaget and Vygotsky who saw play as an opportunity to contract knowledge. Gaps in training and in practice call into question how well the ECDPs across centres are trained in the NELDS curriculum to ensure that SRP progressively occurs at each developmental stage.

ECDPs' ability to deliver successful and holistic programmes varied, depending on their expertise. Although many ECDPs (n=13/27) expressed having passion and caring for children, very few displayed better teaching techniques. For example, only two ECDPs teaching four-year-old children mentioned conducting weekly lesson planning. Some ECDPs (n=15/27) either had toys they did not know what to do with or did not realise they did not have enough materials. In another centre, an untrained ECDP mispronounced words, teaching children to say 'vege' instead of vegetable and 'cappage' instead of cabbage. By contrast, a well-trained ECDP of three to fouryear-old children conducted a very engaging and interactive class, giving clear instructions and guidance. In comparison, her unqualified colleague did not engage with her nought to two-yearold children. The study finding is corroborated by Van der Walt et al. (2014) who indicate that South African ECD centres with less committed and less supportive relevant training and mentoring processes struggle to implement effective early learning methods. This further confirms that teaching qualification influences teaching practices (Singh & Sarkar, 2015).

The ECDPs' inadequate qualifications, struggles to enrol in higher education institutions and lack of support to attain proper qualifications are an evident threat to ECD human capacity at community ECD centres in Gugulethu. ECDPs' inability to execute holistic SRP due to the lack of skilling support means that children in these centres are poorly prepared for school. Although training workshops serve as short-term alternatives for knowledge skills attainment, these are not available to all practitioners due to varied affordability and inconsistent provision. This means that only a few registered centres have access to training workshops and holistic SRP is not properly implemented for the majority of children in ECD centres. This also means that ECDPs miss out on updates on new development and trends within the education system. As such their work is not synergised with schooling requirements, thereby impacting children's access to proper preparation for schooling.

#### 5.2.3.2 Resourcing

### **Teaching and learning materials**

Teaching and learning materials enable ECDPs to deliver SRP approaches (Aina & Bipath, 2022; Atmore et al., 2012). Delivery of ECD programmes highly depends on available quality equipment in the form of furniture, learning equipment, toys, books and posters (Aina & Bipath, 2022; Van der Walt et al., 2014). From the study, toys, playdough, pencils, crayons, counters and tracing books to teach writing skills were identified as useful for teaching older children, with a focus on SRP. Most of the ECD centres were equipped with age-appropriate furniture in the form of small tables, small chairs and small toilets and potties. In some centres, however, piles of age-appropriate chairs were unused due to a lack of space. The classrooms were mainly set up with tables and chairs for four-year-old children. The availability, quality and adequacy of materials varied across the centres. In addition to a lack of donations and sponsorships, burglaries and thefts were other reasons for shortages of materials in some ECD centres (n=5/12). It was evident that ECD centres struggled to replace stolen materials:

We operate in a poverty-stricken community where people will do anything to get by so every month our ECD centres encounter burglaries they take learning materials to sell at scrapyards and we have to start looking for ways to replace those materials again. – ECD coordinator.

We get burglaries every week and I have to use money to repair every time there is breakage, police always take forensic evidence but nothing gets solves. Even parent see how I endure this trouble because I love looking after children. – Principal, Facility 31 (registered), interview.

Learning materials...they stole it. We used to have a projector for the children but it was stolen. So, we do not feel like we are progressing, we try to make it nice for the children but the burglaries won't stop. – Principal, Facility 3 (conditionally unregistered), focus group discussion.

Lack of resources due burglaries. We don't have a printer to produce material for activities we must use our own money. – Practitioner, Facility 31 (registered), focus group discussion.

Burglaries - the toys, learning material, furniture, the alarm system, electricity box they stole them all – Practitioner, Facility 31 (registered), focus group discussion.

These constant burglaries we are always seeking ways to fix the facility after a burglary...the caregivers are now tired of these constants of burglaries now they take their children to other preschools We wanted to close the facility some years back but the caregiver begged up to remain open. – Practitioner, Facility 8 (unregistered), focus group discussion.

Although a key informant indicated that centres in Gugulethu did not have challenges with learning materials, the study gathered that several ECD centres (n=7/12) used old and outdated materials. Most books used were about seven years old except at two ECD centres whose principals' secured sponsorships from a private company and Montessori Centre South Africa respectively. Although toys were available in classes, these were either too few to share among large class numbers or they were old and broken. ECD centres in the study prioritised their allocation of materials among the children. Thus, all the ECD centres (n=12/12) allocated their best materials to the classes of children aged between four and five years, while the children aged below three years used the poorest of the available materials. This indicates less prioritisation of SRP for the younger age groups. Limited educational resources in ECD centres may negatively influence SRP as the delivery of ECD programmes highly depends on the availability of quality materials (Mbarathi et al., 2016). Participants expressed how a lack of resources stifles quality early teaching and learning.

The DBE provided the curriculum; without the resources we cannot prepare children for schooling. We need boards, chalks, books that children can take home for practice because handling homework will be a common practice in school. – Principal, (conditionally registered), interview.

The materials and books we have were published seven years ago and we don't have edited versions so we work with outdated content. We don't have any guiding material that helps us plan for the year so that we know that by the end of the year what should we have taught the children so we are left to do our own research on what to do with the children. – Practitioner, Facility 5 (registered), focus group discussion.

We are not equipped to work with special needs children, the only thing we can do is to include those children so that they can at least have that classroom experience. – Practitioner, Facility 22 (unregistered), focus group discussion.

Resources we use and the curriculum because the CAPS curriculum, we get the curriculum from the DBE, we use is the same they are going to use at school. But the problem is the resources we have here are limited unlike at the school they will have all the books that we don't have here for each and every child. Also, at the school they are given books to take home and practice home so here we only practice at the crèche. DBE only give us the curriculum not resources. – Principal, Facility 3 (conditionally registered), focus group discussion.

Kotzé (2015) indicated that one in every five centres in the Western Cape lacks basic learning and teaching support materials. The South African ECD centres audit indicated that the lack of resources was a major gap in most registered facilities (DSD, 2014). From these findings, it appears that community-based ECD centres still struggle with a lack of quality educational materials, which affects quality SRP. Although the DBE has supported synergy between pre-school teaching and Foundational Phase teaching through the provision of the curriculum, the use of this curriculum is significantly affected by the lack of adequate resources.

## 5.2.3.3 Inadequate human capacity

The smaller the children's group size and the lower the ECDP-to-learner ratio, the higher the enhancement of children's development (Biersteker et al., 2016; Biersteker & Kvalsvig, 2007). The DSD-set standard for the teacher-class ratio is 1:20 children per class for ages 3—4 years and 1:30 for 5—6 years (Atmore, 2013). This study recorded an average ECDP-to-child ratio of 1:26 across all age groups, which is close to the DSD-required standard for Grade R (Atmore, 2013). This ratio is fairly high considering that this study was conducted during school holidays when older siblings are assigned duties to look after the children, reducing attendance of children at ECD centres. Also, the study occurred during the COVID-19 pandemic when most parents weren't working and were keeping their children at home.

High ECDP-to-child ratios are proof of inadequate numbers of ECDPs and a lack of support that make it difficult for ECDPs to adequately teach. The majority (n=20/27) of the ECDPs did not have assistants or volunteers. Observations of class lessons revealed a lack of class management skills when dealing with an oversized class. Tasks depicted on the daily schedules weren't followed accordingly as ECDPs struggled with supervising and maintaining the order of large groups of unruly children. Having to attend to large groups of children reduces ECDPs' attention to individuals, such that they may miss children's specific school readiness needs. Moreover, ECDPs are more likely to burn out leading to poor school preparation (Moodley, 2001).

#### 5.2.3.4 Infrastructural conduciveness for SRP

**ECD facility set-up (outdoors and indoors) for SRP:** To ensure that infrastructural quality meets governmental standards, the DSD conducts structure assessments of ECD facilities. Quality assessments include ensuring that the facility accommodates the desired number of children that corresponds to the size of the facility. The DSD also assesses the safety and strength of the facility building structures (DSD, 2006). Respondents' considerations of what constitutes an SRP-conducive ECD centre tallied with what the DSD assessment asserts. The study explored the outside and inside environments in relation to preparing children for school readiness. The outside space was assessed in terms of safety, space, equipment and hygiene. The main finding was that all the centres, regardless of their registration status, did not meet all the infrastructural requirements for indoor and outdoor spaces. This finding concurred with Aina and Bipath (2022), Ashley-Cooper et al. (2019) and Baloyi and Makhubele (2018), who found that South African ECD facilities in townships still function without proper infrastructure.

Most buildings serving as ECD facilities were dilapidated and unsecured by a strong safety fence, echoing the 2010 study by the DBE, DSD and UNICEF that reported that children in the poorest quintiles attend ECD centres with unsafe infrastructure (DBE, DSD & UNICEF, 2010). Attempts to secure the facilities have been unsustainable. For example, one centre was surrounded by a high brick wall and at one point installed an alarm system which was later broken by burglars and remained so. As such, their equipment and resources were not safe. It appeared that ECD centres located in brick structures were more prone to burglaries than those located in informal structures.

**Outdoor play space:** Outdoor play equipment enhances physical, social and cognitive development as it is used to engage young children in developmental and learning activities such

as balancing, throwing, lifting, climbing, pushing, pulling, crawling, skipping, swinging and riding – hence, improving the quality of ECCE (Aina & Bipath, 2022). Moreover, schools have playgrounds that assist children to get used to playing outside (Sherry & Draper, 2013). Very few (n=2/12) ECD centres located in the informal settlements included in the study had a functional outdoor space for play. Most (n=10/12) of the ECD centres had limited space for outdoor play and seemed overcrowded. Very few ECD centres' outdoor areas were equipped with outdoor play equipment such as jungle gyms for older children, plastic bikes, hula-hoops and slides. While Van der Walt et al. (2014) found ECD centres seem to function quite well despite operating from confined spaces, Aina and Bipath (2022) and Sherry and Draper (2013) argue that lack of outside play can be restrictive to growth and can later lead to poor academic progress, social and behavioural problems.

ECD facility indoor environment: Separation of children by age groups is a governmental requirement to assist ECDPs to ensure that children achieve desired developmental milestones for different ages (Ansari et al., 2016; DSD & UNICEF, 2006). Moreover, grouping children by age groups prepares them for the school setting where they will be separated into grades. According to key informants, at least two groupings of children aged nought to two years and three to four years were expected in ECD classrooms. Although impacted by issues of limited space and materials, all ECD centres in the study achieved age-based class groupings. Most classes were grouped into age groups of 6-18 months, 18 months-2 years, 2-3 years and 3-4 years. One of the ECD centres had a unique grouping of only two age groups, for nought to two-year-old children and three to six-year-old children. This grouping was reportedly inspired by the principal's Montessori institutional training. According to the principal of this particular centre, the grouping stresses vertical grouping where children aged three to six years work in the same group to allow the younger children to learn from the older children. This perspective is supported by Urberg and Kaplan (1986, in Ansari et al., 2016), Isaacs (2011) and Kripalani (2011) for promoting children's prosocial behaviour, building leadership skills and improving self-esteem, creativity and respect for each other's learning paces in holistic learning. These individual growth points are essential for children's healthy learning stamina. Grouping children by different ages seemed to be affected by space and availability of materials. Some centres (n=5/12) had two groups of children in one room separated either by low-level furniture or walls. Such a setting seemed to cause distractions as children diverted their attention to see what was being done by another group.

Due to the COVID-19 pandemic, some centres (n=4/12) had to use fewer rooms as attendance had diminished and ECDPs worked on a rotational basis as per pandemic lockdown restrictions.

Availability and use of space: The DSD requires that a centre accommodates a total number of children that corresponds to the area occupied by the centre without overcrowding  $(1,5m^2 \text{ per child} \text{ indoors and } 2m^2 \text{ per child outdoors and further requirements like a separate kitchen and sick bay)} (DSD & UNICEF, 2006). Inside space was limited in the ECD centres in the study and none of the ECD centres in the study had a sick bay. Only one centre had a designated eating area while the rest of the centres used classrooms as eating spaces. Limited space presents several challenges, such as difficulties with safeguarding play equipment for centres sharing spaces that are accessible to other community users.$ 

The DSD require a centre to care for children according to the areas covered by the centre so since we had to reduce the number of children, my worry is that a lot of children now roam the streets, as they don't have anywhere to go because caregivers do not want to take their children to any other crèche, they want this crèche. My argument is that my area is being [big] and the ventilation is available so I can take more children. – Principal, Facility 12 (conditionally registered), interview.

Lack of space is a challenge; we can't store mattresses with free space for free movement. – Practitioner, Facility 31 (registered), focus group discussion.

I don't have space here...my classrooms are very small. And parents want to enrol here but I can't take them all, I have been told by DSD to reduce number of children. – Principal, Facility 3 (conditionally registered), interview.

I don't have outside play space for them to run around so I will speak to the owner of the space at the back so that they give me the space for me to extend outside play area. Due to lack of space our physical development is a bit limited. Also, the lack of space, I can't arrange the little one's space into different activities corners such as fantasy play corners, book corner, etc. Currently, the space for the little ones is very small so I am making a plan to extend at the back for them to have space. – Principal, Facility 11 (unregistered), interview.

Lack of space also meant difficulties in setting up rooms with the five key play areas for children aged nought to two years. Also, lack of space presented challenges with hygiene and safety as, in two centres, cleaning equipment and used potties were observed to be accessible to children. Another concern with limited space in centres was that the DSD reduced the number of children, leading to many children being denied access to learning facilities.

# 5.2.3.5 Facility management

This study sought to understand how community ECD principals managed their facilities to support SRP. The management areas that were explored included:

- encouraging professional skills development;
- learning programme development and delivery;
- seeking and maintaining support for effective continual centre functioning.

These three areas are discussed in detail below.

# Professional skills development

Clasquin-Johnson (2011) and Modise (2017) found the majority of ECDPs in South Africa had limited professional training. As such, ECDPs are not well equipped with the knowledge and skills that are needed to work efficiently and effectively (DGMT, 2019). Most principals and ECDPs in this study indicated that training workshop attendance was the main and, in some cases, the only professional development support provided by principals. According to Modise (2019a), professional development as a means for quality practice should be a fusion of internal and external training. This can be in the form of conference attendance, in-service presentations, workshops, discussions, live or web-based lectures, behaviour rehearsal, live or video demonstrations, tutorials, manuals, mentoring, coaching and communities of practice. Where it was their only means of training, ECDPs appreciated the knowledge they acquired from these workshops as almost half of them did not have NFQ-level ECD qualifications. Principals indicated that sending ECDPs to NFQ-level training was difficult as enrolment took years and the training itself was long-term requiring the ECDPs to stop working while they attended classes. Some principals expressed frustration that they had invested in ECDPs' NFQ level ECD training but after gaining qualifications, these ECDPs had left their jobs at the centres to start their own ECD centres, leaving principals with unqualified staff and less motivation to support qualifications for the remaining staff.

I ensure that practitioners get training but as soon as they complete training, they resign to go look for better jobs and I recruit new one and the same thing happens. So, they either go look for work in school or they open their own centres. – Principal, Facility 9 (registered), interview.

I recruit practitioners but they always leave, the last one I had for children aged three to four years left to go back to Eastern Cape but the ones I get to replace [for] that class are not qualified and unprofessional. They are young and uncommitted. So right now, I have a temporary. I also have her on the waiting list for ECD qualification since she had Grade 11 and is also a person with learning disabilities. – Principal, Facility 3 (conditionally registered), interview.

In most cases, principals send only one or two ECDPs for training at a time, which means taking a few years for all ECDPs to rotate and attend that same training. In some cases, unqualified ECDPs reported working at ECD centres for more than five years without attending any training.

Trainings are usually once-off so if training could be conducted several times a year so that as practitioners, we take turns to attend since we can't all go for training at once. Even though the one who attend may explain it's not the same as being there in person. – Practitioner, Facility 12 (conditionally registered), focus group discussion.

We need training since we started working here, we have never been to training. We want to know how to care and stimulate children, what we do know is based on our knowledge of caring for our own children. We hear other practitioners who attend training but we have never been to any workshops. I have Grade 12 but I can do other advancement courses. The principal doesn't allow us to go for training. – Practitioner, Facility 5 (registered), focus group discussion.

In these cases, the principal prevented ECDPs from attending workshops either by withholding information or misinforming ECDPs about when the training would take place. Training of ECDPs, therefore, requires principals to prioritise skills development and ensure that trained ECDPs share their learning with other ECDPs. There was no evidence in this study that this was happening.

The ECDP's professional ECD knowledge and skills determine how they deliver early learning. It was evident from the observations that ECDPs who taught children between nought and two years old were not properly trained for teaching children of that age. For instance, these ECDPs expected

children to sit still on the floor for long periods without engaging in any activities, threatened to hit or punish children who didn't listen or gave false promises of rewards to those who listened. Children who cried were told not to cry without seeking to understand why they were crying and the ECDPs did not encourage self-learning and autonomy (Cross, 2001). Even during the focus group discussions, these ECDPs were less engaging with the topic of SRP, although a few of them were aware of their role in preparing children for schooling as they indicated that school preparation only started at Grade R.

Well-equipped, trained and qualified ECDPs are known to develop and deliver effective ECD programmes (Modise, 2019a). In this study, however, the ECD staff lacked some pertinent childcare skills and teaching qualities needed. Although all the ECDPs proved to have qualities such as patience and hygiene, some lacked management skills and were not affectionate when attending to the emotional needs of the children in their care. The variation across the ECD centres in this study in the levels of capacity to apply all of the childcare skills that are required by the DSD suggests that meeting these staffing requirements is not practically supported by principals or enforced as a requirement during informal training.

**Managing programme development and delivery:** Although principals confirmed sending ECDPs for training to improve their skills, there was no evidence that the principals ensured that the ECDPs' acquired skills and knowledge were implemented in programme delivery. Being in a leadership position, principals should be in a position to guide and support teaching and learning practices in the right direction (Fourie, 2018; Modise, 2019a). In this study, only one principal expressed conducting in-service training with ECDPs for half an hour, on how to conduct a music ring and addressing ECDPs' areas of struggle. ECDPs had varied perceptions of principals supporting their early learning programme delivery.

The principal is here every day but she just sits in this chair on her phone not doing anything, she doesn't teach she doesn't do anything or tell us anything regarding our work. She doesn't care about us. She doesn't want us to train because she fears that we will be more qualified than she is. – Practitioners, Facility 5 (registered), focus group discussion.

She (ECD Principal) sent us to workshops and training even her knowledge as well she had been managing this centre for decades so we also learn from her. At staff meetings we discuss the daily programme and how to work with children and as a team work on how to improve from previous incidents/ issues. We have been trained on child abuse prevention, child development, child protection policy, emergency planning and HIV and ECD. – Practitioner, Facility 9 (registered), focus group discussion.

The principal sends us for unaccredited training and we take turns but the training isn't enough we need to keep refreshing our knowledge so that it's ongoing - we have been trained on child development and substance abuse. – Practitioner, Facility 22 (unregistered), focus group discussion.

Our principal doesn't work with us, she is very paranoid about people coming to this crèche. Even now she will ask us what we said to you. We can't even make suggestion of improving class set-up. She does not allow us to attend workshops, she will tell us about the workshops but leave out the details of the venue and dates. Come the day of the workshops she will lie to the facilitators what we didn't come to work so we end up missing those workshops. She doesn't connect us to the workshop facilitators because she wants to control the communication. She doesn't realise that us having workshops helps the children with learning. – Practitioner, Facility 5 (registered), focus group discussion.

I was studying health and safety in my own time and the principal told me to leave those studies as she promised she would send me to advance my ECD qualification. I dropped my course and up to now she has not done anything to help me advance my ECD qualifications. I don't even know how to proceed because she doesn't want. Also, as practitioners we aren't united because some seek favours from the principal so we cannot agree to demand better working conditions because we aren't united. – Practitioner, Facility 5 (registered), focus group discussion.

Blose and Muteweri (2021) found that principals are challenged in supporting programme design and supervising the application of learning programmes, especially with unskilled ECDPs. From the above respondents, it seems that the principals' support depends on the individual interest of each principal. There is also an evident concern that principals are apprehensive about supporting ECDPs as they do not want ECDPs to be more qualified and possibly compete with principals for positions or leave centres for better prospects.

At ECD centres, ECDPs are responsible for delivering early learning programmes. ECD programmes ought to be executed from a teaching plan (Aronstam & Braund, 2015). From the observations, it was evident that none of the ECDPs followed a lesson plan to implement their

daily programmes. Several ECDPs either did not follow the programme activities outlined or ran their activities at least an hour longer. Such negative effects of lack of planning can lead to unbalanced teaching which weakens some of the children's areas of development. Only a few ECDPs (10/27), particularly those working with children aged three to four years, were able to stick to the activities and time frames on the programme. Failure to follow daily programmes appears to cause disruptions in the flow of early learning (Aronstam & Braund, 2015). In this study, some children fell asleep after breakfast when ECDPs delayed introducing the first activity of the day. ECD centres failing to adhere consistently to a learning programme can impact how their children adapt to schooling where the programme structure is fairly rigidly followed.

#### ECD centre (facility) management

Delivery of a good programme is effective when ECDPs know how to set up and manage their classes (Aronstam & Braund, 2015). In this study, most classrooms weren't set up for activities. For example, children were seen to struggle while scribbling on the floor while tables and chairs were stored in the storeroom. In most cases, the principals (n=3) spent their daily time between Grade R class supervision and their offices. The reasons for the failure of principals to achieve effective management include personal traits, skills shortage and lack of ability to focus on the goals of the ECD facility (Blose & Muteweri, 2021: Fourie, 2018).

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Management of ECD programmes also requires that the principals ensure that ECDPs are well aware of their teaching roles and responsibilities. This appeared to not be the case as most ECDPs (n=20/25) allocated in classes for children aged between nought and two years perceived their roles to be more of a childminder than an educator. Also, principals were struggling to support ECDPs to manage high teacher-child ratios. In one class, the ECDP was observed allowing all 29 children aged between nought and two years to roam around a small room with nothing to do while boxes of toys tucked away in the corner could have been used to keep the children stimulated. Some unqualified ECDPs knew what was needed to deliver programmes but lacked guidance on how to properly deliver their programmes. Such management deficiencies were demotivating for ECDPs (Fourie, 2018), contributing to causing poor-quality SRP delivery.

**Seeking and maintaining support provision for ECD functioning:** The South African NDP (NPC, 2012) recognises that investing in ECD and education sectors is pivotal for establishing a more productive society by the year 2030 (Berry, Dawes & Biersteker, 2013). The study findings

show, however, that the injection of such investment support for ECD centres is nascent, with the existing limited support conditional on meeting near-impossible standards. Observations and interviews in this study indicated that most of the community-based ECD centres (n=10/12) still struggle to obtain recognition and sustainable material support from the government. These findings echo that of the study of Blose and Muteweri (2021) wherein township ECD principals expressed frustration at the lack of support from the government. In addition to seeking support from the DSD, principals resort to multiple channels of support from discussion forums, sponsorships, caregivers, NGOs and service organisations.

**Gugulethu Principals' Forum**: The study findings show that the Gugulethu ECD Principals' Forum serves as a fundamental source of support for ECD facility management. The ECD centres coordinator and some (n=5) principals (one from an unregistered centre and four from registered centres) confirmed that the forum serves as an information exchange space for principals.

We update each other on registration requirements...we share management challenges...ECD is now moving from DSD to DBE we share updates on that...which trainings are available and TVETs' enrolment dates and requirements. – Principal, Facility 9 (fully registered), interview. Being part of a forum helps with finding support from other principals and the help improve how I manage the centre. You can't operate an educare centre without being part of the forum because every information update is through forums. Even if I can't attend, I can send the practitioner on my behalf and we pay a membership fee. – Principal, Facility 31 (fully registered), interview.

We have forums where the chairperson has updated information regarding open space at the institutions so my job is to then share that information with the practitioners. Knowledge about training opportunities come from the forums. – Principal, Facility 11 (unregistered), interview.

The Gugulethu forum of 37 principals – we get information such as how to registered, how to deal with different challenges, how to deal with the transition from DSD to DBE. And our practitioners who have been on the waiting list will be prioritised for training because we are a member of the forum. I used to go to the Nyanga forum but it wasn't fruitful. We have WhatsApp group which helps because we can't meet in person due to COVID. There is a lot to be learnt thorough forums, we got to know about National Curriculum Framework through forums. – Principal, Facility 22 (unregistered), interview.

Additionally, principals share ideas and any excess resources and educational materials. The use of the WhatsApp instant messaging platform assisted the forum to carry on through the COVID-19 pandemic restrictions. The information in this forum is instrumental in guiding principals to manage their facilities. ECDPs whose principals are members of the forum are prioritised when they enrol for ECD qualification levels. The one challenge with the Gugulethu forum is that it requires a membership fee to join and only the 37 principals who had joined can access these membership benefits.

Although forums are beneficial spaces for ECD centre improvement, related knowledge sharing is restricted to very few principals of unregistered centres due to related membership costs. This is one of the reasons why fully and conditionally registered centres are better established and better supported as they can access information about available support. Principals of unregistered centres who could not access community forums did not indicate having an alternative channel for attaining ECD-related information that these forums provide. As a result, their centres and staff suffer a perpetual lack of support and hindrance from improvement. Not only are unregistered centres overlooked by the government, but they are also not receiving local support from their peers.

**Sponsorships**: Two of the ECD centres in this study were registered non-profit organisations (NPOs). This meant that they were able to apply for sponsorships.

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My facility is registered as an NPO so we are able to apply for funding. This facility registration is the main support I got for Rainbow because it opened the door for opportunities, they are funding my extension. Rainbow is seeking a container to replace this informal building structures. There are advantage of being a registered NPO. I can get funding to be able to fix all the requirements for full registration with the DSD. So that is what I am currently working towards. An organisation called HOPE provides food for the children. – Principal, Facility11 (unregistered), interview.

We realised that the children needed ECD and for a long time we run it informally. In 2004 we decided to register as a NPO, we conducted youth, ECD programmes. We started with six now we have 100 children. – Principal, Facility 22 (unregistered), interview.

According to Kagan and Hallmark (2001, in Blose & Muteweri, 2021), ECD centres opt to register as NPOs in a common practice that enables principals to solicit donations. One centre received

infrastructural support from a private company. Another centre was receiving donor support to extend its outside facility area. Although this centre had infrastructural support, it still needed to source a different funder for educational toys. Some sponsors also support multiple ECD centres at the same time, dividing the resources allocated to assist more centres. For example, a prominent private company donated small plastic beds for children's nap time and each centre received five beds, which were not enough as each ECD centre had more than 50 children. Sponsorships from the City of Cape Town metropole were reported by a few ECD centres (n=4/12) that received educational toys. Again, this support was insufficient as the toys were provided once-off and shared among numerous ECD centres.

**Training by Social Service Organisations (SSOs)**: According to the key informants, there used to be a wide variety of SSOs in Cape Town but now very few remain. The existence of SSOs may be driven by user and stakeholder demands (Marimon, Melão & Bastida, 2021). Some SSOs phased out ECD training following the inclusion of ECD qualifications by TVET colleges in the belief that the TVET colleges would provide both theory and practical training. However, TVET colleges were not meant to provide in-service practical training and monitoring and SSOs facilitate practical ECD training by providing workplace experience through opportunities to work with ECDPs within their ECD centres. The scarcity of SSOs seems to have been confirmed by ECDPs in the study who had not received in-service practical training or assessments from an SSO. Without this, it appears there is no formally structured way of confirming that ECDPs are correctly implementing what they have learnt. Moreover, the remaining training organisations such as Ikamva Labantwana, ELRU, CECD, The Unlimited Child and Grassroots now seem to only focus on once-off, unaccredited, short modules of theoretical content and assisting ECD centres to navigate the ECD centre registration processes. Such a drastic shift in structural support could be detrimental to the quality of teaching provided and affect the adequate provision of SRP.

The DSD also offers ECDPs ECD-related training in inclusive education, while principals are offered training in centre governance and management. These trainings can only be accessed under certain conditions, only centres that are registered with the DSD can access training and only principals with a diploma in ECD can train in management as a refresher training. In one centre where ECDPs alleged the principal's incompetent management, it was reported that, because the principal did not have a diploma in ECD, she did not qualify for DSD's management training.

Another responsibility of the DSD is to monitor ECD centre operation through social workers' monitoring visits (DSD & UNICEF, 2006). These visits, if conducted with rigour, can contribute to improving the management of ECD centres. For example, some ECDPs indicated they could not confront their corrupt principals about the mismanagement of centres due to fear of losing their jobs. However, they expressed interest in having the DSD visit to witness the mismanagement in the hope that the principals will be disciplined and made to improve their management styles. Unfortunately, according to most ECDPs (n=15), the DSD monitoring visit frequency ranged between seldom and non-existent.

### 5.2.3.6 Facility registration

Subsidies are only allocated to registered centres and many centres struggle with meeting registration criteria (Blose & Muteweri, 2021). The DSD is accused of lacking open and regular communication concerning details of the ever-changing requirements for facility registration. Principals endure extensive, laborious administrative documentation required for submission to DSD (Sixhaso, 2018).

Definitely, our facilities need to be registered and first point of entry is that the property needs to be zoned for the purpose. Most facilities take place in private homes but when the facility is processed for registration it should indicate that it is a place of instruction so a business floor plan of the classrooms is required, they also look at fire clearances, health clearance. These are the requirements for getting the facility ready. Also, we look at safety, hygiene, food preparation, absence of pests, anything that can harm children, is the kitchen demarcated from the classroom. – Key informant.

Principals of Gugulethu ECD centres in this study indicated trying to obtain their registration after years of bureaucratic delays.

I started the registration process in 2014 then the inspection listed all the things we need to do. By 2017 I obtained the health certificate, and fire safety approval but the zoning process has delayed full registration, because we are situated in the informal settlement the municipality wants us to buy this space to qualify for zoning. So now our centre is on conditional registration for two years. There is no registration support. – Principal, Facility 12 (conditionally registered), interview. Most centres are not registered because they do not fit the right criteria such as land use/ zoning, fire and safety, unapproved building plan which cost R6 000 to be approved. If you don't have zoning no other department will deal with your centre unless zoning is resolved. – Principal, Facility 11 (unregistered), interview.

We registered before in 2010 with Department of Education (for Grade R) and Department of Social Development. Registration lasts for five years so in 2015 our registration expired. So since 2015 until this year, we were renewing our registrations status. Now we are on conditional registration and our registration will only last two years. We now have challenges with registration because Social Development required a lot of things compared to when we first registered. Now that require a building plan, they calling it zoning. They said that I am exceeding my boundary. So, the Department of Housing ordered me to either buy the excess space I occupied or have my neighbour lease me the areas or rebuild my garage within my own space. That way I wouldn't have any space so my neighbour allowed me to use the space and I took the paperwork to the Ledge House then the municipality claimed that I am occupying municipal space so either I lease the municipal space or buy it. The municipal has sent me to various places to resolve this but now nothing has happened. – Principal, Facility 3 (conditionally registered), interview.

In 2011, the founder died and we were down on funding. In 2014, we realised we needed funding; we approached DSD for funding and outsourced facilitators. So, funding stopped because the zoning wasn't resolved. I did organisational study training and we strategised our approach to focus on skill development, food programme, psychosocial programme and the ECD. In 2018, the bishop agreed to sell the property but we didn't have the money to buy the land. Only in the year 2021 we are in the process of being conditionally registered. – Principal, Facility 22 (unregistered), interview.

Sixhaso (2018) found there was a lack of thorough understanding of registration requirements. Form this study, the Gugulethu ECD principals shared that they went through a tedious process of visiting numerous entities such as the municipal offices, architects and the City's Department of Environmental Management for approval and verification of their centres. The excessiveness of the registration process was also a major finding in Blose and Muteweri (2021)'s study of ECD centres in KwaZulu-Natal (KZN). Each of these departments stipulated its own protocols and financial charges and worked at its own pace and capacity. Where ECD centres were situated illegally on municipal land, principals had to purchase the land before being able to register the

centre. A centre situated on private land not owned by the ECD principal could encounter similar delaying processes. For example, a centre that was situated in a church yard took years to gain approval for land use from the church owners. All of these factors make the process of registration complex, expensive and frustrating for the ECD principals.

Procedures such as acquiring zoning or land approval, building ownership and infrastructure expansion are reportedly expensive and ECD centres receive no funding to assist them with meeting these requirements. According to Baloyi and Makhubele (2018), government-subsidised and registered ECD centres are not without financial constraints, as the DSD is said to regularly delay payments, leading to difficulties in maintaining ECD operations. Lack of funding opportunities is a recurring problem in the ECD sector.

Because the DSD funding is erratic, I am losing best practitioners because I can't pay their salary. – Principal, Facility 12 (conditionally registered), interview.

Department of Social Development doesn't subsidise all my children because technically my building is suited to accommodate 54 children for those are the only one subsidised. So 40% covered food, 40% covers salaries and 20% administration; we get R14 800 in total so out of [that] the R5 000 covered salaries for all the staff including me the principal. – Principal, Facility 31 (Registered), Interview.

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I am not happy with the money, I am paying the practitioners because when we get funding we divide it for different operations so a portion goes to fixing, a portion goes to other things, leaving the salary portion very constricted. – Principal, Facility 9 (registered), interview.

In line with the above expressions, Baloyi and Makhubele (2018) also found that the majority of their participants reported receiving inadequate financial support for the provision of quality services to the children they cater to. In this study, principals shared that the DSD did not provide comprehensive information regarding the registration rules. One registered centre with an expired registration status was not informed of its upcoming expiration. As a result, the process of reregistration took many years to effect. Principals also indicated that government registration policies have become stringent and previously accepted structures now required changes that principals cannot afford to make. This study confirmed that financial constraints and lack of governmental support, especially for unregistered ECD centres, are at the heart of registration challenges.

#### Support for, and effects of centre registration on, SRP

The study explored the extent of support available to ECD centres as they navigate these registration barriers. The Vangasali ECD Campaign (Phase 1) sought to collect information related to ECD facilities' registration status (Wills & Kika-Mistry, 2021). The Vangasali Campaign was also intended to facilitate the roll-out of support to identified unregistered ECCE programmes to help them meet the necessary registration requirements (Wills & Kika-Mistry, 2021). In addition to the inclusion of unregistered programmes in the provision of relief funding, this has communicated that government acknowledges the value and potential of unregistered ECCE providers (Wills & Kika-Mistry, 2021). At the time of the study, a total of 10 unregistered ECD centres in Gugulethu were being supported by the Vangasali Campaign. These centres were supported to reach conditional registration status and were going to receive subsidies for two years. The DSD has acknowledged that the registration process is very slow. To improve this, they collaborated with ELRU, an SSO, to identify and support facilities with zoning. Below is a brief description of how the identification and categorisation for support are conducted.

Registration is categorised under bronze, silver and gold, so if ECD centre falls under bronze category, they need to work on certain elements so they can proceed to gold which is full registration so they are given conditions that they need to fulfil for them before they qualify for full registration. So conditional registration lasts for a year and in that year the department subsidised the facility for the number of children learning there (R17 per child per day). Because of the shift to DBE, I am not sure how it will be scale if at all. – Key informant.

Many more centres could benefit from this campaign as none of the principals and ECDPs from this study confirmed receiving practical support with ECD registration through the Vangasali Campaign. Previously fully registered centres in this study failed to attain financial support from DSD as a result of failure to meet registration renewal requirements. This finding implies that not all registered ECD centres are benefitting from government support. Sixhaso (2018) also found that there was a lack of access to information on updated renewal requirements and this impacted available subsidies and affected the timely completion of registration renewal processes.

Achieving and maintaining centre registration status seems to be a goal for every principal in the study and registration can be considered a prerequisite for centre functioning. Although a few centres (n=2/12) from this study were registered as NPOs, their principals still aim for registration

with the DSD. This means that sponsorships from donors are not enough to sustain ECD centre operations. Lack of ECD centre registration poses a risk of closure by the government while registration comes with some benefits. Principals indicated that children who come from registered ECD centres are trusted by schools and are preferred for school enrolment. Centre registration also seems to maintain a positive reputation in the community as registered centres are appealing to caregivers. This is based on the belief that children from supported centres are better prepared for school than those from unregistered centres.

# 5.3 Improving and Strengthening SRP

From the preceding sections, it is evident that the challenges to SRP still outweigh the strengths. For community-based ECD centres to be able to properly and adequately prepare children for schooling, an enabling environment is required. This section explores areas of improvement needed at community-based ECD centres that could enhance and strengthen SRP.

**Physical/ Material resources:** Lack of soft toys, puzzles, paints, play areas, etc., deter ECDPs from fully teaching pertinent exercises in class. Although innovative ECDPs attempt to improve their practice by sourcing stimulating exercises from the internet to engage children with, they still lack the materials to execute them effectively.

Sometimes we see an activity on YouTube but we can't do it because we don't have resources.

- ECDP, conditionally registered ECD centre, focus group discussion.

We can't divide five puzzles among 100 children – if only we could have more educational toys. – ECDP, unregistered ECD centre, focus group discussion.

**Financial support:** The study determined that ECD centres largely depend on financial input from caregivers' fee payments and governmental subsidies. However, both these financial sources are only available to registered centres, as unregistered centres do not have access to subsidies, while conditionally registered only receive part of the subsidies and for a limited time. Financial constraints, therefore, affect various operations of ECD centres, such as securing ECD centres against burglaries and recruiting qualified and adequate staff. Financial constraints were mainly reported by unregistered and conditionally registered centres.

### 5.3.1 Improving ECD centre operations

The study findings indicated that an ECD centre's registration status does not guarantee the provision of holistic, quality preparation for children. The DSD ought to reconsider the emphasis placed on registration as the primary qualifying criterion for funding and organisational support to ECDs. This is in keeping with Harrison's (2020) observations that conditional support for ECDs always creates challenges for the ECDs. One of the principals highlighted a lapsing subsidy term as one of the challenges encountered.

Registration rules need to be a bit accommodating because once the registration status lapses it takes time to be re-registered so if they could at least continue to provide funding for another six months while the administrative processes are underway. – Principal (conditionally registered centre), interview.

Government subsidy remittances to all ECD centres would ensure that quality educational facilities are availed to all young children in poor communities, regardless of the registration status of the ECD. This way, instead of registration status being determined by fitting a certain criterion, ECD centres would be subsidised as a means of equipping them to improve their structure and operation. It doesn't help to stipulate requirements without providing support. Therefore, the piloting of the Vangasali project was an opportune approach to learn about all the support requirements for registration and whether the duration of support is enough to sustain the optimum centre operation. Wills and Kika-Mistry (2021) suggest that efficient systems are required to handle higher operations that focus on improving quality, children's access to ECD programmes and the active identification of ECD programmes in need of registration (for example through the Vangasali Campaign). Furthermore, systems improvement could be informed by research, including possibly for the sector to conduct another audit of ECD centres, since the last one was done in 2014 (DSD, 2014).

The scarcity of resources could be mitigated by community centres maximising support from their existing forums to integrate services across centres. The existing Principals' Forum could be used to inform the development of an ECDPs' forum. This would assist ECDPs from different facilities to share ideas on SRP without waiting for principals to find solutions. Measures of sustaining forums while accommodating all ECDPs need to be put in place to avoid the current situation with

the Principals' Forum, where access is limited by membership fee payments. Principals and ECDPs from unregistered centres may not be able to afford membership fees.

## 5.3.2 Improving professional development

Teaching and caring for children call for special skills such as exercising patience and using constructive disciplinary measures. In this study, unqualified ECDPs seemed to struggle with implementing proper guidance and teaching methods. Training needs to improve and focus on practical work. However, prioritising the skilling of those already working in the ECD sector seems to have been thwarted by government programmes such as the Expanded Public Works Programme that provide learnerships in ECD to any interested community members. Instead of having many volunteers and unqualified ECDPs already working in the ECD centre waiting for years to be enrolled in TVET colleges, such programmes should prioritise those already in practice.

This study also found that the majority of the community-based ECDPs are not formally qualified in ECD and that this is because ECDPs find it difficult to enrol in TVET colleges. Further studies should be conducted with educational institutions to understand why it takes years for ECDPs who are already working at ECD centres to enrol for formal ECD qualifications. Another barrier was that ECD training workshops tend to be provided in English. Considering the majority of ECDPs' low levels of education, grasping concepts in English may be difficult. Moreover, ECDPs reported challenges with translating the English content taught at workshops back into their own language (isiXhosa) for delivery in the classrooms.

ECDPs reported that the ECD training workshops were presented erratically and were usually once-off programmes. Not only do these short-term and compressed exercises challenge the consistent grasping of content but it was also a logistical challenge for all ECDPs at each centre to be able to attend. The method of training seems to affect the quality and recognition of training. Moreover, these short and once-off trainings aren't accredited and therefore cannot be used to further develop the qualifications of ECDP professionals. Some ECDPs suggest that workshops should be repeated several times a year to allow ECDPs at each centre to take turns to attend, since not all ECDPs can attend training at once. ECDPs should be equipped with skills to work with special needs children as most caregivers aren't open to sending their children to special needs facilities. Moreover, with early education curricula constantly evolving, having ECDPs wait long periods between trainings and without refresher courses affects their teaching abilities.

## 5.3.3 ECD policy improvement

A significant amount of work has been employed to develop education policies, marking a paradigm shift within the ECD sector (Mbarathi et al., 2016). The transfer of accountability for the ECD sector from the DSD to the DBE has brought hope of change for ECD centres, particularly those in poor communities. Key stakeholders in this study felt that policy developers do not involve ECD stakeholders across different contexts to inform policy development. In particular, the requirement that ECD facilities must qualify for a subsidy does not consider that ECD centres in poor communities need government support for them to achieve the required registration standards.

Enrolling children in preschool remains less of a priority for the majority of caregivers in poor communities. Very few ECDPs in the study engaged in ECD awareness activities and reported limited responses from caregivers when they did. This means that there are many children in the care of these caregivers who are not adequately prepared for schooling. Part of ECD implementation ought to include mobilisation for ECD awareness to encourage early preschool enrolment. Support should include the provision of resources such as toy libraries to encourage caregivers' participation in children's educational activities and to enhance the home as a learning environment. The DBE should emulate implementation programmes such as the Penreach Center-Based programme<sup>12</sup> to sustain home learning activities.

Parents and caregivers are important for supporting children's learning. After exploring ECD centres' engagement with parents, the study recommended that future initiatives in the ECD sector prioritise research, monitoring and evaluation of the importance of parental involvement and contribution to ECD centres (Pitt et al., 2013). In addition, parental involvement can also be enhanced through community-based organisations partnering with ECD centres to conduct workshops in communities to empower caregivers with teaching techniques to employ in households (DGMT, 2019). In Australia, for example, effective parental involvement in children's learning was achieved through 'teacher outreach', which was strongly related to parental engagement (Patrikakou & Weissberg, 2000, in Murray et al., 2015). Further studies need to be

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<sup>12</sup> https://penreach.co.za/early-childhood-

development/#:~:text=Penreach%20Play%20Day,ways%20of%20learning%20through%20play.

done to explore strategies that can enhance a better working relationship between parents, caregivers and ECDPs.

Government policy improvement should include streamlining the monitoring and assessment of ECD centres. An administrative database to gather usable data to account for and monitor ECD centres should be created. This will improve the government's ability to identify and respond to ECDs that need assistance. There is a need for a population-based framework for planning ECD service delivery with clear coverage targets because the current system is blind to the majority of young children who are outside the system or underserved in unregistered ECD facilities.

# 5.4 Caregivers' knowledge of, attitudes to and practices for SRP

Lack of consistent stimulation in homes can lead to long-term cognitive and psychological problems (DGMT, 2019). This section covers how the profile and ECD knowledge of caregivers of children attending community-based ECD centres in Gugulethu affect their involvement in SRP. This will be followed by a discussion of how caregivers practically support SRP, including factors enabling and hindering caregivers' involvement in SRP.

# 5.4.1 Demographic profiling of caregivers

Understanding parents' demographic profiles is important to understand the context in which they live in relation to their ability to comprehend and practice SRP. Thus, caregivers' perception of school readiness is influenced by, among others, their SES, household structure and educational status (Campbell, 2008; Coley, 2002). Demographic variables such as limited parent education and formal employment have been associated with lower levels of parental involvement (Murray et al., 2015).

Age group	• 22-43 years
Gender	<ul> <li>males (2)</li> <li>females (27)</li> </ul>
Levels of Education/Training	<ul> <li>Grade 9 (4); Grade 10 (1); Grade 11 (7); Grade 12 (8)</li> <li>Post-high school studies in civil engineering (1); hospitality (1); cosmetology (1) Taking part in a sewing project (6)</li> </ul>
Employment	• Unemployed (27) •Part-time work (2)
Relationship with the chidren	• 25 mothers, 1 father, 2 grandmothers, 1 grandfather
Marital Status	<ul><li>Living with a partner (not officially married) (28)</li><li>Single parent (1)</li></ul>

Figure 3: Overall profile of caregivers whose children attend ECD centres in Gugulethu

The caregivers who took part in the study were above the age of 21 years and below 44 years. Most of them were female. However, ECDPs and principals highlighted a common trend of young and teenage parents whose immaturity negatively influenced their support of their children's early learning.

There are some who are still very young parents, who like doing their own thing. Some spend time drinking and they don't really care. – Principal, Facility 31 (registered), interview.

The parents we are dealing with are young and some of them are children themselves in their teens, they like to party and drink so they don't have time for involvement – Practitioner, Facility 9 (registered), focus group discussion.

Socioeconomically, most of the caregivers in the study had not completed matric and were unemployed. The minority group was attending post-high school training. There was a group (n=6) of women who were unemployed but engaging in a sewing project based at the ECD centre. With a low educational level that leads to low-paying jobs or unemployment, caregivers cannot afford the fees charged (R200/month in 2021). Most of the children who are enrolled in ECD centres are

either children of employed caregivers or a caregiver supported by working grandparents. Children of parents who have acquired a low education level and low-paying jobs are most likely to lack access to certain resources (Mbarathi et al., 2016). The parents in this study enrolled their children in ECD centres based on their affordability.

We are dealing with parents from poverty who do not treat ECD as a platform for learning because you will see other children just enrol for one month of the year because of no money and they stop, you see them playing in the street. – Practitioner, Facility 9 (registered), focus group discussion.

They [caregivers] don't even want to pay the little school fees we charge (R200/month) most of the children who learn here are of parents who are employed and some have support from the grandparents. – Principal, Facility 9 (registered), interview.

In terms of family structures, this study found that most of the caregivers were living with their spouses or partners and were both involved in caring for the child. Janse van Rensburg (2015) and Du Toit et al. (2021) both found that living with two caregivers and a higher caregiver education level contributed to resilience to developmental delays. A caregiver's ability to support early learning starts with their knowledge of the importance of SPR.

# 5.4.2 Caregivers' knowledge of the importance of supporting SRP

Prior exposure to an ECD centre was one of the factors that influenced caregivers' decision to send their children to an ECD centre. Caregivers sent their children to ECD centres that they had attended as children as they trusted those centres to care for their children. Family and community members' reports of a positive experience with an ECD centre motivated caregivers to enrol their children at an ECD centre. Moreover, parents witnessed some children excelling with good grades in school and considered this as proof of proper SRP.

I saw the way my neighbour's child is good in school, that child used to learn here at this crèche so I thought my child should also come here. – Parent, Facility 11 (unregistered) group interview.

We attended this crèche when we were children so we know very well how things go in this crèche so we bring our children here. Our children's children will likely attend here. – Parent, Facility 9 (registered) group interview.

Other crèches have so many scandals, you hear that children are sick because they were fed rotten food, the food here is good. My child has never had issues since being here. I chose this centre because it was recommended by others, the education is good and communication with the children is very good. – Parent, Facility 9 (registered) group interview.

This centre cared for our children, my sister's three children learnt here, I have never had problems. If they see something amiss with the children, they tell me. – Parent, Facility 12 (conditionally registered) group interview.

We have heard and seen the progress of some children who have learnt here they are passing at school grades. – Parent, Facility 12 (conditionally registered) group interview.

As seen above, a caregiver's decision to enrol a child in an ECD centre was based on its familiarity and independent of the centre's registration status. Caregivers gauged a centre's credibility based on anecdotal accounts or self-testimonies. This calls into question caregivers' understanding of what it takes for a centre to provide quality SRP. Since most of these caregivers did not have a higher education and were either unemployed or working in menial jobs it can be inferred that they did not have a proper foundational education. Moreover, the positive evidence they saw in other children could have been the result of multiple other external factors and not just the enrolment in an ECD centre.

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A small number (n=6/27) of caregivers weren't aware of the benefits of enrolling a child at an ECD centre. They still treated ECD centres as childminding facilities. The idea of sending children to ECD centres for childminding purposes was also common in Kwatubana's (2014) study in North West (South Africa). Caregivers who appreciated childminding services (feeding and putting children to sleep) confirmed that they enjoyed having a break from these childminding duties at home. According to the principals and key informants, these are the caregivers who are still oblivious to the importance of early learning.

Caregivers considered the feasibility of access and long-term academic outcomes of enrolling their children in a reputable centre. Registered centres are favoured over unregistered. This was also confirmed by the principals' view that the registration of a centre maintains its positive reputation in the community. Above all aspects, parents mostly valued the ECD centre staff's attitude to their work and ability to teach children.

The way they teach children is different from other preschools, they make use of object to exercise hand muscles so that the child knows how to grasp items. They teach them that sharing is caring, praying and apologising when they wrong another. – Caregiver, Facility 11 (unregistered), group interview.

It's not about the outside beauty of the facility only...but about the education it provides for the child and security to keep children safe...It's about the environment that fosters education. – Caregiver, Facility 9 (registered), group interview.

We look for the status of the centre, if it is registered or not, that is one is the things we look for and the practitioner's attitude toward our children. – Caregiver, Facility 12 (conditionally registered), group interview.

The principal is able to see things on my child that I can't see, she can tell if something is wrong at home by just looking at how the child is behaving, and she sit down with you and discuss how they child can be cared for, the place is also clean –in some places we are greeted by a stench of toilets; we have never smelled anything here, our children come back home clean. – Caregiver, Facility 22 (unregistered), group interview.

Caregivers of children attending unregistered centres also spoke highly of these centres as being capable of preparing children for school. However, the study established that unregistered centres struggle to provide quality SRP due to a lack of support to fully resource the centres. This again points to caregivers' limited understanding of how quality SRP is implemented. Moreover, parents seem to prioritise convenience to rationalise their choice of centre.

Caregivers also preferred free communication with staff and principals who were accommodating enough to keep their children if they were running late due to work commitments. The latter finding is supported by Bidwell et al. (2014) and Degotardi et al. (2018) who found that one of the reasons for parents enrolling their children in community-based ECD centres was to be able to free their time for other activities. Very few caregivers understood the principal's role as being to guide the identification of children's strengths and weaknesses and correct ways of interventions. In a major finding in a study in Australia, 97,4% (n=97) of working-class parents (mostly employed as semi-skilled or unskilled labourers) indicated that day-care centres should be more about preparing children for schooling than about childminding (Liu, Yeung & Farmer, 2001). This shows that,

despite low education levels, parents with prior exposure to daycare knew the importance of preparing children for schooling at their preschool age.

Pertinent factors of teaching quality (i.e. curriculum-related, teacher qualifications, motivation, attendance) that Du Toit et al. (2021) assert as crucial for early learning were not mentioned by caregivers in this study. Bidwell et al. (2014) found that parents who did not prioritise teaching quality were not knowledgeable about early learning. Not knowing the quality of teaching reduced parents' likelihood of involvement in their children's learning progress. In the Soweto (Gauteng) part of their study, Bidwell et al. (2014) found that parents had a relatively balanced knowledge of the importance of convenience (access), financial affordability, facility quality and teaching quality. These parents were more involved in their children's learning both at home and at the ECD centres. While caregivers in this study were aware of the benefits of enrolling a child in an ECD centre where the child will be cared for, their comprehension of how teacher quality contributes to their child thriving later in school was limited, possibly because of their limited levels of education. Applying cultural capital theory to parental involvement, Murray et al. (2015) posited that it is expected that parents who have completed higher education are likely to have a greater knowledge of quality educational systems compared to parents who had fewer years of schooling. Thus, caregivers in this study expressed knowledge of quality early learning through the lenses of their limited exposure.

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When asked how they knew that their children were being well prepared for school in correspondence to their age, caregivers mentioned a few indicators of SRP. These included that their children exhibited positive attitudes to learning. Some children woke up on Sundays excited to go to crèche, mistaking it for Monday. Children were reported to have an understanding of writing their names by the time they reached the reception year (Grade R), positive social interaction with others, understanding of vowels, and the alphabet and learning new languages, i.e. English.

Our children can now speak English, my two-year-old speak English, can use the right word in the sentence, my child like to use but and because and she uses them in the right way, we don't need to take them to white crèches. – Parent, Facility 22 (unregistered), group interview. A child must know how to behave and interact with others. For example, my child who is now at primary school knew vowels, alphabet, his name and was beginning to try to write his name. – Parent, Facility 22 (unregistered), group interview.

So, when my child brings proof of activities done at crèche, I know that this crèche is good also the crèche must be able to teach my child to speak in English. It's about the environment that fosters education. – Caregiver, Facility 9 (registered), group interview.

From the above quote, it is clear that the caregiver of a child attending a registered centre preferred tangible evidence of what is taught coupled with a child's changed behaviour as convincing proof that the SRP was of a better quality. Caregivers of children attending an unregistered centre took children's linguistic and social skills to be proof of SRP being implemented at the centre. These skills could have been learnt anywhere and do not prove that unregistered centres are teaching these skills. The study has however confirmed that caregivers, had some knowledge of the importance of an enabling environment for SRP. The study also sought to understand the extent to which caregivers' SRP knowledge might influence their attitude to involvement in their children's early learning within the community-based ECD centres.

### 5.4.3 Attitude to involving caregivers in SRP

This mini-thesis explored attitudes to SRP in terms of respondents' (key informants, ECDPs, principals and caregivers) thoughts and feelings as well as any preconceived ideas they had about SRP. Exploration of these attitudes was based on the assumption that knowledge influences thoughts and feelings on a particular subject which, in turn, can affect how one behaves regarding that subject. As such, the study sought to understand whether the extent of SRP knowledge led to positive thoughts that could lead to caregivers' active involvement in supporting SRP. There was a common thought among respondents that quality SRP ought to be treated as the result of a collaborative effort of three entities, namely, the child, the caregiver and the ECDP. The quotes below capture the essence of respondents' attitudes toward SRP.

Definitely [it is important for parents to be involved in their child's learning], parents are the third leg...the other two are the child and practitioner...in learning, so we must know what is happening with the child. – Parent, Facility 11 (unregistered), group interview.

Yes, we must work with the practitioners, we can't let educating children be the role only for the practitioner. – Parent, Facility 22 (unregistered), group interview.

Parents should assist practitioners regarding things that children learn. So, the principal tells them what to bring, they should be [prepared] to contribute. – Practitioner, Facility 22 (unregistered), focus group discussion.

Parents should ask children about what they did in school to show interest in their child's learning and help them write their names, sing songs. If a parent gives excuses, they can't do certain things/ activities with the children because they don't have materials, we can't force them. – Practitioner, Facility 9 (registered), focus group discussion.

If we are the only ones teaching and nothing is done at home, children won't remember what was taught so if we are doing activities, e.g. my family, we ask them to go home and cut picture of representations of their family structures so parents can take part in such activities. – Principal, Facility 3 (conditionally registered), interview.

Principals, ECDPs and caregivers all agreed that they each have an integral role in supporting children's early learning. While ECDPs are equipped with knowledge acquired from their training, the involvement of underserved South African caregivers in early learning has been effected through interventions such as home-based learning that encourage parents to intellectually stimulate their children (Ford et al., 2009, in Bierman & Motamedi, 2015; Wessels, 2012). In this study, caregivers' attitude to early learning was influenced by exposure to ECD centres. Several ECD centres (n=8/12) opened their centres once a year to caregivers during graduation or open days. This exposure was mainly intended to inspire the treatment of ECD centres as more of a learning centre than a childminding centre (Liu et al., 2001). However, from the ECDPs' and principals' accounts, these occasional exposure events seem to be more about exhibiting what is done in the ECD centre than they are about teaching and encouraging caregivers to carry on preparation for learning at home. Bierman et al. (2015) argue that extending children's learning beyond the ECD centre is done through programmes that onboard parents with practical ideas and materials to use with their children at home.

The lack of proper onboarding of caregivers could explain why there were still some caregivers (n=10/29) who viewed ECDPs as the only active pillar of SRP whereas ECDPs viewed SRP as a collaborative initiative and expected that parents should assist children with homework and work with the ECDPs. Considering the children's developmental stages, they cannot be trusted to effectively communicate homework instructions to their caregivers. However, the role of SRP as a collaborative initiative is not understood by some caregivers, as indicated below.

I tell the children to ask their mom to teach them the alphabet but when they come back the paper is not completed...some parents do not do anything about their children's homework. – Practitioner, Facility 5 (registered), focus group discussion.

If we are the only ones teaching and nothing is done at home, they won't remember what was taught...for example, we ask them [children] to go home and cut pictures of representations of their family structures so parents can take part in such activities. – Practitioner, Facility 3 (conditionally registered), focus group discussion.

I don't think parents exercise SRP at home because here we potty train them but at home they will still use a nappy. – Practitioner, Facility 22 (unregistered centre), focus group discussion.

Parents are lazy at times they think it's only the practitioner's job to prepare a child for schooling. – Practitioner, Facility 12 (conditionally registered), focus group discussion.

Caregivers who maintained a passive role will wait for the children to tell them what had been done at the preschools instead of making contact with ECDPs to be able to track children's progress. Moreover, passive caregivers believe that ECDPs have to initiate contact to update them on their children's progress. These caregivers' attitudes could be improved through the use of the suggestion of Ebrahim et al. (2011) for improving caregivers' reception to SRP by building relationships with ECDPs, engaging in self-help support groups and income-generation activities (i.e. gardening, beadwork, etc.). Only one ECD centre in the current study was running a sewing group for caregivers at the centre and both the ECDPs and caregivers confirmed having an effective collaborative relationship because of the frequency of contact they had at the centre.

Very few registered centres (n=4/12) used the WhatsApp online instant messaging videos to teach caregivers activities to do with children at home. Only parents with smartphones could access these videos. Moreover, these activities were shared with parents of children aged between three and four years, excluding those with younger children.

We created a WhatsApp group with contact numbers of 76 parents but not all of them are active there...I show them what we do with children and encourage them to do the same at home. [showed the researcher a video sent to parents of the practitioner singing Ring-A-Ring-a-Rosy with children] So that children do not forget what they learn. – Principal (conditionally registered centre), interview.

Across centres, ECDPs' attitude to involving caregivers in SRP seemed to be affected by their preconceived belief that, in general, caregivers in the community do not prioritise early learning education. This is based on their observation of many children in the communities who are still not enrolled in ECD centres. ECDPs opined that caregivers should learn what to do with their children from the children themselves by showing an interest in their children's activities. Despite varying degrees of contact, the study shows that there is no active SRP collaboration between ECDPs and caregivers, reflecting that knowledge of the importance of SRP does not necessarily translate to positive attitudes to SRP and active involvement in supportive early learning. This supports the finding of Cook et al. (2005, in Janse van Rensburg, 2015) that the increased rate of children's participation in and increased access to ECD education in South Africa is owing to parents' and caregivers' collaboration and cooperation with ECDPs.

#### 5.4.4 Caregivers' practices of SRP

In this mini-thesis, practices refer to the behaviours or ways that physically demonstrate caregivers' inclusion and participation in SRP. ECDPs want to involve caregivers in early learning through the provision of activities to carry out at home. A few (n=4/12) centres included caregivers to encourage treating ECD centres as spaces for SRP. However, the ECDPs in general indicated that caregivers chose not to participate in what was taught in ECD centres.

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Parents are supposed to be involved in matters of their children's learning but they don't want...if I send a WhatsApp message to say bring materials or anything we would like for schooling but they don't respond. – Practitioner, Facility 8 (unregistered), focus group discussion.

Some parents do not care to be involved in their children's schooling, for example, we ask parents to create transport models from empty milk bottles, only three out of the whole class will bring those models. What we don't know is if activities we ask them to do will also be done at home. We encourage them during meetings but they don't do it. – Practitioner, Facility 12 (conditionally registered), focus group discussion.

Some parents...argue that they pay for school fees so they practitioner should do it all. We are transparent about why we need wipes, toilet paper but parents do not cooperate. They don't tell us what happened over the weekend if there were incident so that we can intervene with the child. Some children have only known a hug in preschool because they parent do not have time to bond with their children. We did meetings with parents before COVID but not everyone

attends and they don't take us seriously. – Practitioner, Facility 22 (unregistered), focus group discussion.

According to the centre staff, the majority of those who did not cooperate in SRP are caregivers of children aged between nought and two years. This was evident in parents discontinuing potty training at home and not engaging in any stimulating activities. This is to be expected given that this research found that most ECD centres do not prioritise learning for children below the age of three years. Moreover, those who share activities to be done at home only share what can be done with children aged three years and above. ECDPs also heard some caregivers arguing that since they pay ECD centres for services, it should be the ECDPs' responsibility to prepare children for schooling (Munnik & Smith, 2019). Children who practice early learning and are also intellectually stimulated at home differ from those that do not. This is in line with the research finding in the United Kingdom where parental involvement in home learning activities was strongly associated with children's better cognitive outcomes (Murray et al., 2015).

Caregivers delay and disrupt the enrolment of children in community-based ECD centres, which hinders SRP. Children are often only enrolled in ECD centres at the age of four years just before they enrol in Grade R. According to the principals, when caregivers have a preference for an ECD centre they will not compromise with another if their preferred centre fails to accommodate their child. This results in many children being denied access to early learning.

Some parents delay enrolling children, so if the preschool they want is full, they won't go somewhere else they will wait another year and the child is just sitting at home while others learn. – Principal, Facility 31 (registered), interview.

Sometimes parents bring their children to the crèche very late, they stay home until the child age of four years, they enrol here for one year which is not enough preparation. Even in that year their attendance is not consistent, and at school the primary teacher will want to blame the preschool teacher that the child is not well prepared. – Principal, Facility 12 (conditionally registered), interview.

As Domitrovich et al. (2013) found, children who are enrolled in preschool for a short time or inconsistently perform badly in primary school. Some caregivers tend to take children out of ECD centres during months when they can't afford to pay centre fees. Some principals in registered centres reported encouraging caregivers to keep children in the ECD centres despite unpaid fees,

yet the caregivers still removed the children. This inconsistency in enrolment causes learning difficulties (Van Wyk, 2015) while stigma about intellectual/ learning impairments also hinders SRP.

Sometimes we get children whom we see as needing special schooling due to their delays in development so we speak to parents and give out opinions for the parents to take the child for assessment but the parents in our community are hesitant about such cases, they do not want to accept that there is something wrong with their children. – Practitioner, Facility 3 (conditionally registered), focus group discussion.

Some parents are in denial about their children's intellectual/learning disabilities they will keep the child in a facility that isn't equipped to cater for the child and the child doesn't gain much from the experience. As practitioner I can't intervene if the parent is not on board. – Practitioner, Facility 22 (unregistered), focus group discussion.

Caregivers opt to keep their special needs child in an ECD centre where ECDPs are not equipped to cater for the child. Instead of prioritising their children's adequate preparation for schooling, caregivers were reportedly willing to pay the R400 required at the end of the child's preschool period. This money pays for hiring the child's preschool graduation outfit, graduation photographs and a certificate that will be presented to the primary school as proof of enrolment. Since primary schools prioritise enrolling children with proof of preschool enrolment, caregivers used ECD centre enrolment simply to enable entering primary school rather than preparing for it.

While the key informants thought ECDPs involved caregivers in learning activities, only a few ECDPs were doing so. Very few caregivers (n=10/29) confirmed receiving activities from ECDPs via WhatsApp videos. Most caregivers (n=25/29) waited for their children to guide them on what to do, which was an ineffective attempt at guidance and involvement. A few caregivers took an interest in children's activities by providing cheap learning materials.

We use clothing pegs, lollipop sticks, toys, asking him how many wheels does a car have. – Parent, Facility 31 (registered), focus group discussions.

We buy counters, paints for colours, teach how to count money. We help them when they are initiating activities on their own – Parent, Facility 22 (unregistered), focus group discussions.

I use the dots for writing so that she traces the dots and practices writing. – Caregiver, Facility 9 (registered), focus group discussions.

We don't have many materials at home but we try to work with what we have. – Caregiver, Facility 12 (conditionally registered), focus group discussions.

One parent indicated taking her four-year-old child to the traffic light to learn the meaning of the colour changes. Very few parents (n=9/29) helped children with practising writing, drawing and reading. This is aligned with Kotzé's (2015) finding that the majority of South African children from low SES backgrounds who were living with adults with very low literacy levels were seldom exposed to books or regular literacy and numeracy practices such as storybook reading and writing skills.

## 5.4.5 Factors influencing caregivers' ability to support SRP

This section builds on the preceding discussion on parental involvement. The study found that the main issues affecting parental involvement in early learning in the study area are work commitments, emotional absence due to exhaustion from strenuous work, poverty, substance abuse and socioemotional issues caused by abusive partners and stressful marriages. These findings concur with those of Pitt et al. (2013).

**Poverty**: Ashley-Cooper et al. (2019) and Munnik and Smith (2019) posited that poor caregivers are less like to send their children to centre-based ECD programmes. Most caregivers (N=20/29) in this study relied on a monthly social service grant (R1 500) as their main source of income.

The poverty we live in, we do not sent children to preschool because we rely on grant money which is used for food and then to take a big portion of it for preschool payment is a big financial loss. – Caregiver, Facility 12 (Conditionally registered), Group discussion

Because preschool fee payments per month (e.g. R250) would be a serious financial commitment for poor parents, parents enrol the child in the ECD centre only for the months they can afford to pay. Thus, poverty limits many children in poor households from receiving adequate stimulation for SRP (Bierman et al., 2015).

**Diminished motivation/ interest:** Caregivers expressed that they sometimes lack mental or physical motivation to engage with the children in school-related activities.

Lack of curiosity about what the child learns. If we are not curious, we don't follow up, we don't care about what the child is up to. So, we won't sent children to preschool. – Caregiver, Facility 12 (conditionally registered), group discussion.

Sometime my child will ask to do a thing and I am not mentally or physically motivated to engage with the child, it's not that I don't love to support my child but sometimes we just don't have the strength. Worse still the child will need specific attention that I can't give. I will be just exhausted. it's not even about working or not working; we all have those moments. – Parents, Facility 22 (unregistered), group discussion.

This lack of motivation was attributed to fatigue due to strenuous work, lack of time due to pressing commitments such as their own study assignments, and lack of patience to fully exert themselves in learning activities. Caregivers who had not attended preschool themselves lack knowledge and interest in engaging children in early learning. As indicated by Du Toit et al. (2021), higher stress levels hinder optimal caregiver-child reciprocity and caregiver responsiveness.

Lack of communication between ECD centre staff and caregivers: The study evidence suggests that lack of collaboration between ECDPs and parents limits the extent to which they can share information about the child from the home and classroom perspectives. The study indicates that ECDPs have limited communication with caregivers. Although WhatsApp groups and messaging books are used for constant communication, very few caregivers remain engaged in instant messaging and information shared is selective, mainly to parents of older children. Caregivers didn't know what challenges were experienced by ECD centres and were not in touch with their children's learning needs.

**Caregivers' age**: Caregivers of the children in this study were all adults and they indicated fair knowledge of the importance of early learning. However, ECDPs reported that teenage and young adult parents in the community who had dropped out of school due to unplanned pregnancy lacked the maturity to prioritise children's school readiness and tended to neglect child care.

Lack of materials and enabling environment: Caregivers noted that children prefer picture books to being told stories as this is how it is done at the ECD centres. A few caregivers who stimulated children at home admitted that limited access to materials led to using the same material all the time, which children found boring. Most caregivers in this study lived in small shacks or households where they lacked enough space to set up their homes to stimulate learning.

## 5.5 Conclusions

Although SRP was well understood by principals, ECDPs' views of their class activities and how they link to SRP are less understood. This is owing to underuse or ignorance of the NELDs standards. ECDPs also lack an understanding of the need for SRP incorporation from as early as neonatal infancy. This may be because the South African ECD sector only recently turned its SRP focus to the nought to four years group. Despite these limitations, it is evident that ECD centres incorporate key SRP elements of physical and social interaction development across all age groups. Emotional support for children is, however, an area needing improvement at most ECD centres. Although language development was evident in most ECD centres, some ECDPs still need to learn skills in stimulating and engaging children through communication. Cognitive development was only actively incorporated for children in the three to four years age group.

Exploration of caregivers' knowledge, attitudes and practices in relation to understanding SRP shows that adequate knowledge of SRP is affected by many factors including low education level, poverty and lack of exposure to adequately resourced ECD centres. Inadequate knowledge of SRP, in turn, affects caregivers' active involvement by supporting SRP in homes and at the centres. In particular, caregivers of children attending unregistered centres, although having some understanding of a few aspects of SRP, do not practice it, mainly due to lack of knowledge and resources, and personal issues. This suggests that caregivers of children attending unregistered centres where the ECDPs are also struggling to implement quality SRP.

# **CHAPTER SIX: CONCLUSIONS**

## 6.1 Introduction

This chapter concludes the study by summarising the conclusions derived from the research conducted in Gugulethu and making recommendations for policy-making and further research. The discussion includes promising insights into the operation of ECD centres with regard to SRP that could inform the understanding and future improvement of school readiness preparation, particularly at ECD centres in South Africa with similar SES.

The study investigated the factors affecting community-based ECD centres' school readiness preparation of pre-Grade R children in Gugulethu. To shed light on how facility factors such as infrastructure, learning systems and the registration process, and household factors like parental involvement, affect the ECD centres' ability to prepare children for schooling, the research objectives included determining how elements of school readiness are incorporated in ECD teaching and learning, the extent to which the ECD centres are conducive to the SRP of children aged nought to four years, how this is affected by the DSD registration process, the extent of caregivers' knowledge, attitudes and practices of SRP and what improvement measures could strengthen the ECD centres' SRP provision.

## 6.2 Summary of Findings

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The implementation of key elements of SRP in Gugulethu community-based ECD centres is influenced by various factors, as highlighted below.

The limited knowledge of key guiding policy documents such as the NCF and NELDS revealed in the study indicates there are still opportunities to strengthen the incorporation of the key elements of school readiness (i.e. socio-emotional, physical, linguistic and cognitive development) into ECD teaching and learning among community-based principals and ECDPs.

While there is a general understanding among principals and ECDPs that SRP should be incorporated holistically, the actual inculcation in class seems to be somewhat evident in areas of physical, language, social and cognitive development. The incorporation of emotional development is still very weak across all community-based centres examined in the study.

There is a great need for ECDPs, particularly those working with children aged nought to two years, to be better trained in basic concepts of enhancing the development of children, such as learning through play.

Frequent practical training is required to enable ECDPs to employ effective teaching processes such as lesson planning, better use of available resources in classrooms and supporting children with developmental barriers where specialists are unavailable.

ECD centres experience shortages of educational material due to poverty, limited sponsorships and crime. In addition, the available learning materials are outdated. The lack of materials results in ECD centres resorting to prioritising the allocation of materials to older children, further reducing prospects for SRP incorporating younger children.

Human resources in the form of class assistants are lacking in ECD centres and this affects ECDPs' ability to manage classrooms and adequately attend to all the children's learning needs. ECDPs are not collaborating to provide for SRP needs as children progress through classes in most ECD centres.

Indoor and outdoor space and equipment are limited and of poor quality at most ECD centres included in the study, potentially restricting children's exploration needs and learning opportunities.

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Facility management could still improve in many areas, including: (i) encouraging professional skills development, (ii) learning programme development and delivery, and (iii) seeking and maintaining support for effective continual centre functioning. For most principals, achieving and maintaining centre registration status seem to be desired goals. However, with limited support, the study found that this goal remains elusive and affects the centres' ability and capacity to provide quality SRP.

Despite all the challenges faced by ECD centres, respondents reported positive learning outcomes indicating that ECD centres do, to some extent, manage to deliver quality SRP.

Caregivers' significance in SRP has been strongly highlighted in this study. Most caregivers are well aware of the importance of early learning and seek to enrol their children in an ECD centre with a good reputation. Unlike peers who treat ECD centres as child-minding facilities, these

caregivers demand proper early learning for their children. Although caregivers consider ECD centres' ability to prepare a child for learning and tend to equate a centre's registration status with service quality, they seem to lack an understanding of the importance of quality teaching competence to SRP. This could be because caregivers' onboarding to ECD centre processes is still weak and as such, parents do not know what to expect from the ECDPs. Caregivers of children within the nought to two years age group were reported to be among those who do not carry on SRP activities at home. This could be because of a lack of communication with ECDPs about the importance of what is done in the ECD centres. In general, whether a caregiver is likely to cooperate with SRP practices is highly influenced by their SES, motivation, societal norms, communication with ECDPs, level of education and age.

## 6.3 Recommendations

Challenges to SRP outweigh the strengths at community-based ECD centres in Gugulethu and require considerable support within an enabling environment to deliver quality SRP. This could include more involvement with the private and NGO sectors to initiate funding and invest in ECD centres to upgrade them to at least the DSD standards, thereby giving access to funding in the form of the government subsidy for children at registered facilities. Existing structures such as the Principals' Forum are working and can be strengthened and new ECDPs' forums developed to aid sharing of available resources and knowledge of SRP. The skills training of existing ECDPs and recruitment of assistants/ volunteers would strengthen human capacity for quality learning outcomes, while the DBE, as the new ECD sector oversight authority, should prioritise re-examining support infrastructure and regulations to ease funding constraints for community-based ECD.

The following additional recommendations are made to address some of the SRP challenges revealed in the study.

 Since an ECD centre's registration status does not guarantee the provision of holistic, quality school preparation for children, the DSD/ DBE need to rethink the emphasis they place on registration as the primary qualifying criterion for funding and organisational support to ECDs. This is in keeping with Harrison's (2012) observations that conditional support offered to ECDs always creates challenges for ECDs.

- All ECD centres should be granted government subsidies or sufficient material support to ensure that all young children in poor communities, regardless of the registration status of the ECD, are afforded quality educational facilities and the best opportunity to be prepared adequately for transition to schooling. The subsidy system and norms and standards should be revised to allow unregistered ECD centres to be upgraded, with government support.
- An administrative database should be created to monitor ECD facilities to improve the government's ability to identify and assist ECD centres in need of material, funding or training support.
- There is a need for a population-based framework for planning ECD that has clear coverage targets for service delivery because the current system is blind to the majority of young children who are outside the system, and those children who are in unregistered ECD facilities.
- The political responsibility for the implementation of a universally accessible quality early education system is transitioning from the DSD to the DBE, which will be solely accountable for the ECD sector (Dirks, 2021). The currently shared responsibility comes with challenges of communication failures and relinquished responsibility (Kotzé, 2015). Part of the problem is that the ECD sector (that is, all levels, not just Grade R) is not recognised as a compulsory educational level in the South African education system. The management of the ECD sector has been reported to be disjointed, mismanaged, misaligned and lacking in cohesion (Modise, 2019b). Successful delivery of children's holistic development of necessary skills requires integration between various stakeholders starting with a degree of synergy between the DSD, DOH and DBE, which are variously involved in the training of caregivers and ECDPs (Modise, 2019a). Prioritisation of ECD should be a collaborative effort of the government, national actions and financial investment (Ashley-Cooper et al., 2019). Improving quality encompasses increasing financial resources to centres coupled with interventions to improve centre management and administration (Biersteker et al., 2016; Mbarathi et al., 2016). The governance transition from the DSD to the DBE should see a thorough analysis of the shortcomings of the current sector being commissioned and corrective measures taken to enhance the performance of communitybased ECDs and to maximise the reach of quality ECD in poorer communities. The DBE,

as the authority for both schooling and pre-Grade R, is now ideally placed to ensure efficient SRP.

- Data on unregistered centres and what is done to improve their status remain largely unknown and unavailable although there is consensus that much should be done to improve the quality of poor children's lives in South Africa (Atmore et al., 2012). An information management data system should be set up in each province to include data on all ECD centres, whatever their registration status (Ashley-Cooper et al., 2019). Engagement between researchers and policymakers in government is important for improving ECCE services to economically disadvantaged children in a middle-income developing country (Petersen, 2006, in Biersteker et al., 2016). Such engagements demonstrate to decision-makers the importance of using research evidence to inform social policy, programming and resourcing in South Africa. The government should gather usable data to account for and monitor ECD centres through a national audit. Since the ECD sector is dynamic, regular audits of the sector should be entrenched in the government's management system.
- One of the research findings of this study is that the majority of the community-based ECDPs are not formally qualified in ECD, or are underqualified, partly because ECDPs find it difficult to enrol in TVET colleges. This impacts the professionalising of ECD and the potential scale and quality of ECD services that could be achieved. Rather than training masses of people at level 1, the government should focus resources on enabling existing ECDPs to upgrade their qualifications and removing the reported roadblocks preventing ECDPS from accessing and completing better qualifications faster. This training focus should include upgrading the professional skills of ECD centre managers and owners.
- In revisiting the governance and organisation of the ECD sector, the government should investigate all possible solutions including those proposed by professional organisations and academics in the sector and practices in other countries. In Ethiopia, for example, ECE is not compulsory and has minimal governmental input. The private and the NGO sectors fund and invest in ECE in preschool centres that are beneficial for children from lower SES (Woldehanna, 2011).
- This study explored ECD centres' engagement with parents and caregivers. Integration of services means acknowledging and empowering parents as partners in the ECD education of their children. Parent training and community development programmes are needed to

bridge the gap between what the parents understand to be education and what the DBE expects from their children. Parental involvement encourages ECD centres to see them as partners in programme development. Further research on homework content and strategies would also be helpful to assist parents to develop healthy routines such as promoting regular homework from the earliest stages (Pitt et al., 2013).

• It is recommended that future initiatives in the ECD sector prioritise research into and monitoring and evaluation of the importance of parental involvement and ways to assist them to contribute to the ECD and the SRP of their children.

## 6.4 Conclusion

This study has shown that community-based ECD centres in Gugulethu strive to provide safe and intellectually stimulating spaces for children to engage in early learning. However, the study has also highlighted challenges and limitations that impede ECD centres from achieving their pedagogic and developmental objectives. These relate to registration status, SES, funding, infrastructure and poverty-related social impacts but also to the capacity of ECD centre managers, staff and parents to contribute optimally to children's ECD and SRP in a community setting.

The sector is in a governance transition, which presents challenges as well as opportunities to revisit the provision of ECD services and infrastructure to improve service delivery to parents and children in communities like Gugulethu. At the very least, the registration subsidy system, and the norms and standards on which it is based, should be overhauled to accommodate the reality that the vast majority of South African children live in poverty. The government, particularly, has to accept that if South Africa is to overturn the appalling performance of its education system, it has to start by vastly improving the SRP of children, from birth.

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# **Appendices**

## Appendix A: Information Sheet and Consent Form for Key Informants



University of the Western Cape

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## INFORMATION SHEET FOR AN INTERVIEW WITH KEY INFORMANTS WORKING IN EARLY CHILDHOOD DEVELOPMENT (ECD) MANAGEMENT

**Project Title**: School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

## What is this study about?

This research project is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. The purpose of this study is to fulfil academic requirements. This study is significant because it addresses early learning needs for community Early Childhood Development (ECD) Centres in Gugulethu township. You are invited to participate in this study because of your involvement in supporting ECD projects in Cape town, therefore you are appropriate to provide rich information about the ECD sector.

## What is the Interview about?

The Interview seeks to understand your opinions, experience or views on the state of community-based ECD centres' school readiness preparation in Cape town.

## Will my participation in this study be kept confidential?

You will be treated with confidentiality and integrity. All personal information will be kept confidential and will remain anonymous. You will be required to sign a consent form before partaking in the study to protect your privacy and confidentiality. This also means that if the study is published, information that may make you identifiable as the participant will not be included. You will be asked for permission for this Key informant interview to be audio-recorded, only for purposes of guaranteeing capturing your responses with accuracy. Please note your name is not going to be mentioned in the audio recording; we will introduce ourselves to each other before we start recording, so your name and identity will not be attached or associated with any of the audio-recorded discussions. The audio recordings are going to be stored carefully in a secure electronic file. No one outside the research team is going to have access to them. Once we have finished conducting the research, all the audio recordings are going to be deleted.

## Can you refuse to participate in this study?

Yes. Your participation in this study is entirely voluntary. You do not have to answer any questions that you do not want to nothing will happen if you do. Also, if you choose not to participate, you do not have to give a reason.

## What are the risks of this research?

There are no risks to participating in this study. You are going to discuss your honest and open opinions and views. Remember, you are also free to refuse to give any inputs in the discussion that you do not want to give, and you are free to terminate your participation at any point in the research.

## Is any assistance available if I am negatively affected by participating in this study?

The student will refer you to trusted counsellors who will provide you with required support.

## What are the benefits of this research?

There are no material benefits for the participants (respondents), however, by participating in this interview you contribute to providing updated information on the state of ECD. This information is for actioning support strategies for unsupported ECD centres.

# Do I have to complete the whole interview proceedings or may I withdraw from the process at any time?

Your participation in this research is completely voluntary. Should you feel the need to withdraw from the study, you can do so at any time.

## How long will it take to complete the whole interview process?

The full interview session will take about 30 to 45 minutes to complete.

## Do I need to bring anything to the interview?

You do not have to bring anything.

## What if I have questions?

## UNIVERSITY of the

This research is being conducted by Miriam Chikwanda, a student at the University of the Western Cape.

If you have any questions about the research study or if you have any questions regarding your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact the student's research supervisor, **Professor Amiena Bayat**, at the Institute for Social Development (ISD), University of the Western Cape.

Professor Amiena Bayat Lecture (021) 959 3858/6 Institute for Social Development School of Government University of the Western Cape Private Bag X17 Bellville 7535



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

**Letter of consent**: To participate in an interview for the study conducted by Miriam Chikwanda entitled: School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

I, ...., have read and understood the information sheet regarding this research.

I have had the opportunity to ask any questions related to this study, and received satisfactory answers to my questions and any additional details I wanted.

I understand that my participation in this study is voluntary, I am free to choose not to participate and I have the right to withdraw from the study at any time, without having to explain myself.

I am aware that the information I provide in the key informant interview might result in research which may be published.

I understand that any written output resulting from this key informant interview will never use my name, that is my identity will not be revealed in any form.

I agree to answer the questions to the best of my ability.

I may also refuse to answer questions that I don't want to answer.

I understand and agree that this interview may be voice recorded and that the recording will be deleted after note-taking

By signing this letter, I give free and informed consent to participate in this Key informant interview.

Date: .....

Participant Name .....

Participant Signature.....

Interviewer Name .....

Interviewer Signature.....

# **Appendix B: Information Sheet and Consent Form for Principals**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

# INFORMATION SHEET AND CONSENT FORM FOR AN INTERVIEW WITH COMMUNITY-BASED EARLY CHILDHOOD (ECD) CENTRE PRINCIPALS

**Project Title:** School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

#### What is this study about?

This research project is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. The purpose of this study is to fulfil academic requirements. This study is significant because it addresses early learning needs for community Early Childhood Development (ECD) Centres in Gugulethu township. You are invited to participate in this study because of your role as a principal of a community-based ECD centre, therefore you are the appropriate person to provide rich information about how your ECD centre operates.

#### What is the interview about?

The interview seeks to understand your opinions, experience or views on the state of community-based ECD centres in Cape town.

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#### Will my participation in this study be kept confidential?

You will be treated with confidentiality and integrity. All personal information will be kept confidential and will remain anonymous. You will be required to sign a consent form before partaking in the study to protect your privacy and confidentiality. This also means that if the study is published, information that may make you identifiable as the participant will not be included. You will be asked for permission for this principal's interview to be audio recorded, only for purposes of guaranteeing capturing your responses with accuracy. Please note your name is not going to be mentioned in the audio recording; we will introduce ourselves to each other before we start recording, so your name and identity will not be attached or associated with any of the audio-recorded discussions. The audio recordings are going to be stored carefully in a secure electronic file. No one outside the research team is going to be deleted.

## Can you refuse to participate in this study?

Yes. Your participation in this study is entirely voluntary. You do not have to answer any questions that you do not want to nothing will happen if you do. Also, if you choose not to participate, you do not have to give a reason.

## What are the risks of this research?

There are no risks to participating in this study. You are going to discuss your honest and open opinions and views. If at any point you feel uncomfortable with participating in this study, please let the researcher know. You are also free to refuse to give any inputs in the discussion that you do not want to give, and you are free to terminate your participation at any point in the research.

## Is any assistance available if I am negatively affected by participating in this study?

The student will refer you to trusted counsellors who will provide you with required support.

**What are the benefits of this research?:** There are no material benefits for the participants (respondents), however by participating in this interview you contribute to providing updated information on the state of ECD. This information is for actioning support strategies for unsupported ECD centres.

**Do I have to complete the whole interview proceedings or may I withdraw from the process at any time?** Your participation in this research is completely voluntary. Should you feel the need to withdraw from the study, you can do so at any time.

How long will it take to complete the whole interview process?: The full interview session will take about 30 to 45 minutes to complete.

Do I need to bring anything to the interview? You do not have to bring anything.

What if I have questions? This research is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. If you have any questions about the research study or if you have any questions regarding your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact the student's research supervisor, **Professor Amiena Bayat**, at the Institute for Social Development (ISD), University of the Western Cape.

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University of the Western Cape

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Letter of consent: To participate in a principal's interview for the study conducted by Miriam Chikwanda entitled- School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

I, ...., have read and understood the information sheet regarding this research.

I have had the opportunity to ask any questions related to this study, and received satisfactory answers to my questions and any additional details I wanted.

I understand that my participation in this study is voluntary, I am free not to participate and have the right to withdraw from the study at any time, without having to explain myself.

I am aware that the information I provide in the principal's interview might result in research which may be published.

I understand that any written output resulting from this Principal's interview will never use my name, that is my identity will not be revealed in any form.

I agree to answer the questions to the best of my ability.

I may also refuse to answer questions that I don't want to answer.

I understand and agree that this Principal's interview may be voice recorded.

By signing this letter, I give free and informed consent to participate in this Principal's interview.

Date: .....

Participant Name .....

Participant Signature.....

Interviewer	Name					
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Interviewer Signature.....

# **Appendix C: Information Sheet and Consent Form for Practitioners**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

# INFORMATION SHEET AND CONSENT FORM FOR A FOCUS GROUP DISCUSSION WITH COMMUNITY-BASED EARLY CHILDHOOD (ECD) CENTRE <u>PRACTITIONERS EDUCATING</u> CHILDREN WITHIN THE AGE RANGE OF 0 TO 4 YEARS

**Project Title:** School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

What is this study about? This research project is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. The purpose of this study is to fulfil academic requirements. This study is significant because it addresses early learning needs for community Early Childhood Development (ECD) Centres in Gugulethu township. You are invited to participate in this study because of your role as an educator of a community-based ECD centre, therefore you are the appropriate person to provide rich information about your role at this ECD centre.

What is the Interview about? The Interview seeks to understand your opinions, experience or views on the state of community-based ECD centres in Cape town.

Will my participation in this study be kept confidential? All participation will be treated with confidentiality and integrity. All personal information will be kept confidential and will remain anonymous. You will be required to sign a consent form before partaking in the study to protect your privacy and confidentiality. This also means that if the study is published, information that may make you identifiable as the participant will not be included. You will be asked for permission for this discussion of this focus group to be audio recorded, only for purposes of guaranteeing capturing your responses with accuracy. Please note your name is not going to be mentioned in the audio recording; we will introduce ourselves to each other before we start recording, so your name and identity will not be attached or associated with any of the audio-recorded discussions. The audio recordings are going to be stored carefully in a secure electronic file. No one outside the research team is going to be destroyed by deleting. As this is a focus group discussion, we ask that you keep other group members' contributions confidential by not sharing any details of this discussion outside with anyone after this discussion is complete.

**Can you refuse to participate in this study?** Yes. Your participation in this study is entirely voluntary. You do not have to answer any questions that you do not want to nothing will happen if you do. Also, if you choose not to participate, you do not have to give a reason.

What are the risks of this research? There are no risks to participating in this study. You are going to discuss your honest and open opinions and views. If at any point you feel uncomfortable with participating in this study, please let the researcher know. You are also free to refuse to give any inputs in the discussion that you do not want to give, and you are free to terminate your participation at any point in the research.

## Is any assistance available if I am negatively affected by participating in this study?

The student will refer you to trusted counsellors who will provide you with required support.

What are the benefits of this research? There are no material benefits for the participants (respondents), however, by participating in this interview you contribute to providing updated information on the state of ECD. This information is for actioning support strategies for unsupported ECD centres.

**Do I have to complete the whole interview proceedings or may I withdraw from the process at any time?** Your participation in this research is completely voluntary. Should you feel the need to withdraw from the study, you can do so at any time.

**How long will it take to complete the whole interview process?** The full interview session will take about 30 to 45 minutes to complete.

Do I need to bring anything to the interview? You do not have to bring anything.

#### What if I have questions?

This research is being conducted by **Miriam Chikwanda**, a student at the University of the Western Cape. If you have any questions about the research study or if you have any questions regarding your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact the student's research supervisor, **Professor Amiena Bayat**, at the Institute for Social Development (ISD), University of the Western Cape.

Professor Amiena Bayat Lecture (021) 959 3858/6 Institute for Social Development School of Government University of the Western Cape Private Bag X17 Bellville 7535



University of the Western Cape

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**Letter of consent:** To participate in an ECD centre Practitioners' focus group discussion for the study conducted by Miriam Chikwanda entitled School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

I, ....., have read and understood the information sheet regarding this research.

I have had the opportunity to ask any questions related to this study, and received satisfactory answers to my questions and any additional details I wanted.

I understand that my participation in this study is voluntary, I am free not to participate and have the right to withdraw from the study at any time, without having to explain myself.

I am aware that the information I provide in the ECD practitioner's focus group discussion might result in research which may be published.

I understand that any written output resulting from the ECD practitioner's focus group discussion will never use my name, that is my identity will not be revealed in any form.

I agree to answer the questions to the best of my ability.

I may also refuse to answer questions that I don't want to answer.

I understand and agree that this ECD practitioner's focus group discussion may be voice recorded.

I agree to keep the insights and stories shared by other participants in this focus group confidential and I will not disclose any personal details of other participants after this focus group has ended.

By signing this letter, I give free and informed consent to participate in this ECD practitioner's focus group discussion.

Date:
Participant Name
Participant Signature
nterviewer Name
nterviewer Signature

# **Appendix D: Information Sheet and Consent Form for Parents/ Caregivers**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

# INFORMATION SHEET FOR A GROUP INTERVIEW WITH CAREGIVERS/ PARENTS RESIDING IN GUGULETHU WITH CHILDREN (AGED 0–4 YEARS) ATTENDING A COMMUNITY-BASED ECD CENTRE

**Project Title**: School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

#### What is this study about?

This research project is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. The purpose of this study is to fulfil academic requirements. This study is significant because it addresses early learning needs for community Early Childhood Development (ECD) Centres in Gugulethu township. You are invited to participate in this study because of your role as a caregiver of a child attending this ECD centre, therefore you are appropriate to provide rich information about your interaction with the ECD centre.

#### What is the Interview about?

This interview seeks to understand how you are involved with the ECD centre your child is attending.

#### Will my participation in this study be kept confidential?

Your contributions will be treated with privacy. What you share with me will not be told to anyone outside this study. You will be required to sign a consent form before partaking in the study to protect your privacy and confidentiality. This also means that if the study is published, your personal details will not be included. You will be asked for permission for this caregiver's/ parent's interview to be audio-recorded, only for purposes of guaranteeing capturing your responses correctly. Please note your name is not going to be mentioned in the audio recording; we will introduce ourselves to each other before we start recording, so your name and identity will not be attached or associated with any of the audio-recorded discussions. The audio recordings are going to be stored carefully in a secure electronic file. No one outside the research team is going to have access to them. Once we have finished conducting the research, all the audio recordings are going to be deleted.

#### Can you refuse to participate in this study?

Yes. Your participation in this study is entirely voluntary. You do not have to answer any questions that you do not want to nothing will happen if you do. Also, if you choose not to participate, you do not have to give a reason.

## What are the risks of this research?

There are no risks to participating in this study. You are going to discuss your honest and open opinions and views. Remember, you are also free to refuse to give any inputs in the discussion that you do not want to give, and you are free to terminate your participation at any point in the research.

## Is any assistance available if I am negatively affected by participating in this study?

The student will refer you to trusted counsellors who will provide you with required support.

#### What are the benefits of this research?

There are no material benefits for the participants (respondents), however, by participating in this interview you contribute to providing updated information on the state of ECD. This information is for actioning support strategies for unsupported ECD centres.

# Do I have to complete the whole interview proceedings or may I withdraw from the process at any time?

Your participation in this research is completely voluntary. Should you feel the need to withdraw from the study, you can do so at any time.

## How long will it take to complete the whole interview process?

The full interview session will take about 30 to 45 minutes to complete.

## Do I need to bring anything to the interview?

You do not have to bring anything. UNIVERSITY of the

## What if I have questions?

# WESTERN CAPE

This research is being conducted by **Miriam Chikwanda**, a student at the University of the Western Cape. If you have any questions about the research study or if you have any questions regarding your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact the student's research supervisor, **Professor Amiena Bayat**, at the Institute for Social Development (ISD), University of the Western Cape.

Professor Amiena Bayat Lecture (021) 959 3858/6 Institute for Social Development School of Government University of the Western Cape Private Bag X17 Bellville 7535



University of the Western Cape

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**Letter of consent:** To participate in a caregivers/ parents group interview for the study conducted by Miriam Chikwanda, entitled - School Readiness and Community based ECD Centres in Low- income Communities: Examining the case of Gugulethu, Western Cape Province.

I, ....., have read and understood the information sheet regarding this research /I understand the information that the student read out to me regarding this research study.

I have had the opportunity to ask any questions related to this study, and received satisfactory answers to my questions and any additional details I wanted.

I understand that my participation in this study is voluntary, I am free not to participate and have the right to withdraw from the study at any time, without having to explain myself.

I am aware that the information I provide in the caregivers'/ parents' group interview might result in research which may be published.

I understand that any written output resulting from this caregivers'/ parents' group interview will never use my name, that is my identity will not be revealed in any form.

I agree to answer the questions to the best of my ability.

I may also refuse to answer questions that I don't want to answer.

I understand and agree that this caregivers'/ parents' group interview may be voice recorded.

I agree to keep the insights and stories shared by other participants in this group interview confidential and I will not disclose any personal details of other participants after this focus group has ended.

By signing this letter, I give free and informed consent to participate in this caregivers'/ parents' group interview.

Date:
Participant Name
Participant Signature
Interviewer Name
Interviewer Signature

# **Appendix E: Information Sheet and Consent Form for Facility Observation**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

# INFORMATION SHEET FOR AN OBSERVATION OF A COMMUNITY-BASED ECD CENTRE IN GUGULETHU

**Project Title**: School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

#### What is this study about?

This research project is being conducted by Miriam Chikwanda, a student at the University of the Western Cape. The purpose of this study is to fulfil academic requirements. This study is significant because it addresses early learning needs for community Early Childhood Development (ECD) Centres in Gugulethu township. In your capacity as the principal, you are requested to give permission for the student to observe how your ECD centre functions.

#### What is the observation about?

This observation is about understanding and recording how your ECD centre functions, to prepare children for school.

WESTERN CAPE

#### Will my participation in this study be kept confidential?

All will the information recorded about this ECD centre will be treated with privacy. What is observed will not be told to anyone outside this study. You will be required to sign a consent form before the observation to protect the centre's privacy and confidentiality. This also means that if the study is published, personal details of the ECD centre will not be included. You will be asked for permission for pictures to be taken, only for purposes of guaranteeing proof that the observation took place. Pictures will not include people's faces. The pictures taken will be to be stored carefully in a secure electronic file. No one outside the research team is going to have access to them. Once we have finished conducting the research, all the pictures are going to be deleted.

#### Can you refuse for this observation to take place?

Yes. Your permission for this observation is entirely up to you. You do not have to give the student permission to observe your centre.

### What are the risks of this research?

There are no risks to participating in this study.

## What are the benefits of this research?

There are no material benefits or immediate benefits for the ECD centre, however, this observation may contribute to providing updated information on the state of ECD. This information is important for actioning support strategies for unsupported ECD centres.

## Can I stop the observation process at any time?

Should you freely feel the need to withdraw your permission for this observation at any time.

TR NIL BILL

## How long will it take to complete the whole observation process?

The observation will take place from the time the student enters your premises till the student leaves (from 8 am -12 pm). The student will be outside the classrooms, and observe classes of children aged 0—4 years for an hour per class.

## Do I need to provide anything else for this observation?

You do not have to provide anything else.

## What if I have questions?

This research is being conducted by **Miriam Chikwanda**, a student at the University of the Western Cape. If you have any questions about the research study or if you have any questions regarding your rights as a research participant or if you wish to report any problems you have experienced related to the study, please contact the student's research supervisor, **Professor Amiena Bayat**, at the Institute for Social Development (ISD), University of the Western Cape.

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University of the Western Cape

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**Letter of consent:** To indicate permission for the student to conduct an ECD facility observation for the study conducted by Miriam Chikwanda entitled School Readiness and Community-based ECD Centres in Low-income Communities: Examining the case of Gugulethu, Western Cape Province.

I, ....., have read and understood the information sheet regarding this research.

I have had the opportunity to ask any questions related to this study, and received satisfactory answers to my questions and any additional details I wanted.

I understand that giving permission is voluntary, I am free to stop the facility observation at any time, without having to explain myself.

I am aware that the information gathered during this facility observation might result in research which may be published.

I understand that any written output resulting from this facility observation will never use the ECD centre name or reveal any centre identity details in any form.

I agree to give access to the ECD centre for a facility observation and I may also refuse access to some parts of the ECD centre.

I understand and agree that pictures will be taken during this facility observation.

By signing this letter, I give free and informed consent to the undertaking of this ECD centre's facility observation.

Date:
Participant Name
Participant Signature
Interviewer Name
Interviewer Signature

# Appendix F: Interview Guide for Key informants



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

## INTERVIEW GUIDE WITH KEY INFORMANTS - EARLY CHILDHOOD DEVELOPMENT MANAGEMENT OFFICIALS

Date of interview	
Starting time of interview	
Ending time of interview	
Name of Organisation	
PURPOSE AND BACKGROU	ND

The University of Western Cape has granted permission for the Researcher to conduct a research study on the implication of community ECDs centre on preparing pre-schoolers for schooling. This study is being conducted for academic purposes.

WESTERN CAPE

With this in mind, I would therefore like to invite and encourage you to share your experiences, views, knowledge and opinions with me. The information gathered will be reported on, but you will not be singled out in the findings, nor will your identity be disclosed unless you agree that it can or should.

Do you have any questions before we proceed?	
Yes	No

#### SECTION A - ABOUT THE RESPONDENT

- 1. Please introduce yourself (Probe on position of designation in the ECD sector)
- 2. What are your roles and responsibilities in the ECD sector?
- 3. How long have you been involved with the ECD sector?

## SECTION B- SCHOOL READINESS INCORPORATION

- 4. What is your understanding of school readiness preparation?
- 5. What does a pre-schooler who has been adequately properly prepared for schooling look like? (*Note to Researcher*) Probe for key elements of school readiness (i.e. socio-emotional, physical, language and cognitive development)

- 6. What does the government require the ECD practitioners to incorporate for school readiness preparing in teaching and learning? (*Note to Researcher*) Probe for key elements of school readiness (i.e. socio-emotional, physical, linguistic and cognitive development)
- 7. What do you think enables incorporation of school readiness in ECD teaching and learning?
- 8. What do you think prevents incorporation of school readiness in ECD teaching and learning?

## SECTION C - CONDUCIVE ENVIRONMENT: INFRASTRUCTURE & MANAGEMENT

- 9. Does the government have requirements for ECD centre setup to be conducive for school readiness? What are they? i.e. in governmental terms what makes an ECD facility appropriate for school readiness preparation?
- 10. What are ECD principals required to do in terms of managing their facilities in a way that promotes school readiness preparation (*Note to Researcher*) Probe for: governance and management, Professional skills development, Programme development)
- 11. How are ECD facilities supported to ensure that they adequately prepare children for schooling?

#### **ECD Registration process**

- 12. How does the registration process affect the ability of community-based ECD centres' to adequately incorporate school readiness preparation?
- 13. How are ECD centres supported through the registration process?

## SECTION C: PARENTS/ CAREGIVERS INVOLVEMENT

- 14. In your knowledge, to what extent are caregivers in the Gugulethu community knowledgeable of the importance of supporting school readiness preparation and how do they currently exercise school readiness preparation.
  - What enables or hinders parents'/ caregivers' ability to support school readiness preparation?

# SECTION D: RECOMMENDATIONS

- 15. What would be recommended as improvement measures necessary for strengthening school readiness preparation in community-based ECD centres? In terms of:
  - Policy changes
  - Professional development
  - Services integration and future research

#### \*\*\*\*\*\*\*THANK YOU FOR YOUR PARTICIPATION\*\*\*\*\*\*\*\*\*

# **Appendix G: Interview Guide for Principals**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

## INTERVIEW GUIDE FOR ECD PRINCIPAL (DURATION – APPROX 30 minutes)

Date of interview	
Starting time of interview	
Ending time of interview	
Name of ECD centre	

# PURPOSE AND BACKGROUND

The University of Western Cape has granted permission for the Researcher to conduct a research study on the implication of community ECDs centre on preparing pre-schoolers for schooling. This study is being conducted for academic purposes.

With this in mind, I would therefore like to invite and encourage you to share your experiences, views, knowledge and opinions with me. The information gathered will be reported on, but you will not be singled out in the findings, nor will your identity be disclosed unless you agree that it can or should.

Do you have any questions before we proceed? Yes/No

## SECTION A INTRODUCTION

- 1. Please introduce yourself:
  - including qualifications, position, role and responsibilities Probe: *How long have you worked in ECD overall and how long you have been in this position at this ECD centre?*

#### About the ECD centre

- 2. How long has this ECD centre been operating?
- 3. What age groups do you cater to? How many staff what are their qualifications?

## SECTION B - SCHOOL READINESS INCORPORATION

4. What is your understanding of school readiness preparation? What does a pre-schooler who has been adequately properly prepared for schooling look, think, act like?

- 5. Do you think all the children leave this centre being adequately prepared for formal school? How do you prepare them for school? (Probe for key elements of school readiness (i.e. socio-emotional, physical, language and cognitive development)
- 6. What enables you to prepare children for formal school? What prevents you from preparing the children for formal school?

## SECTION C - CONDUCIVE ENVIRONMENT AND INFRASTRUCTURE

- 7. How would you say the set-up (infrastructure) of this ECD centre supports child's learning? How does the set-up affect learning?
- 8. If any What changes or improvement would you like to make regarding the set upon this ECD centre?
- Facility Management (Centre governance, Professional skills development, Programme development).
  - 9. How would you say you support ECD practitioners at this centre to ensure that they are well equipped to provide ECD programmes (*if none probe for challenges in doing so*)? *Probe for:* How ECD practitioner's skills and expertise continually improve?
  - 10. In your role as a facility manager, who provides this ECD with support to ensure that it runs in the best way possible?
    - In your opinion how adequate is this support? Please explain
    - What other support do you wish you could receive, and from who?

## **ECD Registration process**

- 11. How does the registration process affect the ability of your ECD centres' to adequately incorporate school readiness preparation?
- 12. How are ECD centres supported through the registration process?

## SECTION D - PARENTS/ CAREGIVERS INVOLVEMENT

- 13. Do you think it's important for caregivers to prepare their children for school? How can they do this?
- 14. Have caregivers been involved in preparing children for school? What allows enables them to do so/ What prevents them from doing so?
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#### SECTION E: IMPROVEMENT MEASURES FOR STRENGTHENING ECD CANTER'S ABILITY TO PREPARE FOR SCHOOLING (Policy changes, Professional development, Services integration and future research)

- 15. What would you say needs to improve to allow ECD centres to properly prepare children for schooling?
- 16. What needs to improve in the way parents are involved in children's early learning?

What else would you like to add?

### \*\*\*\*\*THANK YOU FOR YOUR PARTICIPATION\*\*\*\*\*

# **Appendix H: Focus Group Discussion Guide for Practitioners**



University of the Western Cape

Private Bag X17, Bellville 7535, Cape Town, South Africa Telephone: 021 959 3858/6 Fax: 021 959 3865 E-mail: <u>pkippie@uwc.ac.za</u> or <u>mdinbabo@uwc.ac.za</u>

## FOCUS GROUP DISCUSSION GUIDE FOR COMMUNITY EARLY CHILDHOOD DEVELOPMENT CENTRES PRACTITIONERS/ EDUCATORS

Name of ECD centre	4				
Duration of interview					
Date of discussion					
Venue					
Gender	Qualification	Age	Age group of children taught	Number of children taught	Participant Signature
		VESTE	KN CAPE		

## (DURATION – 1.5 HOURS)

#### **BACKGROUND AND PURPOSE**

The University of Western Cape has granted permission for the Researcher to conduct a research study on the implication of community ECDs centres on preparing pre-schoolers for schooling. This study is being conducted for academic purposes. With this in mind, I would therefore like to invite and encourage you to share your experiences, views, knowledge and opinions with me. The information gathered will be reported on, but you will not be singled out in the findings, nor will your identity be disclosed unless you agree that it can or should.

## SECTION A - INTRODUCTION

- 17. Please introduce yourself: including your qualifications, level of teaching, Duration of employment Overall and at this ECD centre?
- 18. What are your roles and responsibilities?

## SECTION B - SCHOOL READINESS INCORPORATION

- 19. What is your understanding of school readiness preparation?
- 20. What does a pre-schooler who has been adequately properly prepared for schooling look, think, act like? (Note to Researcher) (Probe for key elements of school readiness (i.e. socio-emotional, physical, language and cognitive development)
- 21. Do you think all the children leave this centre ready for formal school?
- 22. How do you incorporate school readiness preparing in your teaching and learning? Who supports you and is the support enough?
  - How do you prepare children for school physically? socially? emotionally? linguistically? and cognitively?
- 23. What enables you to prepare children in your class to be ready for school?
- 24. What prevents you from preparing the children in your class for schooling?

## SECTION C - CONDUCIVE ENVIRONMENT: INFRASTRUCTURE & MANAGEMENT

- 25. How is your ECD centre built/ structured to be beneficial for school readiness preparation?
- 26. Is there anything about this ECD centre that prevents children from being adequately prepared for schooling?
- 27. How does the management of this ECD centre promote school readiness preparation? (*Note to Researcher*) (Probe for: are they involved in governance and management decisions, involved in any professional skills development activities, Programme development assistance)
- 28. How are ECD facilities supported to ensure that they adequately prepare children for schooling? Is this support enough

## SECTION D - PARENTS/ CAREGIVERS INVOLVEMENT

- 29. Do you think it's important for caregivers to be actively involved in preparing their children for school, why? How can they be involved?
- 30. In your experience are caregivers knowledgeable of the importance of supporting school readiness preparation and how do they currently exercise school readiness preparation?
  - What enables or hinders parents'/ caregivers' ability to support school readiness preparation?

# SECTION E: IMPROVEMENT MEASURES FOR STRENGTHENING ECD CENTRE'S ABILITY TO PREPARE FOR SCHOOLING

(Policy changes, Professional development, Services integration and future research)

- 31. What would you say needs to improve to allow ECD centres to properly prepare children for schooling?
- 32. What else would you like to add?

Thank you for your time

# Appendix I: Group Interview Guide for Parents/ Caregivers



University of the Western Cape

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## GROUP INTERVIEW GUIDE FOR CAREGIVERS/ PARENTS OF CHILDREN ATTENDING COMMUNITY ECD CENTRES

Name of ECD centre	5			2	
Duration of interview					
Date of discussion					
Venue				1.	
Participant Gender	Participant's job	Participant Age	Number of children at the ECD centre	Age of the children	Participant Signature

# (DURATION - APPROX 45 - 60 MINS)

#### **Background and Purpose**

The University of Western Cape has granted permission for the Researcher to conduct a research study on the implication of community ECDs centre on preparing pre-schoolers for schooling. This study is being conducted for academic purposes. With this in mind, I would therefore like to invite and encourage you to share your experiences, views, knowledge and opinions with me. The information gathered will be reported on, but you will not be singled out in the findings, nor will your identity be disclosed unless you agree that it can or should.

#### SECTION A: Profiling of parents/ caregivers

1. Please introduce yourself including your:

*Probe: How long you have been living in this community, Job and/ or education level, the size of your family, Number of children in your care and number of those attending an ECD centre* **SECTION B: Functioning of a community ECD centre** 

- 2. In your opinion what feature does an excellent ECD centre for your child have? What do you look for when you choose an ECD centre for your child/ren to attend?
  - {*Probe for interest in centre registration status, infrastructure, teaching systems, management and ability to freely and opening interact with ECD practitioners*}.

- 3. What are the main reasons for sending your child/ren to an ECD centre? Why did you choose this particular ECD centre for your child? Would you recommend this ECD centre to other parents, please explain?
  - How is our child being prepared for school through learning at this ECD centre?
  - What are the positive and or negative things that you have observed about this ECD centre?
  - Are there any challenges, that you know of being faced by this ECD centre or other ECD centres in general? Have you had any conversations with the ECD centre staff about the challenges you have noted and what was the response?

#### Section C: Parental involvement in school readiness preparation

- 4. Do you think it's important for you to be involved in improving your child's learning abilities? Why?
- 5. What must you do at home to prepare your child for school? What are you doing at home to prepare your child for formal school?
- 6. Is your child at the right level of school preparation right now according to his/her age? Why do you say so?
- 7. Do you think it's important for the ECD teachers to involve you in your child's learning?
  - How have you been doing so? If not, why do you think that is?
  - What do you like about their interaction with you in this regard? What don't you like? Is the way in which you are involved in your child's learning sufficient? What would you like to do more of?
- 8. Is there anything that prevents you from your active involvement in your child's learning?

#### **SECTION D: Recommendations and Suggestions**

- 9. What do you suggest should be done to improve how this ECD centre or any other in this community operates? Who should make these improvements? Whose role, is it?
  - What else do you wish to add?

\*\*\*\*\*THANK YOU FOR YOUR PARTICIPATION \*\*\*\*\*

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# **Appendix J: Facility Observation Guide**



University of the Western Cape

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# <u>OBSERVATION</u> GUIDE OF BOTH THE EXTERIOR AND INTERIOR OF THE EARLY CHILDHOOD DEVELOPMENT (ECD) CENTRES FOR RESEARCH ON EXPLORATION OF UNREGISTERED EARLY ECD CENTRES

## **DURATION – 8 -12 HOURS**

## PURPOSE AND BACKGROUND

The University of Western Cape has granted permission for the Researcher to conduct a research study on the implication of community ECDs centre on preparing pre-schoolers for schooling. This study is being conducted for academic purposes.

This instrument is designed to observe the entire duration of an ECD daily programme at a community ECD centre; it is to be used on the same day that the ECD centre staff interviews are used. This observation is intended to provide information about the day-to-day running of an ECD centre and also document the infrastructure set-up of the centre. This guide will be useful for the final write-up o the case study report therefore the researcher needs to write down as much detail as possible.

Date of observation	
Duration	
Name of centre	
Observer	

\*Note to researcher: approach the ECD principal (or deputy in case of unavailability). Go through the observation information and get consent to observe.

## SECTION A: ENVIRONMENTAL ASPECTS

**EXTERIOR** (*Describe the outside set-up of the ECD centre, pay attention to*):

• The surrounding building structures of the ECD centre

- Building structures making up the ECD centre
- Safety structures e.g. a fence, stairs, exits
- Equipment or toys used for outdoor play for each age group,
- Sanitary area, Kitchen. Eating area
- *Hygiene, etc.*

Add	notes	here
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## INTERIOR

The observer is to complete this part during lesson observations.

Describe in detail the inside set-up of the classrooms paying attention to:

- age appropriateness of the furniture
- *learning equipment/ toys available for each age group*
- Adornment of the room with charts, vibrant colours, mats, etc.

Add notes here

## DAILY ROUTINE

Describe in detail the routing for the day at the ECD centre, beginning from the time the learners come to the centre until they leave for home. Take note of the time frames and details of these times (if they were not observed please indicate that):

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- *Morning ring and prayer*
- Lesson time
- Snack time
- Toileting
- Napping

Add note here

## LESSON OBSERVATION

Check to see whether the children are separated by age and spent about an hour observing a class for each age group.

Add note here

## SECTION B: EDUCATOR'S BEHAVIOUR

Describe the educator's behaviour in terms of these aspects during the lesson observation

• Educator's response to children in terms of being caring, providing guidance, supervision but also allowing learners to discover learnings on their own.

- Supportiveness of children's social-emotional development, cognitive development, language development and early literacy (pay attention to the educator's instruction style and learning activities including use of Information Communication Technology)
- Educator's discipline class management measures

Add note here

### \*\*\*\*\*\*\*\*\*\*END OF OBSERVATION\*\*\*\*\*\*\*\*\*

