



NDA

National
Development
Agency

**EVALUATION OF THE NDA EARLY
CHILDHOOD DEVELOPMENT
PROGRAMME AS IMPLEMENTED BY
THE RESOURCE AND TRAINING
ORGANISATIONS (RTOS)**

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SOUTH AFRICAN SOCIAL SECURITY AGENCY

EVALUATION OF THE NDA EARLY CHILDHOOD DEVELOPMENT PROGRAMME AS IMPLEMENTED BY THE RESOURCE AND TRAINING ORGANISATIONS (RTOS)



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List of Acronyms

CSO	Civil Society Organisations
DoBE	Department of Basic Education
DoE	Department of Education
DSD	Department of Social Development
DPME	Department of Monitoring and Evaluation
ESC	Evaluation Steering Committee
IDP	Integrated Development Plan
KII(s)	Key Informant Interviews
MSC	Most Significant Change
NDA	National Development Agency
NGO	Non-Governmental Organisation
NSP	National Strategic Plan
OECD	Organisation for Economic Cooperation and Development
PME	Planning Monitoring and Evaluation
PR(s)	Principal Recipients
QRS	Quest Research Services
RTO	Resource Training Organisations
SPSS	Statistical Package for the Social Science
TBE	Theory Based Evaluation
ToC	Theory of Change
ToR(s)	Terms of References

Executive Summary

Background:

The early years in a child's life present a unique opportunity to establish strong foundations for healthy growth and development and later educational and economic success. Poverty, poor nutrition and health, and unstimulating home environments in developing countries, however, leave 200 million children under age 5 behind on their developmental trajectory. Through enhancing the capacity of Civil Society Organisations (CSOs) the NDA supports efforts aimed at tackling poverty, unemployment and inequality. The NDA capacity-building programme involved various capacity development areas which included the ECD technical capacity building of the CSOs that was delivered in most instances by the RTOs as the internal NDA did not have capacity to do it. Since its implementation in 2013, the trainings delivered by the RTOs have never been evaluated to assess if it has yielded desired results as intended to during its design.

Aim of the Evaluation:

The evaluation aimed at assessing the effect to which Resource and Training Organisations had on capacitating the Early Childhood Development programme. This was achieved through:

- Evaluating the design of ECD programme intervention
- Assessing programme implementation of the programme
- Conduct cost benefit analysis of the intervention
- Assessing the outcomes of the intervention
- Assessing possible sustainability of the project in the future
- Assessing challenges that were experienced during the implementation of the programme
- Drawing the lessons learnt from the intervention
- Proposing the recommendations for improving the programme and its implementation

Evaluation Methodology:

Data was obtained through In-depth Interviews (IDIs) that were conducted telephonically. Twelve (12) IDIs were conducted with RTO Key Informants nationwide and eighteen (18) IDIs with ECD practitioners who received training through the RTOs. The evaluation employed the Most Significant Change (MSC) technique that explores programme intervention outcomes qualitatively.

Evaluation Results:

A summary of the findings is presented below as per objectives, with recommendations in line with the findings.

Design of the Intervention Programme- Relevance

The intervention of the ECD program was clearly structured to respond to the ECD challenges as outlined by the South African ECD policy priorities, with the expectation to have solid and enduring effects on ECDs and the practitioners in a long run. As opportunities missed at this stage can hardly be compensated for in later stages, the RTOs made efforts for ECDs to be compliant according to the guidelines laid out by the Department of Social Development and different supporters of such cause. This allowed them to afford children an opportunity to acquire a basic right in the most professional way.

With skills being the greatest test in the ECD sector, the intervention managed to close this gap with its mediation through the up-skilling of practitioners in accordance with the ECD professional requirements to be fully qualified and fit the practicing criteria. By this, the programme ensured that practitioners came out fully knowledgeable with developing a child holistically.

Programme implementation – Effectiveness

The process of identifying ECDs needing capacitation was clear, be that as it may, once identified, completion of the trainings within a specified time period became challenging. A certain amount of training of the training happened outside working hours, while the span of certain trainings had to be extended to holidays and weekends so as to keep to the specified term of certain courses. This was an indication of time constrain for programme facilitators and a further indication of lack of human capacity.

Multi-aged centres are considered a rich source of learning, for both practitioners and children. However, for some centres, this did not come as a choice but more of a burden as practitioners had to handle high influxes of enrolment while there was lack of human capacity. This meant that daily tasks became interrupted as the attention needed to be divided and deprived children to benefit from the intended benefits of the programme. More training of practitioners could have boosted human capacity and ensured that a fair ratio of child-practitioner is maintained.

Although over 80% of practitioners were fully skilled in developing a child through NDA, there were concerns over the lack of uniformity regarding the training manual used as practitioners highlighted that they relied on three different forms of guidance, i.e., NCS manual (60%), old

ECD programme manual (10%) and their own experience (30%). The reasons for varying preference was unclear and could potentially have unintended negative outcomes.

It was worth noting the usage of technology during the monitoring and evaluation of the programme by the RTOs. This was in the form of a tracking digital system which allowed for real time monitoring thereby enabling the facilitators to correct mistakes as the activities unfolded on a daily basis.

The implementation process was more integrated rather than fragmented into subject areas, i.e. it included both play and educational activities. Resources to enable this integration were also provided by the NDA in the form of toys. However, the provision of a holistic child development service was a challenge due to the lack of outdoor recreational facilities as the resources donated by the NDA did not cater for children's outdoor activities.

Additionally, with the ECDs also heavily relying on the same funders from year to year, this has created problems as they did not seem to be exposed to other possible funders who may be supporting a course of this nature in the event that funds by other funders were seized. The exposure to other funders would have relieved regular funders and avoided seizing of funds that often affected the operations of over 70% of the ECDs. Therefore, sharing of information about possible funders is encouraged to maintain sustainability.

Outcomes/Impact of the programme intervention

The program has largely capacitated the ECD practitioners with necessary skills and the opportunity to either find employment or set up their own ECDs. It prompted better job opportunities and self-employment for some practitioners. It could therefore be deduced that the ECDs have had a concluded positive effect on economic development and the decrease of income disparities.

As a sign of the programme being appropriately implemented by practitioners, children who have received their services are reportedly progressing well to the next grade. This is further seen in the high enrolment rate of children as parents are said to have seen the value of ECDs and the impact it had on their children's development. However, the unintended high numbers came as a burden to ECDs as the number of children surpassed their infrastructure and human capacity.

Possible Sustainability of the Programme in the Future

For all ECDs that received services from the RTOs' ECD programme, there was a challenge related to funds which thwarted over 60% of ECDs from operating to the expected standard.

This postulates financial resource as a daunting hindrance for the ECD sector. Depletion of funds has led to practitioners' resignations due to non-remuneration. For those who earned a salary, it was still considered low and not equivalent to the practitioners' qualifications. The resignations by practitioners who received training from RTOs impacts negatively on the initial purpose of increasing human capacity for ECDs, thereby affecting the sustainability of ECDs. Given these hindering factors, the sustainability of the ECD programme is uncertain.

Lessons to be Learned from the Intervention

The nature of ECD programs relies intensely on the skills of the individuals who work with children. Undoubtedly, the findings show a need for continuation of training to increase the number of practitioners to meet the 1:10 classroom ratio.

Recommendations

- Given that there is an issue of joblessness raised as communities' challenge, this implies that there are children whose parents do not contribute towards school fees, which makes it hard to force payment framework. In this way, RTOs and Practitioners should be prepared on the most proficient method to draw in or source funders and be guided on what funders pay special attention to when providing funds. This will assist in sustaining the ECD programme.
- The program has incredible capability of eradicating poverty through job creation. However, there is a need to consider increasing financial resources and make arrangement for compensating practitioners and RTO ECD programme facilitators so they can be retained. This is to ensure that training received by practitioners is put to effective use and RTOs have human capacity to convey on their mandate. This will likewise, contribute towards the human capacity required by certain centres that have huge enrolment of children. Hence, the success of this intensely depends on associations with other potential partners that fund courses of this nature.
- Skills for ECD practitioners should be upgraded consistently considering the degree of technological penetration in the Sub-Saharan Africa. In this way, a realignment will also be required for South African children to remain relevant in the realm of innovation. This will mean giving significant amount of resources that include, for example, gadgets (tablets), since children from rural communities do not are often not exposed to such devices.
- Given that the child's learning environment is of utmost importance if the aim is to develop a child holistically, more resource allocation should be considered as the current resources restrict practitioners and children to the indoor environment. Therefore, to balance the

needs, outdoor recreational facilities should be provided. Over and above the outdoor resources, children lose some of the toys donated to the centres, therefore, the amount of toys should be increased or be a regular practice rather than a once off service.

- Over 80% of ECDs are situated in country regions where there is an enormous land surface furthering their potential benefit which can be utilized for planting vegetables and natural products that can be fed to children. ECDs should be urged to utilize their land and develop their own nourishment to decrease the degree of reliance on nutrition contributors.
- Future longitudinal study on the benefits of ECD programmes aimed at enhancing early childhood development should be conducted. The study should be aimed at clearly indicating the profound impact that the programme has had on children over a period of time as they progress to the next grades.

1. Introduction

The National Development Agency (NDA) has a legislated mandate to “contribute towards the eradication of poverty and its causes by granting funds to civil society organisations for the purposes of carrying out projects or programmes aimed at meeting developmental needs of poor communities”.¹ Through enhancing the capacity of Civil Society Organisations (CSOs), the NDA supports efforts aimed at tackling poverty, unemployment and inequality.

Drawing from this mandate the NDA has since its inception been implementing the Capacity building programme which sometimes uses the services of the Resource and Training Organisations (RTOs). This initiative sought to empower the CSOs to deliver poverty eradication inclined programmes in the communities they operate in. Other intentions of these interventions were to ensure that there is capacity building of Civil Society Organizations to make them sustainable entities to have enormous benefits for communities and the country at large.

The NDA capacity-building programme involved various capacity development areas which included the ECD technical capacity building of the CSOs. This was delivered in most instances by the RTOs as the NDA did not have the capacity internally.

Between 2010 and 2016, the NDA has contracted a total of 43 RTOs to provide technical training and support to ECD practitioners in all the provinces of South Africa. The role that the ECD RTOs played has been the provision of technical services that could not be provided by the NDA. Since the programme implementation in 2013, the trainings delivered by the RTOs have never been evaluated to assess if they have yielded the desired results as intended.

Therefore, as outlined in the NDA Monitoring and Evaluation (M&E) Framework and Guidelines, regular and systematic evaluation of programme performance is important to ensure that the efficiency, effectiveness and impact of poverty alleviation programmes and projects are measured. It is against this background that the NDA appointed Quest Research Services (Referred to as QRS from here) to evaluate the NDA early childhood development programme as implemented by the Resource and Training Organisations (RTOS).

¹ National Development Agency Act 108 of 1998

2. Background of the RTO ECD Implemented Programme

The introduction of Early Childhood Development (ECD) programme is a relatively new phenomenon in Sub-Saharan Africa. The concept of ECD was necessitated by the need to avail pre-school education to all children. Children in the human history were often viewed simply as small versions of adults and little attention was paid to their cognitive abilities, language usage and physical growth (Currie, 2012). However, according to Shapiro and Nager (1999) early childhood education is a branch of educational theory which relates to the teaching of young children up until the age of about eight years, with a particular focus on education. Furthermore, ECD must emphasise links to family, home culture, and home language by uniquely caring for each child (Pence, 2004). Morrison (2008) observes, many psychologists believe that early childhood education can significantly affect a person's ability to deal successfully with later life.

According to Hoffman (2010) early childhood development encompasses the period of human development from the prenatal stage through the transition into the early primary grades. During the children's early years, there are four main critical domains of development; which are physical, cognitive, linguistic and socio-emotional (Van der Gaag, 2012). Therefore, ECD links the young child's cognitive, emotional, social and physical processes with the care and services provided by the schools to support the children's development (Bandy & Donald, 2009).

The benefits of supporting ECDs include improved cognitive development, greater educational success and increased productivity in life (Young, 2008). Pence (2004) argues that the skills developed in early childhood form the basis for future learning and labour market success, and the failure to develop these skills can negatively affect educational attainment and productivity and earning potential.

Without access to quality ECD, children from poor background often fall behind their more advantageous peers before they even begin school. As they get older, the gaps widen; they are likely to perform poorly in school, earn less as adults and engage in risky social behaviours (Hoffman, 2010). Young (2008) found that ECD investments have a positive impact on older girls and women. Evidence suggests that affordable childcare for young children can increase the school enrolment rates of older female siblings to a greater extent than even an increase in maternal wages. For example, a Kenyan study showed that increasing maternal wages would likely lead to an 11% increase in the school enrolment of boys in the family but a decrease in school enrolment of girls by 10%, as adolescent girls took over more home responsibilities because their mothers worked outside the home. In contrast, the study showed

that reducing the cost of childcare increased school enrolment of girls in the family without having a measurable effect on boys' school enrolment in either direction (Lokshin, Glinskaya, & Garcia 2000). In addition to the direct impact of ECD interventions on young children, positive externalities can occur in the areas of girls' education and women's labour force participation rate (Freitas, Shelton, & Tulge, 2008).

School readiness of children is often affected by a number of factors, including cognitive skills, physical, mental and emotional health, as well as their ability to relate to others (Young, 2008). Studies also indicate that cognitive abilities are strongly affected by the quality of the environment and amount of stimulation and learning opportunities children are exposed to from birth (Hoverman & Wolfe, 2009). On the other hand, Duncan, Brooks-Gunn (1994) found that access to quality ECD interventions could improve education outcomes by reducing repetition and drop-out rates, improving learning outcomes, and increasing school achievement.

The National Development Agency (NDA), in line with the Radical Socio-Economic Transformation programme of government, planned to intensify support towards Civil Society Organisation (CSO) development. This is in an effort to empower CSOs to play a meaningful and impactful role in poverty eradication within the rural and poor communities in South Africa. The NDA has developed programmes that will assist CSOs to implement community-based programmes that seek to contribute in transforming communities, for purposes of improving and enhancing quality and sustainable livelihoods for families and individuals living in poor areas in the country.

The government-led programme of Radical Socio-Economic Transformation is primarily aimed at eliminating the triple challenges of poverty, inequality and unemployment, in line with the long-term vision of the National Development Plan. These triple challenges have continued unabated despite numerous efforts to eradicate them. This gave a rise to the need for a more concerted and consolidated effort between government, civil society and the private sector to develop and implement sustainable programmes to eradicate the scourge of poverty among the poor in societies.

The National Development Agency Act defines "Civil Society Organisations" in Section 1 (iii) as meaning: a trust, company or voluntary association established for a public purpose, but does not include an organ of state. This definition of civil society is broad enough to include any role player outside government who has a developmental orientation. Civil Society Organisations (CSOs) may also refer to a wide of array of organisations: community groups, non-governmental organisations (NGOs), labour unions, indigenous groups, charitable

organisations, faith-based organisations, professional associations, and foundations” (The World Bank, August, 2010).

The NDA, at a functional and operational level, has defined its CSO programmes and interventions to address developmental needs of all community based CSOs or organisations that are aimed at developing and improving livelihoods of people in communities. These include formal and non-formal structures which are created not for profit and are not part of the state. The CSO development model of the NDA focuses on programmes and interventions provided to NPOs, NGOs, CBOs, FBOs, Community Cooperatives, Foundations and Section 21 companies, irrespective of their registration status.

The strategic approach used by the NDA in this planning period focuses on strengthening implementation of its programmes for (CSOs) development. This helps to ensure that NDA programmes are located close to communities and easily accessible to the population and to local CSOs.

2.1 NDA Strategic alignment to Education through ECDs

The NDA Institutional Capacity Building programme focuses on building the capacity of ECD centres in rural and deprived communities. The NDA provides interventions at ECD level, ranging from stimulation material for children, the training of ECD practitioners and the overall improvement of the learning environment. This is a long term investment for children to enable them to perform better when they get to basic education, thus providing a basis for success for many of the children coming from impoverished and disadvantaged backgrounds.

The NDA targets to train 5 000 CSOs in civil society organisational management per year, and it is expected that the CSOs in the ECD space would constitute a sizeable portion of this number. Furthermore, the NDA grant funds to these ECDs to enable them to impart appropriate educational foundation to children. These Key Performance Indicators (KPI) have a long-term impact and arguably make a sterling contribution in providing a start-up solid base from which children can progress to become responsible citizens, who will in years to come make a positive contribution in society.

Atmore (2001) posits that, ECD NGOs have been carrying the responsibility for the training of ECD practitioners many years. He found that although universities, vocational colleges and private institutions provide training for ECD practitioners, almost half (49%) of ECD training in South Africa was provided by the NGOs. More than 80% of the training of all ECD trainees at Levels 1 and 4 are still conducted by NGOs. The cost for NGO training is mostly covered by donor funds. Only between 2% and 5% of training fees are paid directly by the trainees

themselves. With the government's new focus on a compulsory Grade R, ECD NGOs will most likely continue to bear the responsibility of ECD training in South Africa. The training needs in the ECD sector are vast and these needs are only partially met by existing NGO training. The difficulty in obtaining regular donor funds and the inability of the trainees to pay the full cost of their training attributes to this lag. Nel (2007) adds that ECD practitioners need comprehensive, practical in-service and pre-service ECD training to enable them to run up-to-standard ECD programmes. He stresses the fact that the training of ECD practitioners should enhance both their professional and personal development. The basic professional education available to an ECD practitioner should, according to Atmore (200), be nothing less than a full ECD qualification (including fundamentals, core and electives) at Levels 1, 4 and 5 of the NQF. Literacy, numeracy and communication skills should be included in the fundamentals, accompanied by additional training via a choice of electives. He suggests further that it is important that all training should entail on-site (workplace) visits and support to make the training more meaningful and sustainable.

3. Literature review

3.1 Introduction

The National Department of Education defines early childhood development (ECD) as “... the processes by which children from birth to nine years of age grow and thrive physically, mentally, emotionally, morally and socially” (DoE, 2001a). Early childhood development is recognised as the foundation for success in future learning. Quality early learning programmes prepare children for adulthood, providing them with the necessary opportunities for social, cognitive, spiritual, physical and emotional development. These programmes assist in laying the foundation for holistic development, whilst cultivating a love for lifelong learning (Biersteker & Dawes, 2008). In South Africa, The National Department of Education is responsible for the five to nine year old age cohort, and the Department of Social Development is focused on the birth to four year old age cohort. However, there are skilled practitioners required to facilitate the process of ECD through established centres.

Practitioners play a vital role in ensuring that activities that are aimed at helping pre-primary school children develop a wide variety of skills including speech, reading, writing, motor skills and social interaction are put to effect. To run ECD centres which are efficient, sustainable and effective in caring for young children, it is essential that ECD practitioners are well capacitated on all aspects pertaining to the requirements of offering ECD services.

The sub-sections below highlight the South African ECD policy and its priorities, and the state of ECDs with specific reference to practitioners’ capacity, infrastructure, funding, which are the cornerstone to the success of the ECD programme.

3.2 South African ECD policy

According to the South African National Integrated Early Childhood Development Policy of 2015, the ECD program should be developed, funded and implemented under the lead of the National Department of Health, in close collaboration with the Department of Social Development and the Department of Basic Education, through clinic and community outreach teams that form the bedrock of primary health care in South Africa (Social Development, 2015). The support, training, and regulation of the child-minders programme should be developed, funded and implemented by local and metropolitan municipalities with the support of the Department of Social Development, the Department of Health, the Department of Basic Education and the Department of Cooperative Governance and Traditional Affairs (Department of Basic Education, 2016).

The National Integrated Early Childhood Development Policy further gives clarity on Proper and effective monitoring and evaluation systems. Framework to track progress against objectives and goals, with regard to improving levels of access to and the quality of early childhood development services for infants and young children, is an essential part of service delivery and the implementation of the Policy and related programmes. A key tool required in this regard is the development of strong monitoring and evaluation (M&E) mechanisms and tools to measure compliance with quality standards and equity and inclusive targets and indicators. Strong and appropriately constructed M&E tools constitute key accountability mechanisms, required by the human rights approach to early childhood development. The NDA evaluation also examined the kind of monitoring tools that were being used by the RTOs upon implementation.

The main ECD policy priority of the South African government after 2001 has been the establishment of a national system of provision, called Grade R, for children aged five to six (DoE, 2001a). Over the past 18 years this goal has been partially achieved, although there is still much to be done in order for this policy goal. It is clear that the compulsory/universal provision target was not reached by 2010, as envisaged in the education White Paper 5, and was extended by the President to 2014. Early studies projected that the take up rate indicated that it will take the country at least until 2019 to reach Government's target of a place in Grade R for every child before Grade 1 (Atmore, van Niekerk & Ashley-Cooper, 2012).

While South Africa has made good progress from a policy perspective, many of the services defined in the policy have made little or no progress over the past few years, particularly in the early learning (The South African Early Childhood Review, 2019). In addition to severe fiscal constraints, the lack of progress is arguably due to the inadequate institutional mechanisms required to co-ordinate, manage and monitor complex integrated ECD service delivery. South Africa lacks (i) an effective central mechanism to mobilise and co-ordinate a national programme for young children; (ii) the ability and capacity to deliver quality services at scale, particularly in implementing strategies for early learning, caregiver support, child protection for all children who need it, and enhanced support for children with disabilities; and (iii) systems to routinely monitor services and measure progress for most child outcomes (The South African Early Childhood Review, 2019).

Despite some progress, nearly 1.1 million children aged three to five years still do not have access to any form of early learning programme. Close to one third of these children live in Kwazulu-Natal (The South African Early Childhood Review, 2019). Children who do not have the benefit of an early learning programme are likely to start formal schooling at a distinct disadvantage.

3.3 Capacity of ECDs in South Africa

3.3.1 ECD registrations

Early childhood development is an emerging field of research and policy development in South Africa. The state of ECD in South Africa in terms of reporting on its progress was non-existent prior to the 1994 democratic elections. However, since the ratification of the United Nations Convention of the Rights of the Child on 16 June 1995, improved indicators and monitoring have taken place, and from this literature, the understanding on the situation of children has improved over time (Storbeck & Moodley, 2010; van der Merwe, 2015).

As a starting point in South Africa, a national audit to establish the status of both registered and unregistered ECD centres was conducted in 2013 (DSD, 2014). As of 2015, there were 20,442 registered ECD centres nationwide (UNICEF, 2015). According to Richter et al., (2012), the General Household Survey demonstrates that 43% of children below the age of 5 had access to early childhood programmes in 2009. However, in 2010, the statistics improved and reached 63% (Richter et al., 2012). Drawing from this same data, information on unregistered ECD centres in informal urban areas is unavailable. The national situation analysis also reveals the status of ECD centres and the children within their respective programmes. In 1996, the enrolment of children in ECD centres stood at 22.5%. In 2007, the figure increased to 80.9%, which is most likely those registered into Grade R. Around 8% of ECD facilities lack proper infrastructure (Martin et al, 2014). Most of the registered ECD centres are inaccessible to most poor areas both in rural and informal urban areas (Martin et al, 2014; UNICEF, 2005). Under informal ECD centres, there is also a lack of proper management structures and set monitoring and evaluation mechanisms, which guide the running ECD facilities. More specifically, there is a deficiency in proper nutrition programmes, trained personnel on ECD or there are experiences of high personnel turnover (UNICEF, 2005; Atmore et al., 2013).

According to Statistics South Africa (2012), the turnout of children to ECD facilities in South Africa varied from province to province. For example, attendance to ECD facilities among children younger than 5 years in KZN was at 26.6% compared to Western Cape, which recorded 39% of children younger than 5 years who attended ECD programmes. Studies indicate that areas either have limited or no access to ECD services within their community, this includes access to health services and proper nutrition (Biersteker, 2012; UNICEF, 2005; & Atmore et al., 2013). Nationally, very few provinces have met these requirements. For example, in KwaZulu-Natal, the quality of ECD infrastructure is among the poorest in all provinces and is classified among those that need urgent attention (Republic of South Africa,

2014). Children living in rural areas and informal urban areas are unable to access formal ECD services either due to non-existence or inaccessibility.

The national audit on ECD centres (2014) show that most facilities remain unregistered with the Department of Social Development (DSD) because they fail to meet the standards presented by the department. For an ECD to be registered, the infrastructural conditions should be according to the set DSD requirements. Standards range from location of the ECD centre, quality of infrastructure, management and running of ECD facilities. DSD guidelines require that ECD centres have quality infrastructure that provides children with a safe, healthy learning environment. This includes access to sufficient water, proper sanitation, electricity and a secured area away from hazards (Atmore et al., 2012). The structural conditions of ECD centres such as the roof, walls, and plumbing should be in good condition. The centres' facilities should be functional in such a way that they can accommodate people with disabilities. The lack of registration of operational child minding facilities remains an issue as facilities in under-resourced areas, and with low service charges to parents, do not meet governmental regulations. Their failure to register also does not give the centres an opportunity to apply for much needed subsidised funding from government. As an illustration, Atmore et al. (2012) point out that the centres', particularly Grade R, programmes registered community-based ECD and facilities themselves are listed under the Department of Social Development. It is mandatory that registered community-based ECD meet the programme and infrastructural requirements of the department. Upon registration, ECD centres become eligible for funding per child for specific items like feeding schemes, and staffing. However, the department does not currently provide any kind of funding for specific sustenance (maintenance) and upgrades of the facilities. They do conduct follow-ups or check whether the facilities are maintained properly (Atmore et al., 2012).

Another party involved in ensuring that ECD centres meet DSD standards is a local government's Environment Health Office that inspects ECD community-based centres before they are approved to operate legally. The location for establishing an ECD facility must adhere to local government land use regulations and other infrastructural standards. For example, a government sponsored ECD centre is required to be situated within an area that meets the Department of Social Development's standards of being located in "local service points or community service locations", also referred to "Location Zoning" (PPT, 2014:7). These standards are in line with the Department of Human Settlements by regulations that require crèches to be built near community halls in order to reduce investment costs. In addition, another setback faced by ECD centres located in informal settlements is lack of funds, which prevents them from registering their centres. Most ECD centres are not located in areas which allow for registration. Some ECD centres operate in association with NGOs that are well

resourced. As a result they are of better quality and may be located in DSD compliant locations. However, these centres may not be affordable to people who reside in informal settlements (Republic of South Africa, 2013).

Summarily, South Africa has managed to ensure that Grade R children are now integrated into ECD programmes; however, the same is yet to be said for the opportunity to access proper ECD facilities and care for pre-Grade R programmes. There remains major need gaps for ECD infrastructure and programmes for ages 0 to 4, particularly within informal settlements where standards and regulations do not fit well within current policy framework. Many of the ECD facilities, especially within informal settlements, are not registered, in some cases it is due to the failure to comply with the standards set by the Department of Social Development. The draft National Integration ECD policy attempts to address the policy gaps that prevent poor and vulnerable children's access to ECD services.

3.3.2 ECD Practitioners skill capacity

Quality teaching and learning is essential for effective early development to take place. Regardless of the situation or the facility in which a child is placed, a quality teacher can provide a learning environment in which a child can develop optimally and in a holistic manner. To produce quality ECD teachers, various training and education opportunities are made available through full ECD qualifications, as well as through short skills programmes. This section explores the ECD qualifications available in South Africa, and describes how these qualifications affect teaching in various ECD facilities.

In South Africa, qualifications are established on the National Qualifications Framework (NQF) by the South African Qualification Authority (SAQA). Training in these ECD qualifications is offered mainly at Further Education and Training (FET) colleges and ECD non-profit organisations (NPOs). To provide a qualification, the service provider/institution must be accredited by the ETDP-SETA (Education, Training and Development Practices Sector Education and Training Authority). The Department of Social Development (DoSD) and UNICEF have set out the minimum standards for an ECD teacher requirements in the document entitled Guidelines for Early Childhood Development Services (2006). These guidelines state that the minimum qualification for any ECD practitioner is the NQF Basic Certificate: ECD (Level 1) (DoSD & UNICEF, 2006).

The original purpose of the Basic Certificate: ECD (Level 1) qualification was to provide access to training to teachers who work in an ECD setting (home-based or centre-based) who, previously, may have been excluded from such training opportunities. It aimed to provide teachers with the necessary skills to meet the basic needs of young children in all areas of

their development (physical, mental, emotional, and social). However, this qualification has expired (the last enrolment date was 10/01/2010) and is no longer being offered. The Further Education and Training Certificate: ECD (Level 4) qualification has become the entry-level qualification for ECD practitioners. This qualification provides ECD practitioners with the necessary skills to facilitate the holistic development of young children (including those children with special needs), and offer quality ECD services in a variety of settings (such as at ECD centres, home-based ECD centres, or within community-based services). The Higher Certificate and National Diploma: ECD (Level 5) qualifications are intended to provide higher education to experienced ECD teachers.

The question of whether or not training in various qualifications actually produces outcomes of quality teaching as required by the DSD is not clear. While teacher qualification level is often used as a quality indicator for ECD services, higher levels of qualification do not always predict higher levels of quality teaching. This has been found both in South Africa (e.g. Dlamini et al., 1996; DoE, 2001b), and internationally (e.g. Cassidy et al., 2005). In a study assessing the quality of ECD services in the Western Cape, researchers found that qualification level was not always associated with higher quality outcomes, such as quality of care and learning (HSRC, 2009). They also found that only 35% of practitioners responsible for infant and toddler classes had any form of ECD qualification, and only 47% of practitioners responsible for older children had any form of ECD qualification (HSRC, 2009). There are a number of possible reasons as to why training does not necessarily guarantee quality care and teaching. These could include: a lack of practical demonstration and instruction during training, a lack of on-site support to assist with implementation of theoretical training, and a lack of follow-up support after the completion of training so as to ensure consistent implementation. In another study conducted in 2011, the researchers found that, throughout South Africa, ECD teachers offering Grade R classes in public schools and those based in community-based facilities are “relatively experienced, and have a fair level of ECD qualification.” (DoBE, DoSD & UNICEF, 2010). They also found that ECD qualification level achieved has a strong association with salary earned. Short courses in ECD and the Basic Certificate: ECD (Level 1) carries minimal financial gains, but ECD certificates at Levels 4 and 5 carry far greater financial gains, with tertiary education in ECD carrying the most financial gain for the teacher.

3.3.3 Funding

The vast portion of ECD centre funding nation-wide is from parents' fees. Government funding for ECD comes mainly from the Department of Social Development and the Department of Education at provincial level (Mbarathi, Mthembu, & Diga, 2016). There are two primary ways in which the Department of Social Development in each province provides funding to ECD. The first channel of funding is through a subsidy for registered ECD facilities, calculated at R12 per child per day (but varying by province) for those children from birth to four years of age (Mbarathi, Mthembu, & Diga, 2016). Some provinces have increased this to R15 per child per day. Only those children whose parent or caregiver's income falls under a specific bracket, as assessed by an income means test, qualify for the subsidy. This means that only those ECD facilities that cater to the poorest of families benefit from this subsidy (Giese, Budlender, Berry, Motlatla, & Zide, 2011).

The funding and expenditure of various governmental departments and programmes shows that funding for ECD facilities through the subsidy has increased over the past years from R335 million in 2003/2004 to more than R1 billion in 2011/2012 (Giese, Budlender, Berry, Motlatla & Zide, 2011). While this increase is encouraging, there are significant disparities across the provinces in terms of the number of centres accessing the subsidy, as well as the actual amount they receive, with many ECD centres not receiving the subsidy at all. This could be due to a number of factors, including differences in how provinces calculate the subsidy and a backlog in the registration process.

The second way in which DoSD provides funding for ECD is through programme funding for NPOs for various ECD programmes. These programmes are usually non-centre based models of ECD provisioning, such as family outreach programmes. Funding for non-centre based programmes for NPOs is significantly smaller than funding for centre-based facilities.

There are significant differences in this funding across provinces, although each province is greatly underfunded. NPO programmes that receive funding from DoSD include toy libraries, home visiting programmes and informal playgroups. This funding is often once-off funds for pilot projects. The allocation of funding to centre-based ECD programmes points to a general favouring of this form of ECD provisioning, even though non-centre based programmes have the potential to reach the most vulnerable children not currently being reached. The Department of Education provides funding to Grade R programmes. The three primary channels of funding are: funding for Grade R in public schools; subsidies for registered community-based Grade R facilities (either in the form of a per child subsidy or as the payment of salaries for Grade R teachers); and funding for training fees and stipends for those ECD practitioners who receive learnerships.

Researchers have found that the share of ECD budget in the total education budget allocated to the DoE has increased from 0, 7% in 2006/2007 to 2% in 2012/2013 (Giese, Budlender, Berry, Motlatla & Zide, 2011). Once again, while this increase is encouraging, there are also significant variations in Grade R funding across the provinces, with most of the funding going towards Grade R facilities in public schools. In the Audit of ECD service quality in South Africa, the Department of Basic Education, Department of Social Development & UNICEF (2011) found that more than half of registered community-based ECD facilities receive funding from DoSD (37, 7% receive solely from DoSD, and 19, 5% receive from DoSD and DoE), and that almost 40% of facilities receive funding from DoE (20, 1% receive funding solely from DoE). In their sample, approximately one quarter of registered community-based facilities (22, 6%) receive no funding from either department.

4. Aim and Objectives of the Evaluation Study

The evaluation aimed at assessing the effect to which Resource and Training Organisations had on capacitating the Early Childhood Development programme. From 2013, the NDA has been using the RTOs in supporting and providing technical ability to various ECD NPOs. These RTOs have been entrusted with specific roles to assist the development of the ECD NPOs. The RTOs had a dedicated role in supporting the ECDs which has never been evaluated. The specific objectives of the evaluation were as follows:

- Evaluate the design of ECD programme intervention
 - Whether the RTOs ECD programme design was able to respond to the needs of the ECD practitioners as implemented
- Assess programme implementation of the programme
 - How the RTOs focused ECD projects were implemented, and whether they commenced and concluded on time
- Conduct cost benefit analysis of the intervention
 - Assess and analyse the value for money for the investment made to the programme
- Assess the outcomes of the intervention
 - Assess the outcomes of the intervention and the benefits of the programme to practitioners, children and ECDs in general
- Assess possible sustainability of the project in the future
 - Assess possibility of continuing this intervention to other communities that need such programme

- Assess challenges that were experienced during the implementation of the programme
- Draw the lessons to be learnt from the intervention
- Propose the recommendations for improving the programme and its implementation

The results of the evaluation will be used by the NDA to improve planning, implementation and management of the programme and its projects. The evaluation outcomes will also be shared with the project staff and other relevant stakeholders such as the Departments of Social Development in order to improve the programme.

5. Evaluation Methodology

5.1 Qualitative approach

This evaluation applied a qualitative approach in the form of In-depth Interviews conducted telephonically with the programme facilitators and the beneficiaries across the country.

5.2 Most significant change

Since the evaluation aimed to assess the effect to which the Resource and Training Organisations (RTOs) had on capacitating the Early Childhood Development programme and there is no baseline study, the study employed recall methods (tapping into the difference between the situation before and after the intervention) during the In-depth interviews, and was based on the Most Significant Change (MSC) technique described below.

The **Most Significant Change (MSC)** technique was incorporated into this evaluation. The most significant change technique is a tool for exploring programme outcomes using qualitative methods. As Davies (1998b) suggests, the MSC also helps provide texture to stories of change that “are difficult to quantify and where there is a focus on learning, not merely accountability”.

As the MSC relies on qualitative methods, it copes well under the constraints of having no baseline data. The advantage of using the MSC methodology is that it goes beyond looking at the pre-defined outcomes or indicators of the project and captures both intended and unintended changes.

5.3 Evaluation Process

5.3.1 Inception Meeting

The process started with inception meetings with the NDA to clarify the scope; agree on the key issues; discuss the sample and methodologies and clarify understanding and expectations around process, deliverables, roles and responsibilities.

An inception report was then submitted after the meeting. It contained a revised evaluation work plan, detailed methodology and content structure for the final report.

5.3.2 Literature and Document Review

The evaluation team reviewed literature and documents considered to be relevant to the study. The literature reviewed explored the ECD as a phenomenon, South African ECD policy priorities, and the level at which South African ECDs are capacitated in terms of registration, training and funding.

5.3.3 Design and Approval of Data Collection Instruments

Two (2) instruments were developed for RTOs' representatives and ECD practitioners, and were informed by the inception meeting and literature review. The 2 discussion guides were reviewed and approved by the NDA as the custodians of the project.

5.3.4 Primary Data Collection

All primary data collection was conducted by the QRS moderators. They were brought together for training by the evaluation team. Training on the instruments was in a form of role playing and the instruments were later revised accordingly. Data collection was in a form of in-depth individual interviews commenced, which took place over a period of 2 weeks. KIIs were conducted with 16 RTOs and 18 ECD practitioners nationwide.

5.3.5 Qualitative Sample

Different sampling techniques were used for different target respondents. Purposive sampling technique was used to draw the sample from RTOs. Based on the database provided by the NDA, there were 43 RTOs that received funding to facilitate training for ECDs. However, twenty (20) RTOs were randomly selected from each province (***Please see table 1& 2 for the planned and achieved sample***).

For this segment, a snowballing technique which is a nonprobability method was adopted as the beneficiaries could only be obtained through referrals from the RTO representatives that provided them with training. Through this technique, only 18 participants were reached. The low hit rate was as a result of non-existent contact details and some ECDs no longer in operation.

Table 1 and 2 below present the overall planned and achieved sample.

Table 1: Planned sample

LIST OF RTOs	Province	RTO SAMPLE	CENTRE MANAGERS SAMPLE
Institute for Training Education Centre (ITEC)	EC	3	6
Masikhule development Centre	EC		
Khululeka Development Centre	EC		
Early Inspiration	EC		
Centre for Social Development	EC		
Regional Educare Centre	EC		
Tshepang Educare Centre	FS	1	2
Realeboga Bakobong	FS		
Tsoanatsatsi Educare Ttrust	GP	5	10
South African Congress for Early Childhood Development (SACED)	GP		
katlehong Early Learning Reosurce Centre (KELRU)	GP		
Jabulani Community Deveelopment and Training	GP		
Eesterus Care Training Centre	GP		
Training and Resourcing in Early Education (TREE)	KZN	1	2
Save the Children	KZN		
Little Elephant Training Further Education and Training	KZN		
Hlanganani Group Service Trust	LP	3	6
Wozobona	LP		
Thusanang Trust	LP		
Families South Africa (FAMSA)	LP		
African Pathways	LP		
South African Non-Governmental Organisation Coalition (SANGOCO)	LP		
Thukakgaladi Intregrated Development Project	LP		
Bambanani Early Trust	LP		
Ntataise Lowveld Trust	MP	1	2
Penreach Colleague	MP		
Siyathuthuka Nursery	MP		
CUSTODA	NC	1	2
Ebenezer Practitioner Training	NC		
Keletsong Community Training and Resource Centre	NW	1	2
SACED	NW		
Realeboga Bakobong	NW		
SANCOCO	WC	4	8
RUDNET	WC		
Mfesane	WC		
Children Resource Centre	WC		
Elgin Learning Foundation	WC		
African Community Development Centre	WC		
Early Learning Resources Unit (ELRU)	WC		
Grassroots Educare Trust	WC		
Western Cape Foundation for Community	WC		
TOTAL			

Table 2: Achieved sample

LIST OF RTOs	List of ECDs	Province
Institute for Training Education Centre (ITEC)	Enkululeko Day care	EC
Tshepang Educare Centre	Seotlong Educare Khubelane day care *Masello	FS
Realeboga Bakobong		
Tsoanatsatsi Educare Ttrust	Vision kids	GP
katlehong Early Learning Reosurce Centre (KELRU)		
Jabulani Community Development and Training		
Training and Resourcing in Early Education (TREE)	Senzokuhle day care Thusanang Trust Dalilizwe crèche Sinakhokonke crèche Brighten their future day care	KZN
Save the Children		
Ntataise Lowveld Trust	Madiaboge daycare New Advance daycare	LP
Families South Africa (FAMSA)		LP
Ntataise Lowveld Trust	Vukuzenzele crèche Ratanda Isizwe daycare Vulamehlo pre-school Thembumelusi day care Sisethu day care	MP
Penreach Colleague		MP
Siyathuthuka Nursery		MP
Early Learning Resources Unit (ELRU)		WC
Grassroots Educare Trust		WC
FCW		WC
	Papetlong day care	NW
TOTAL: 16	18	8

5.3.6 Quality assurance

The following quality assurance was adhered to:

During data collection, the evaluation team from QRS were in contact via email and telephonically with the client in request for all the necessary information required to achieve the desired sample and update on the challenges experienced.

Primary data collection was conducted by qualified and astute moderators who are highly experienced. Moderators were carefully screened and chosen on the basis of whether they are well versed on the subject matter, had the requisite skills, qualifications and/or experience as well as are fluent in the official languages should participants not be able to express themselves in English.

The moderators underwent training during the role playing phase of the evaluation during which discussion guides were practically tested for the logical flow and understanding of the project objectives. Participants were assured of their anonymity and confidentiality

5.4 Qualitative data analysis

Analysis of data from the semi-structured interviews was conducted manually. A code sheet was drawn up and the findings were analysed according to specific themes. To avoid biasness, data was coded by two different members of the research team who had knowledge about the project.

6. Evaluation Results

The evaluation findings are discussed below with specific reference to the views of RTOs' Key Informants and ECD practitioners who received training from RTOs. The presentation of data taps on the following elements: (i) The design of ECD programme intervention; (ii) Programme implementation; (iii) Cost benefit analysis of the intervention; (iv) The outcomes of the intervention; (v) Sustainability of the project in the future; and (vii) The lessons learnt from the intervention.

6.1 Assessing the design of ECD programme intervention

This section highlights views from the RTOs and the beneficiaries on their perceptions around the design of the ECD programme. The evaluation therefore assessed whether the ECD programme design was able to respond to the needs of the ECD practitioners during the process of implementation.

6.1.1 Relevance of the Intervention Programme

The ECD programme was designed to primarily address the gaps identified within different ECDs that the RTOs engaged with. The programme intervened on issues of compliance as it was discovered that most of the ECDs especially in rural areas were non-compliant and this put them at a disadvantage as they could not receive funds from the government to allow them to cater for all their operational needs. This required taking ECD practitioners including aspiring practitioners, through all the procedures that would ultimately lead to centres that are up to the expected standard of operation.

By law, all centres that care for six or more children are required to register with the provincial DSD. The first step centres should follow is to apply to the DSD for registration. In response to this application, a welfare planner will conduct a needs assessment at the centre and ask a health inspector to inspect the facility. There are two processes that can run concurrently: health clearance and NPO registration. When the centre has received health clearance, the health inspector informs the provincial DSD of this status and the

ECD programme provided by the centre can then be registered as an ECD service, as per the requirements of section 95 of the Children’s Amendment Act. The inspection for this registration is usually performed by a social worker who is an official of the provincial DSD, and it involves reviewing the educational programme (schedule) provided by the centre and the financial recording system (but not necessarily the records) of the centre. If the centre meets the required standards it will then be registered as an ECD service provider. All centres providing partial care must register as ECD services, even if they do not apply for NPO registration or subsidies from the departments.

The programme further ensured that knowledge on children’s developmental needs was also imparted through the facilitation of training that was rendered to the ECD practitioners and aspiring practitioners. Through this training, practitioners were afforded an opportunity that enabled them to obtain a diploma qualification that left them well equipped with early stimulation skills that prepared children for primary school. By this, the programme wanted to ensure that the ECDs remained sustainable upon completion of the programme.

It is worth highlighting that the above mentioned descriptions were suited to the ECD programme priorities for the intended target beneficiaries which is evidently seen in the views of the beneficiaries who clearly indicated that initially, these were the challenges they were facing in their ECD centres, especially the relevant skills as children were being cared for unprofessionally. It is critical to note that the intervention focused on basic organisational capacities that ensure that systems are in place to enable an ECD centre to be held accountable for any support it receives. Building these capacities in the centres also ensures, with very few exceptions, that they are able to access resources that can be used for ECDs’ functioning improvements that government cannot provide as community dynamics within which ECDs centres are established, also vary.

“The reason was to support them so that they could sustain their ECD Centres. We also wanted to make sure that they were able to meet the minimum standards as set and defined by the Department of Social Development and to make sure that they were eligible for the grants from the Department. That was our angle. We started with them right from the beginning of the process where they applied for the registration of their centres and then we equipped them with appropriate resources and documents to operate” (RTO, Save the children, KZN)

As early experiences shape the architecture of the developing brain, they also lay the foundations of sound mental health. Disruptions to this developmental process can impair a child’s capacities for learning and relating to others, with lifelong implications. The programme

therefore had to be aligned to the needs of the ECDs that required capacitation. The ECD practitioners highlighted that, for one to be an ECD practitioner, they needed to possess holistic child development skills as the lack of knowledge thereof will in the long run have an impact on the caretaker's decision-making regarding the child's wellbeing and development. This meant that practitioners had to understand how to nurture a child's mental health and physical development when they are in their care, i.e., nurturing their feelings, self-esteem, creating a safe and positive environment, strengthening motor skills through active play, etc.

While the required skills may be clear, some ECDs started with practitioners that did not possess these skills. Prior to receiving training, the practitioners lacked knowledge on how to work with children and the kind of activities required specifically for children. Their interaction with children was therefore misguided and was based on intuition. Therefore, lack of knowledge had to be identified and addressed as practitioners' enhanced knowledge of childhood development could enhance early detection and effective measures of developmental problems. This also helps to enhance children's physical and emotional and intellectual accomplishments throughout their lives.

Apart from lack of ECD knowledge, the RTOs further discovered that there was a gap within the school curriculum as the pre-schools were not catered for and felt that the ECD programme was not given the attention it required. Given this, in collaboration with other 250 ECD practitioners, the RTOs developed a National Curriculum Framework (NCF) which specifically addresses the ECD needs and this was used during training.

The NCF is one of the activities aimed at improving the quality of basic education by laying a solid foundation in the early years. The development of the NCF was a great achievement for South Africa as it is the first document of its kind. It ensured that children from different backgrounds in different settings have access to quality ECD services. The NCF is currently used in a variety of settings and purposes, to improve children's learning experiences. It is also used by training organisations, universities, practitioners, parents and other care-givers to enhance children's learning and development.

6.2 Assessing the implementation of the ECD programme

This section focuses on how the ECD programme was implemented, its effectiveness in terms of whether the interventions commenced and concluded on time. The analysis provided clarity on the implementation process of the programme; the areas which training focused on; the teaching manuals used to implement the programme; how the activities offered within the programme were monitored and evaluated; and the challenges experienced during this process that may have affected the attainment of the programme objectives.

6.2.1 Effectiveness of the Programme

6.2.1.1 Implementation Process

The implementation process began with identifying the number of centres that required training as well as the level of qualification the practitioners desired to obtain as enlisted by the NDA. The RTOs ensured the implementation of the programme through the use of a pool of trainers who were committed to working beyond business hours for a training period that ranged between 1-2 years, depending on the level of qualification. This timeline was however, deemed insufficient to cover the course, which implied stretching the working days to include weekends and holidays. This is because the programme was not only limited to the ECDs but was also extended to the parents. The parents' training was dependent on their availability and their availability affected the human capacity from the facilitators' side. Facilitators then had to often run this training on Saturdays as they were often unavailable during the week due to work commitments. The main purpose of engaging parents was to create awareness on early learning and to enhance child-parent bonding.

The stretching of subject period was not only a reflection of insufficient time allocation but further postulates lack of human capacity. This indicates that, a specific number of facilitators had to be assigned a specific area of focus and category of beneficiaries that they would solely focus on without having to juggle multiple categories of beneficiaries, i.e., both short and long duration courses; as well as training parents. With lack of human capacity, project durations and flow of information are often affected, thereby impacting the quality of services offered.

With regards to parental workshop we have a timetable let me put it like that where we have workshops on Saturday we have parents in the area where we work we are advocating for parents to understand the importance of ECD and also the importance of playing with their children, so that change agents are facilitating these projects in the community where we work. These are mostly happening on Saturdays or afternoons when parents are available" (RTO, Penreach College, Mpumalanga)

6.2.1.2 Areas of Focus for Training

A child's foundation is very important and does not have to be taken for granted. The overall wellbeing of children's cognisant and mental development, their physical and emotional development and social skills are important founding factors in ensuring their success for the future. As a result, given the initial lack of appropriate skills to work with

children, the training provided by the RTOs was able to focus on both outdoor and indoor activities that cover a holistic stimulation of a child (i.e., socially, physically, spiritually, psychologically) using different types of materials that included blocks and toys; training on fire extinguishing as well as first aid. The training recognised that in the past decades, knowledge regarding childhood development has expanded, and with it, also the teaching methodologies. This meant that the RTOs had to train practitioners not only what children needed to be taught but also considered how (demonstration) they needed to be taught.

Upon receiving a training of this nature, practitioners became fully qualified with a level 4 Diploma. The training further specify the timelines for completion of each task in line with the curriculum followed. With all the teaching materials provided, practitioners had to keep children's minds active with the 6 bricks that involved learning about counting and colours and sorting them according to their colour e.g. blue, red, etc.

"They have indoor games that they play at designated areas. They trained us on that as well as to knowing what the child will be when they grow e.g. a child will be a doctor because of what they will put on while they are playing...the training about ECD development of the child was through Penreach College ECD level 4, and then fire extinguisher the RTL department came and trained us for first aid as well" (ECD

Practitioner, Vukuzenzele , Mpumalanga)

Additionally, it is understood that many of the early childhood development challenges cannot be solved by a single skill alone. The strengths lies in practitioners being multidisciplinary experts by having a breadth of knowledge across more than one area of discipline as this can provide the glue to bring together the pieces of addressing ECD challenges. Therefore, practitioners were further given guidance on catering that covered the nutritional aspect of capacitation, health related issues, especially issues around hygiene in relation to the children's environment. Not only were they taught about the hygiene around the children's infrastructure, but also on how to benefit from the land within which their centres operate.

Furthermore, the RTOs extended their training to parents within communities to create awareness on early learning. These were mainly community members who volunteered to utilise the spaces in their homes to allow children to play even during weekends and school recess.

6.2.1.2 ECD Current Teaching Manual/Guide

It is clear that although there are other guidelines used to inform the ECD activities, the most common manual is the Fast Learning Programme (FLP) within the National Curriculum Framework adopted for ECDs. However, there is 60% of centres that utilise manuals provided by their RTOs which they indicated that they are not similar to the NCF. Other centres (30%) reported that in addition to the NCF manual, they use their own experience and the old ECD programme manual (10%). This is a concern as the adoption of multiple guiding manuals may yield unintended results of the programme. This could mean that, for a certain activity, a number of mechanisms may be adopted across different centres. Although integration of multiple sources of knowledge may boost the results of the activity rolled out, the monitoring and evaluation process may be affected especially if a specified training manual was chosen for a particular reason. This therefore highlights the lack of uniformity in the implementation of the ECD programme.

6.2.1.3 Monitoring and Evaluation of the Programme

The monitoring processes followed by the RTOs are mainly guided by the type of programme rendered. The RTOs have project trackers who monitor the project implementation against the donor's expected deliverables. With the penetration of technology, there is a high usage of digital platforms that are used to locate the practitioners in their centres. The platforms allowed for monitoring to take place in real time as practitioners are expected to upload images of their engagement with children as it unfolds. This tool contributed towards the effectiveness of the programme as the RTOs were able to timeously monitor practitioners' daily routine adherence and rectify mistakes encountered during implementation, thereby ensuring that the training served its purpose.

Not only were the digital platforms used for monitoring, they were also used for other activities such as capturing food parcels as received by the centres. Additionally, as some practitioners visited children at their homes, this information was also captured in the system. By this, evaluators were able to track the number of children visited by their practitioners and the progress made by children who received services from the RTOs.

It is clear that technology tools support the ways facilitators measure the success of their field workers' daily activities, however, they do not seem to be using it to their full benefit. Not only would it benefit facilitators but there are ways it could benefit ECD practitioners and parents. Technology could also provide an optimal opportunity to strengthen connections with parents and could also assist how practitioners share information with them. Practitioners should use digital portfolios that include photographs as well as audio and video recordings to document, archive, and share a child's accomplishments and

developmental progression with families in face-to-face conferences or through communication and social media tools. Consequently, technology will help parents feel connected to their children’s learning development and growth. By developing a strong relationship with parents online, practitioners can reassure reluctant parents that technology is enhancing their child’s formative education.

6.2.1.4 Stakeholders Supporting the Programme

Over and above the NDA funded programme, the ECDs also had different participating stakeholders who helped by ensuring that the resources required for them to implement their planned activities were supplied. The most mentioned stakeholder was the Department of Social Development. This was followed by other volunteering entrepreneurs who assisted with food supplies and other organisations that provided the ECDs with additional training.

Although the DSD provide funding, there are also undesired shortfalls that come with relying on the department as they often delay or seize funds at times. If the ECD centres do not have an alternative avenue to source resources from, their operations become negatively affected.

Other Stakeholders involved in implementing the programme

Stakeholder	Role
Department of Education	Ensuring that the curriculum is adhered to
Department of Social Development	Funds the operations of RTOs and ECDs
Department of Health	Provide training to practitioners in relation to hygiene
South African Police service	Combat crime in communities where ECDs are situated and sometimes conduct safety awareness campaigns among children
Union of ECD practitioners	Advocate for ECD practitioners
Community members	Volunteer with space that can be used as play areas for children within their communities and also take part in parental awareness programme
ECDs	Some ECDs offer training to practitioners while some are the recipients of training.
Practitioners	Implementing the RTO programmes

6.3 Efficiency

6.3.1 Fluctuating Budget Allocation

With the funds received, the RTOs allocated the budget towards training resources that included toys, material and stationery; utilities; logistics, remuneration of trainers and administration. However, with the fluctuating prices of items and accommodation, it was challenging for the trainers to reach out to all the areas they ought to cover within their geographical boundaries. The number of centres that each RTO offered services to, ranges between 5-66 centres, with the provincial coverage between 1-3 provinces for each RTO.

While it may not have been established as to how much was allocated towards the RTOs, the budgets need to be revisited as the proposed activities may not equally match the budget allocated. This then questions the manner in which funds are proposed to funders as fluctuating prices need to always be considered at any stage of costing for proposed activities.

6.3.2 Lack of Outdoor Activities Resources

Furthermore, while there may be some stakeholders providing resources needed by the ECD centres, the resources were said to be insufficient, especially the outdoor activities resources. As a result, the implementation process has been negatively affected. Most of the centres catered for more numbers of children than what their infrastructure could accommodate. On a positive note, this is an indication that parents are seeing the benefits of early learning, however adversely, the quality of children's education is compromised. The number of children enrolled in centres range from 40 to 200 per Centre. This then means more stimulation resources.

"It is a centre that accommodates 202 children. ...I have this problem with the DBE, they cater for the grade R only, they only bring the indoor material; the outdoor material is not enough. The other classes, I provide, but the outdoors what we have is not enough for the number of children that we have" (ECD practitioner, Rathanda Isizwe, Mpumalanga)

Although the stimulation toys were supplied, practitioners were unable to cover the outdoor activities as there were no such resources in their centres. This therefore, partially defeated the purpose of the programme as certain activities fell behind for learners below Grade R. This means that a pivotal part of a children's life was often compromised, that is, an opportunity for them to become creative, imaginative, create social connections, and learn certain behaviours. Outdoor learning encourages learners to understand the interplay and relationship between curriculum areas.

6.4 Assessing the outcomes/impact of the intervention

In assessing the outcomes or impact of the intervention, factors such as the benefits of the programme to practitioners, children and ECDs in general were explored. The analysis therefore, revealed the impact related to capacity building, employment opportunities, and children's smooth progression to the next grade and unintended increased number of children enrolling with the centres.

6.4.1 Capacity Building

Over 80% of practitioners have reported positive outcomes from the training. For example, their exposure to children, incorporated with the lessons learnt from training have proved to have developed their skills with regards to working with children and developing them holistically. This includes enhanced empathy towards children and knowing how to handle a child when faced with illness related problems.

The programme has thus helped practitioners given that they started operating the centres with no experience and training but they now have the necessary knowledge required in the sector and they can also make proper planning for all the activities which include developing a child mentally and socially. The recognised importance of loving a child in the centres also helps to build trust between a practitioner and a child. Essentially, the success of sustained expansion of quality ECD programming depends critically on the capacity in practice and the capacity in knowledge among all relevant stakeholders, including designers, planners, trainers, managers, practitioners, monitors and evaluators, funders, and parents. However, at this stage, it is not clear as to what extent were parents capacitated as they were also the beneficiaries of the programme.

6.4.2 Employment Opportunities

The program was perceived to have benefits that touched different aspects of human life, among which the employment opportunity it brought about was. The program was averred to have potential to change the socio-economic lives of the disadvantaged in the society as practitioners are sufficiently competent to seek employment upon obtaining their level 4 training certificates or even establishing their own ECDs.

The importance of Early Childhood Development (ECD), and the role it plays in breaking the cycle of poverty is undeniable. It is proven through this programme to be the key driver in impacting a country's future economic growth and improvement for the citizens. It is also important to recognise the significance of properly qualified and competent practitioners to teach young children in order to equally remunerate the qualifying practitioners in a deserving manner.

6.4.3 Children's Smooth Progression to Next Grade

Furthermore, practitioners measured and monitored the success of the programme intervention through the number of children progressing to Grade R. These are children who had learnt how to talk and use certain resources to the best of their ability. It is evident that positive ECD programmes can change the development of children by the time they enter school. This shows that children who are ready for school have less chance of repeating a grade, being placed in special education, or being a school drop-out. Therefore, it could be deduced that ECD as a pre-formal schooling experience can be directly linked to efforts to increase efficiency in the schooling system. It lays the base for future educational gains.

"The results are mainly evident from the children themselves. They progress to grade R that is where when we can measure our success through the progress of the child. We also have progress reports, some children learn to talk, hold a pen, cut using scissors and so on" (ECD Practitioner, Khubelani Day care, Free State)

6.4.4 Unintended Increased Number of Enrolment

While the programme may have had its targeted set of goals, there were also some unintended positive outcomes or effects. More parents were said to have gained awareness on the importance of enrolling their children for early learning. Although unable to ascertain the actual growth in numbers over the periods, this has seen many ECDs having more numbers of children flocking into the centres. However, this then affects the centres as they will then have to source more meals, teachers and expand their infrastructure.

"We got a lot of children coming to register because the community realised that the children come here to learn and find a place where they belong and they know what their responsibilities are. Even when we do not have resources they do bring their kids here because they now know that they are not here to play but to learn as well Unlike keeping the child at home where they are not taught anything so when they go to foundation phase they have base" (ECD Practitioner, Thembumalusi Day care, Mpumalanga)

6.5 Sustainability of the project

In this section we assessed the possibility of the RTOs continuing with the ECD training programme to other communities that needed such a programme. The most contributing factor to the sustainability of such a programmes was centred on the availability of financial resources.

While the RTOs may have their programmes well outlined, it is equally not feasible for them to deliver on their mandate and to their optimum level due to lack of funds. Respondents indicated that by this experience, they have also been unable to remunerate their trainers and/or practitioners as they are not government funded, but rather, more donor reliant.

The RTOs do allocate a budget for their activities which often accompany their funding proposals to the potential donors during the application stage. Although the NDA has contributed towards the funding, the RTOs also alluded that the funds were insufficient. The funding was said to have been a short-term contribution and as a result, they sourced funds from multiple donors such as community members and the National lottery among others. This indicates that although the intention of the programme has come to fruition, it may not be sustainable if the RTOs do not have funds to continuously provide training to the target market as they have mentioned that when they run out of funds, training comes to an end and the connection between them and practitioners is lost.

In addition to RTOs lacking funds to sustain the programme, 60% of the centres also reported not to be having funds to operate their centres, however, through monthly fees and donations made by parents, they were able to cater for certain needs of their children. For the centres that used to receive funding from the Department of Social Development, the funds have since been seized. This then contributed negatively to the daily running of centres and they do not have other avenue to source finances from, thereby affecting the sustainability of their centres.

Over and above the programme being beneficial, the sustainability of the programme on the other hand was clearly dependent on the availability of funds. This is further seen on the ECDs' inability to retain practitioners as they sometimes spend more than 3 months without remuneration, while others earn a salary not equivalent to their qualifications. Over 70% of centres have experienced a cut of funds and had to learn to adjust and fit all their needs within that reduced budget. Given these financial challenges, training provided does not fully benefit the ECDs due to the issue of remuneration. Centres with more infants are the most expensive to run per child and centres are likely to struggle the most while they are establishing themselves. During these times of struggle they are likely to compromise on inputs that are critical to quality care and should be sought out for support.

There were further perceptions that the government funders who were on board were not contributing as much as they would have expected. The RTOs were of the opinion that government should take a role of remunerating the practitioners as some are earning as little as R2 000 a month. This therefore, derails all the efforts as some practitioners end up giving up on the job they received training on.

6.6. Lessons Learned from the Intervention

6.6.1 Need for Regular Follow-Ups with Beneficiaries

The respondents were of the view that it was important to do follow-ups after training of the practitioners to keep track on whether they continued adhering to what they would have learnt and also check their progress to determine whether they were able to establish their own ECD centres or secure employment. The idea of doing follow-ups will also assist in monitoring the sustainability of the programme in the long run and determining the amount of additional training required since knowledge evolves on a daily basis.

“I can say the lesson learnt is that we cannot just train them and leave. If we train them, we need to do a follow. It cannot be something for a short time, a follow up to see that centre is sustainable now. Not just to provide training and leave the practitioners. We need to do a follow up so that they see we are there for them and also that they get training” (RTO, Early Learning Resources Unit, Eastern Cape)

6.6.2 A Need to Bolster Number of Practitioners

Most of the centres highlighted the lack of human capacity to handle the ECD activities. With the demand of access to the ECDs, practitioners found themselves handling far more numbers than the expected ratio. The expected ration is 1:10, however, in this instance, practitioners have to handle a doubled ratio (i.e., 1:20). This then affects the quality of their expected deliverables as they are unable to divide the attention among all children. This therefore emphasis the need for more training as centres can only absorb practitioners who have been through training and possess the relevant skills.

6.6.3 Need for Additional Stakeholders

Most practitioners (60%) were of the view that the ECD programme could yield best results if the Department of Education also came on board. This was due to the fact that the ECDs form part of the education sector, therefore, if the required department assists, it will help the ECDs with retaining the practitioners by remunerating them.

The quality of early ECD programmes depends heavily on the knowledge and skills of those who work with young children. It is clear that ECD practitioners required continual opportunities for high-quality training to bolster the number of practitioners given the growing numbers of enrolments versus the human capacity within the ECDs.

To enable the expansion on the number of practitioners receiving training and ensuring that other practitioners advance to the next NQF level, stakeholders and/or donors should match the amount of tasks at hand for RTOs.

7. Discussion

With the sudden compulsory pre- Grade R year introduced in schools, it is clear that this would require an extra number of trained ECD practitioners. However, reports show that the country currently does not have the required number of extra qualified ECD practitioners (Harrison, 2019). This would mean ECD practitioners moving out of their community organisations as they move to schools for higher pay, leading to ECDs having more enrolments of young children in need of developmental skills yet with a less number of qualified practitioners to ensure that these children's needs are catered for.

In light of the above, the NDA had since made efforts to close this ECD capacity challenge, among others. However, through evidence collected from this study, it is evident that the lack of capacity among ECD practitioners is still a persisting issue and there is still a need to capacitate more ECD practitioners.

This study was anchored on the eight (8) objectives that aimed to assess the overall effect to which the RTOs had on capacitating the Early Childhood Development programme. As per the NDA strategic plan, the ECD programme facilitated by the RTOs was indeed aligned to the strategic plan. However, the evidence gathered shows that while there may be positive outcomes yielded by the programme, which was to capacitate the ECDs holistically, there are also challenges that negatively impacted on the intended outcomes of the programme.

7.1. Design of ECD programme intervention- Relevance

The intervention of the ECD programme was evidently designed with the intention to have strong and lasting impacts on ECDs and the practitioners in a long run. As opportunities missed at this stage can rarely be made up for in later stages, the RTOs ensured that ECDs are registered for eligibility of funds and operations as per the regulations outlined by the Department of Social Development and other donors. This was to allow them an opportunity to offer children one of the basic rights in the most professional way.

With qualifications being one of the biggest challenges in the ECD sector, the RTOs were able to close this gap with their intervention by providing necessary skills that are in line with the prerequisites that enable practitioners to obtain a qualification in this area of discipline. The training came at no cost to ECD which in return, was able to contribute towards eradication of poverty through job creation as it was envisaged. The programme was based on a developmental framework for children from birth to six years. By this, RTOs ensured that the needs of the children were given a primary focus and provided training that emphasized the need for developing a child emotionally, physically, spiritually, intellectually, creatively, socially and morally, in other words, the needs of the child as a whole.

7.2. Programme implementation- Effectiveness

The process of identifying the ECDs in need of capacitation was clear, however, once identified, completing some of the trainings within a stipulated time frame became a daunting task. Some of the trainings took place outside working hours, while the duration of some trainings had to be stretched to holidays and weekends in order to keep to the stipulated duration of beneficiaries completing training for their specific qualification. This indicates that the time allocation for the programme was insufficient. If RTOs are to ensure that in future they provide further education and training opportunities for those with no relevant qualifications, and those with limited or difficult access to further career development opportunities and provide sound practical qualification to provide quality Early Childhood Development services for children at community-based sites, then the implementation process should be in such a way that all activities are allocated a fair amount of time of training. However, the increase in the training timeframe would mean an increase in resource allocation as well.

The training enabled practitioners to be exposed to children that differed in age groups. Multi-aged centres are a rich source of learning, for both practitioners and children. However, for some centres, practitioners were forced to go through such an experience due to high influx of enrolment yet with less human capacity. This also negatively affected the daily tasks that

each practitioner had to deliver on. It should further be acknowledged that the implementation process was more integrated rather than fragmented into subject areas, i.e., they included both play and educational activities. By this, practitioners were able to assist children to reach their full potential.

While practitioners may be well capacitated in developing a child, there was lack of uniformity in terms of the training manual used. ECD practitioners averred to have relied on three different forms of guidance, i.e., NCS manual, old ECD programme manual and their own experience. It is not clear as to why there were different preferences regarding manuals as this implies that activities that children were exposed to, were not standardized, as a result, children of a particular same age may have not received similar developmental exposure. Therefore, a uniform training manual needs to be developed. Should it be in existence, emphasizes on the use of the required manual should be made to practitioners as this could mean that there was communication breakdown in terms of the correct manual required.

RTOs have further shown some level of innovation and advancement in terms of technology as they conducted their monitoring and evaluation through the use of digital technology. It is important that this aspect is strengthened among ECDs to ensure the effectiveness of the children's development tracking system.

7.3. Challenges Experienced during the Implementation of the Programme

Regardless of the parent's choice, all ECD facilities should provide a good quality service and high standard of care to children that would aid in the development of the child. However, for some of the ECD centres, it has been a challenge to ensure that facilities met the developmental needs of children. While through the programme it was ensured that the necessary resources were provided to the ECD centres, the resources were insufficient, thereby impacting negatively on the other elements of children's development that needed to be catered for. This is with reference to the outdoor activities.

The lack of resources proves to be one of the factors defeating the holistic approach towards child development. While this may be seen as a challenge, it also shows how heavily reliant the ECD were on similar and regular donors. Therefore, there is a need to structure the ECD programme in such way that it has potential to attract other sectors or government departments that can invest in the programme through financial management training, which will subsequently be able to support ECDs based on their contextual needs. By this, the rate

of ECDs' financial depletion becomes minimal and the regular financial supporters' burden is reduced. This will further contribute towards sustainability of the ECD programme.

7.4. Outcomes/ impact of the intervention

The programme has well capacitated a large number of ECD practitioners with the required skills and have been able to either get employment or establish their own ECD centres. Through skilled practitioners, the intervention has seen outcomes that demonstrates that children who have experienced ECD interventions, or received minimum pre-primary schooling, progress well to the next grade. The outcomes support research studies that have found that children who attend ECD programmes are more motivated, perform better and usually get along well with their classmates and teachers (Nel, 2007).

The intervention has also seen unintended positive outcomes with more children enrolling at centres, which led to some centres handling number of children that exceed their capacity.

While the intention may be to ensure that all children are of equal worth and are entitled to achieve their full potential, entitled to well-planned and well-organized learning opportunities and ought to be accepted unconditionally, this affected their resource allocation and human capacity. Therefore, more infrastructure is required for centres experiencing high intake.

7.5. Sustainability of the Programme

The Nation-wide Audit on ECD Provisioning found that the ECD sector is, for the most part, extremely poorly funded and sites appear to have very few financial resources to rely on at all levels of functioning (DoE, 2001). Nearly a quarter of the identified sites rely solely on the income of fees received monthly (Nel, 2007). These fees are generally low with a very high rate of non-payment. Other than these school fees, 28% of the ECDs do not have income. Some ECDs depend upon limited subsidization from the governmental departments.

Similar to the ECDs that formed part of the RTOs' ECD programme, there was a challenge related to funds which prevented ECDs from operating to their optimum level. This suggests that financial resourcing of ECD continues to be a big challenge for the sector. Lack of financial resource prevented them from remunerating practitioners as they ended up resigning due to non-payment services. The inadequate resourcing of the ECD sector is also reflected in the low salaries that practitioners receive. The salaries earned are not equivalent to their qualifications.

8. Conclusion and Recommendations

In conclusion, the ECD programme intervention has yielded positive outcomes and the most significant change is evidently seen from skilled and qualified practitioners who initially lacked the required skills to work with children; alleviation of poverty through job creation and children who progress well to the next grade as a result of being developed and nurtured holistically. However, due to lack of resources that necessitate and enable the continuation of the programme, the sustainability of the programme is not guaranteed.

8.1 Recommendations

Based on the findings of the study, below are the recommendations made:

- Given that there is an issue of unemployment raised as a community challenge, this means that some children do not pay school fees, which makes it difficult to impose a fee system. Therefore, RTOs and Practitioners need to be trained on how to attract / source funders and be guided on what funders look out for to ensure that they increase their chances of attracting funders to enable them sustain the programme and ECDs.
- The programme has great potential of continuing to eradicate poverty through job creation. However, there is a need to consider increasing funds and make provision for remunerating practitioners and RTO facilitators so that they can be retained in centres. This is to ensure that practitioners serve the purpose of training received and that RTOs have human capacity to deliver on their mandate. This will also contribute towards the human capacity required by some centres that have large enrolment of children. Therefore, the success of this heavily relies on partnerships with other potential stakeholders that fund courses of this nature.
- Skills for practitioners need to be enhanced regularly considering the level of technological penetration in the Sub-Saharan Africa. Therefore, a realignment is required for South African children to remain relevant in the world of technology. This will mean providing relevant resources in this regard such as gadgets, since children in rural areas seldom have an opportunity to be exposed to such resources.
- The programme should consider an element of capacitating ECDs on financial management skills. This skill is important in ensuring that finances acquired from donors are well managed and used on resources of priority. While it may not be clear as to how the finances of RTOs are monitored, the training mentioned above must be complemented with a mentoring process. Due to a combination of complex factors,

that include low literacy, this mentoring might be an extremely arduous and energy-sapping task for the mentors. Anecdotal evidence from NGOs that provide support to centres suggests that the levels of training provided are often too high for principals to understand and that it is generally more constructive to mentor practitioners in a facility. The same applies to training in financial management. The financial management skills training should be basic and featured in a NQF Level 1 qualification.

- Given that the child's learning environment is of utmost importance if the purpose is to develop a child holistically, more resource allocation should be considered as the current resources restrict practitioners and children to the indoor environment. Therefore, to balance the needs, outdoor recreational facilities should be provided.
- Over 80% of ECDs are based in rural areas where there is a large land surface to their advantage which can be used for planting vegetables and fruits that can be fed to children. ECDs need to be encouraged to make use of their land and grow their own food to reduce the level of dependency on food donors.

Future longitudinal study on the benefits of ECD programmes aimed at enhancing early childhood development should be conducted. The study should be aimed at clearly indicating the profound impact that the programme has had on children over a period of time as they progress to the next grades.

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10. Annexures

10.1. Annexure A.

EVALUATION OF THE NDA EARLY CHILDHOOD DEVELOPMENT PROGRAMME AS IMPLEMENTED BY THE RESOURCE AND TRAINING ORGANISATIONS (RTOs): PROGRAMME IMPLEMENTERS / COORDINATORS DISCUSSION GUIDE

Moderator/Interviewer to briefly introduce self:

Audio recording of proceedings for transcribing and report writing

There are no wrong or right answers, all their views are important, emphasize on honest opinion

Assurance of anonymity participants' opinions will not be linked to their identities

To assess the effect to which RTOs had on capacitating the Early Childhood Development Programme.

The evaluation follows 6 main lines of enquiry:

- Evaluate the design of ECD programme intervention (Theory of Change)
- Assess programme implementation of the programme
- Conduct cost benefit analysis of the intervention
- Assess the outcomes of the intervention
- Assess possible sustainability of the project in the future
- Draw the lessons to be learnt from the intervention

1. Introduction

- What are the roles and responsibilities of this organisation in relation to the ECDs? Probe:
 - What support do you provide?
 - What are the main activities mandated to your organisation?
 - How were those activities implemented and monitored by the RTOs?
- What are the geographical boundaries in which your organisation operates?
- Number of ECDs providing services to?

2. Programme design and implementation

- According to your knowledge, what were the reasons behind the establishment of the ECD programme that you are implementing in communities? Probe:
 - What informed the establishment of the Programme?
 - What are the key objectives of the programme?
- Do you think there is a need for such a programme in communities?
 - As an organisation, would you be willing to expand to other communities that might need such a programme?
- Who are the key role players / stakeholders of the programme?
 - What roles are these stakeholders playing in the programme?
- Are you clear about the role and mandate of your RTO with regards to ECDs in the province? If not, why?
- Which tool (guide) was used to train the ECD practitioners? Provide example as a guide
 - What informed the tool you are using for training?
 - What are the areas of focus for the training?

NB: Request for a training manual they use if possible

- What have been the challenges regarding the implementation of the ECD Programme? (Probe for: barriers or challenges for programme implementation.)
- What resources do you think are needed for this programme to function effectively? Probe: **Would you say that you are well equipped to provide this kind of training to the ECDs?)**
- How many ECDs did the programme intend to assist and how many have been assisted thus far?
- What was the time allocation for this programme?
 - Looking at the amount of work needed for such training, would you say the time allocated was enough?
 - Was the programmes completed within the allocated time?

3. Effectiveness

- Since the implementation of the ECD programme, what would you say have been the successes of the programme? (Probe for: enablers for programme implementation.)
- What do you think are the benefits of having such a programme in communities?
- **What** and **where** would you identify the most significant gaps – both generally and specifically in terms of the functioning of the ECDs?
- Have there been any unintended positive or negative consequences as a result of this programme, such as the increase or decrease in the number of children accessing the ECDs?
- How are the ECDs monitored to ensure that they use the training received effectively in order to deliver on the intended outcome?

4. Financial resources

- How is the ECD programme financed? Is there a budget for them?
- Would you say the funds are sufficient to implement the programme? If not, what would you say are the reasons?
- What activities does the budget cover? (List the activities)

5. Outcome

- What changes (or outcomes) have you seen or heard that are as a result of this programme? Probe for outcomes such as:
 - Skills development
 - Poverty alleviation

6. Lessons learnt and recommendations

- What are the lessons could be learnt with regards to the implementation of the ECD Programme by the RTOs thus far?
- What recommendations would you make to strengthen the implementation of the ECD Programme as implemented by the RTOs?

Thank You

10.2. Annexure 2.

EVALUATION OF THE NDA EARLY CHILDHOOD DEVELOPMENT PROGRAMME AS IMPLEMENTED BY THE RESOURCE AND TRAINING ORGANISATIONS (RTOs) PROGRAMME: ECD PRACTITIONERS DISCUSSION GUIDE

Moderator/Interviewer to briefly introduce self:

Audio recording of proceedings for transcribing and report writing

There are no wrong or right answers, all their views are important, emphasize on honest opinion

Assurance of anonymity participants' opinions will not be linked to their identities

To assess the effect to which RTOs had on capacitating the Early Childhood Development Programme.

The evaluation follows 6 main lines of enquiry:

- Evaluate the design of ECD programme intervention (Theory of Change)
- Assess programme implementation of the programme
- Conduct cost benefit analysis of the intervention
- Assess the outcomes of the intervention
- Assess possible sustainability of the project in the future
- Draw the lessons to be learnt from the intervention

Introduction

- What are the main problems / challenges faced by children in this community?
- What were the reasons behind the establishment of this ECD centre? **probe**
 - What problems was it trying to address?
- In your understanding, what are the key changes that the RTO's ECD programme wishes to bring about? (Probe for: changes at the level of the individual, learners, ECD)
- Is there an existing guideline/ tool that you use to plan the activities of this ECD centre? (Explain how do they plan their activities)
- Tell me briefly about this ECD centre, including:
 - Its primary focus areas
 - Objectives

- Mandate
- Is it a private or public entity
- What are the geographical boundaries in which this ECD centre operates? Which areas does it service?
- What is the number of children accessing this ECD centre, grouped according to age and gender
- Please describe your main roles and responsibilities in this ECD centre

10.Skills

- What would you say are the skills requirements for one to manage / work in the ECD centre? **Probe**
 - Would you say that staff members in this ECD centre are equipped with the necessary skills?
 - What sort of training is provided to staff members?
 - Who provided the training to the staff?
- Would you say there are enough human resources in this ECD centre to deal with the different needs of children accessing services here? Please explain your answer
- What are your training needs that will help you to execute your duties effectively?

10.Impact of the RTO ECD programme

- Are there any additional activities/training that have been offered to staff members in this EDC centre? **Probe:**
 - Who offers these activities / training? **If not mentioned, probe awareness of the training by the RTOs**
 - Who attended the training and Why?
- Since the implementation of the RTO ECD programme, what would you say have been the successes of the programme?
- How relevant is this programme to you? Is it something you can use for the benefit of the learners?
- Have you incorporated the learnings from this programmes to your daily activities at the centre? If not why?
- **What** and **where** would you identify the most significant gaps to lie – both generally and specifically in terms of the functioning of this ECD centre?
- What changes (or outcomes) have you seen or heard that are as a result of the RTO ECD programme? Probe for outcomes such as:

- Staff members' skills development
- Psycho-social enhancement on children
- Poverty alleviation
- Has there been any unintended positive or negative consequences as a result of this programme, such as the increase or decrease in the number of children accessing the ECD centre?
- How is this ECD monitored to ensure that you implement the learnings from the programme?
- Did the programme meet your expectations? Why?

9.Partnerships

- Apart from the NDA, who are the other stakeholders that are involved with this centre?
Probe:
 - How are they involved
 - Benefits of having them on-board
- Which other department would you say needs to be involved in the development of the ECD centres?

9.Funding

- How are the activities and operations of this ECD centre funded? Do you get any funding from other organisations apart from the National Development Agency's RTOs?
- Are there adequate allocations of funding for you to carry out your activities in the centre?
Is funding accessible and made available on request?

Recommendations

- What measures do you think could be put in place to improve on the operations of this ECD?

End: Thank you for your time and for sharing your insights with me.

Approval of the Report

Compiled by: Quest Research Services

Reviewed By:

Simon Baloyi: Senior Manager M&E  **Date:** 22 May 2020

Approval

Bongani Magongo: Executive DMR: ----- Date -----