



REPORT

THE EVALUATION OF ECD SERVICES



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TM CONSULTANCY
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Executive Summary

The evaluation aims to review and determine the social value and impact of money invested by the Kouga Windfarm Community Development (KWFCDT-also known as the Trust) the early childhood development in meeting the social needs of children within the Kouga Local Municipality (KLM) community. The ECD project targeted Kwanomzamo, Kruisfontein, Humansdorp and Sea Vista as the four (4) core areas within and around the KLM community. Partners and organisations who enabled the social value and impact of money invested include, CECD, the principal organisation with partner organisations Africa A+ and the Lunchbox Fund as they provide nutrition support.

A mixed multi-method ensured a holistic approach. Triangulation of data from the multi-source was key. Our multi-source included interviews with principals or founders of the ECD centres, and household surveys with children of ECD ages within or around these ECD centres. Document Review enabled us to understand project design, intended outcomes, and progress as we analysed project documents and reports. Our Evaluation Question Matrix elaborates on the interconnection of our multiple data sources, sampling, and indicators to support the evaluation questions.

In carrying out the research, a mixed-methods approach was used, including:

- Literature review and document analysis.
- Key informant interviews and
- Focus group discussions with selected key role-players
- Household surveys within the targeted communities

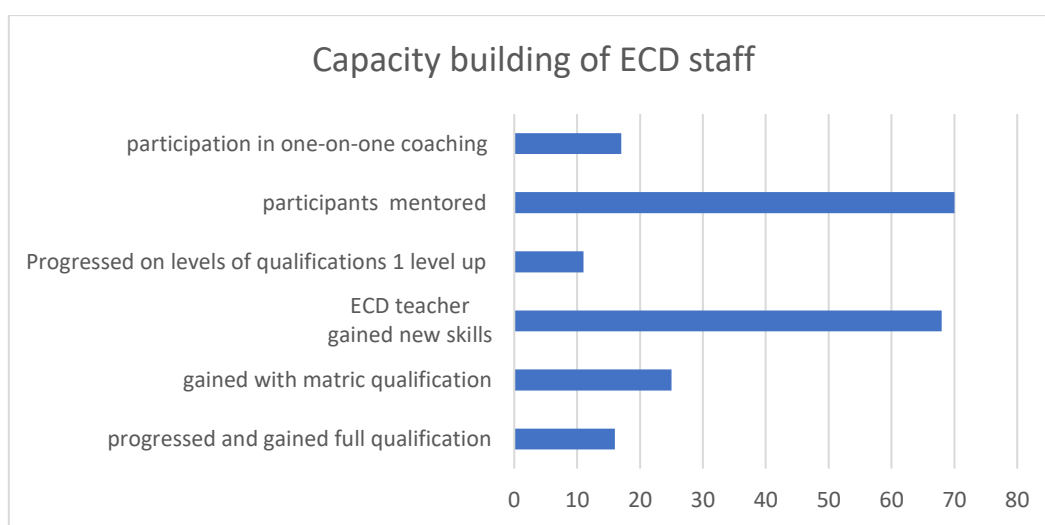
The evaluation criteria focused on following key areas with the following evaluation questions

Evaluation Criteria	Evaluation Questions
Efficiency	How efficiently were resources used in the project?
	Were there delays or challenges in delivery?
Effectiveness	Did the project meet its objectives?
	Were teaching methodologies effective?
Sustainability	Can the project continue after initial funding?
	Are there mechanisms for long-term benefits?
Impact	How has the project impacted children?
	Changes in attitudes towards the ECD?
Training and mentorship received	Was there any qualification progression and new qualifications achieved?
	What was the quality of training for educators?
	What was the mentorship and support received?
Leadership and Governance	Has the ECD centre manager's ability to lead and govern the centres improved?
Management of Project Personnel	Has the ECD centre manager's ability to manage people at the centres improved?
Registration and Compliance	How have the ECD centres been mentored and supported with the Registration and Compliance process?
	How have the new infrastructures complied with the diverse educational needs of children with different levels of stimulation for children to learn in a safe and conducive environment?

Health and Nutrition	Was there nutritional adherence?
Procure educational equipment and procurement/ development of learning material,	how the needs of children with different levels of stimulation have been met through diverse educational equipment?
	What new educational resources and equipment have been procured to stimulate learning and play?
	How does procurement of new infrastructure enhance development to stimulate diverse education?

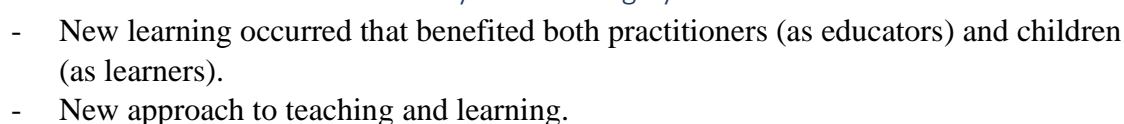
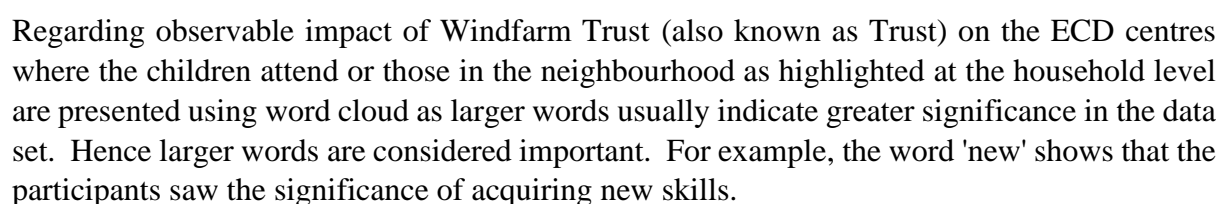
Results are structured accordingly, and summaries are based purely on the participant's responses. These are highlighted below as follows.

The A+ capacity building workshops included all employees of the ECD centres, both caregivers and caretakers



From participation in the diverse skills development and mentorship workshops staff indicated that they actively improved in daily activities within the ECD centres.

■ Numbers of staff actively improved in program implementation or are doing things differently due a mentorship
■ Number of participants in the ECD teacher training



- Accessibility of facilitators and willingness to engage beyond classrooms.
- Practical application as well as support during implementation of newly learned skills.

On the impact of the ECD leadership, management, and educators training

- Ability to manage own staff.
- Improved communication skills with staff which goes beyond task orientation – work-related but understanding personal development and career aspirations.
- Enhanced principals as effective leaders.
- Increase in the quality and diversity of services offered at the centres.

On oversight and support of ECD centres' registration and compliance

- The registration support reduced the complex application process.

On the management of Project Personnel (work done by CECD)

- Regular site visits supported ECD practitioner in delivering their goals.
- Diverse interventions by strategic partners and how these elevated the work of the Trust.

On assessment of nutritional requirements and recommended suitable programmes

- At least one nutritious meal (breakfast or lunch) was offered at the ECD centre through the support of Lunch Box.
- The variety of food with supplements offered was nutritious for the developing body.

On procurement of educational equipment and procurement/ development of learning material

- An upward ward trajectory on the procurement of equipment to enhance stimulation, as well as supplement/ complement existing outdoor /indoor educational activities.
- The downward trajectory for not procuring indicates sufficient resources.

On mentoring and support of all ECD key stakeholders

- A 90% attendance and participated in the mentorship through the A+ workshop
- New knowledge gained and new skills developed.

On monitoring and evaluating project progress and implementation

Item	Baseline	Current results
Access to clean water	12 no clean water	74% (yes); 26%(no)
Access to clean water & sanitation	6 no access	70%(yes); 30%(no)
Veggie garden	7 centres	
Meals	34 centres	
First aid training		89% (yes); 11% (no)
Fire extinguishers	5 no access	
Sufficient stimulation resources (books, puzzles, art, and numeracy material)		78%
Sufficient stimulation resources (books , puzzles, art, and numeracy material)		100%

Sufficient stimulation resources (books, puzzles, art , and numeracy material		44%
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On overseeing and managing ECD centre buildings and upgrades

- 63% of centres have been upgraded
- Diversity of upgrades includes new classrooms, new schools painting and refurbishment

The weakness in this evaluation report is based on the inability of participants to separate and identify the key stakeholders whenever the evaluation process was done. For instance, the Trust was referred to as the Windfarm, and the inability to separate or clarify if work was done by A+ or CECD training. However, A+ engages the whole school approach which would include some training of Principals in terms of pedagogy and engagement with their staff but CECD did specific leadership and management workshops as well as provided mentoring and support.

General Consultancy Comments and Observations

It is essential to note that throughout the evaluation process, participants from the ECD centre were not able to separate services offered by CECD and A+. However, in some instances, they were able to name individuals like Thembisa (from CECD see p35) as part of the A+ team. Throughout the process, CECD was never named by respondents.

This was also observed concerning separating local and district municipalities where Sarah Baartman (district) and Kouga (local) and at times the Wards are also unknown.

The consultancy team separated the following processes, support to ECD centres, mentorship (1-on-1 and group) and coaching (1-on-1) where each of these separate activities was explained so the respondents do not get confused on each of the terms.

The registration process was an open-ended question where the consultancy team focused on determining if the ECD centre as an establishment was a registered entity. If so where was it registered? This led to diverse responses highlighted by respondents as these included national (CIPC) provincially and regional (DSD) and local (municipal zoning).

The evaluation process focused on the progression level and the completion of a full qualification. However, opportunities to increase these numbers only came out as a recommendation from the focus group. This means those who participated in the focus group might not be aware of the seven (7) sponsored level 4 teacher-principal through A+ and ITEC. This is an opportunity that could increase the number of those participating in this programme.

Finally, the consultancy team is of the view that the governance and leadership development of ECD centres could be enhanced with the development of governing bodies from the ECD centres. This can be a favourable process for the centres as they adhere to ethical leadership which exemplifies integrity, competence, responsibility, accountability, fairness and transparency (ICRAFT)¹

¹ THE KING REPORT ON CORPORATE GOVERNANCE: **King-IV-Summary-1-November-2016**
PDF (www.nhbrc.org.za)

Abbreviations and Acronyms

A+	Africa Plus
CECD	Centre for Early Childhood Development
CIPC	Companies and Intellectual Property Commission
ECD	Early Childhood Development
DBE	Department of Basic Education
DoSD	Department of Social Development
KWFCDT	Kouga Wind Farm Community Development Trust
KLM	Kouga Local Municipality
NPO	Non-Profit Organization/Not-for-Profit Organization
SDG	Sustainable Development Goals
ToC	Theory of Change
UNICEF	United Nations International Children's Emergency Fund

Definition of Terms

ECD Centre	Early Childhood A partial care facility that provides an early childhood programme with an early learning and development (ECD) focus for children from birth until the year before they enter Grade R/formal school.
ECD practitioner	A person who provides early childhood development services through formal early childhood development programmes, family services playgroups and training, as well as those providing management support services to these workers.
ECD programme	<p>Programmes that provide one or more forms of daily care, development, early learning opportunities and support to children from birth until the year before they enter formal school. These programmes include, but are not limited to:</p> <ul style="list-style-type: none">• Community-based playgroups operating for specific hours;• Outreach and support programmes for young children and their families/ caregivers, at a household level;• Parenting support and enrichment programmes;• Support for the psychosocial needs of young children and their families;• Programmes provided at partial care facilities and child and youth care facilities, as contemplated in section 93 (5) of the Children's Act; and• Any other programme that focuses on the care, development, and early learning of children from birth until the year before they enter formal school.
ECD services:	Services or support provided to infants and young children or the child's parent or caregiver by a government department or civil society organisation to promote the child's early emotional, cognitive, sensory, spiritual, moral, physical, social and communication development.
Early intervention:	The experiences and opportunities afforded to infants and young children with disabilities or developmental delays, or to those at risk for developmental difficulties (vulnerable children), by primary caregivers and/or professional practitioners that are intended to promote children's behavioural competencies and enable them to participate meaningfully in their homes and community environment
Primary caregiver	A person, whether related to the child or not, who takes primary responsibility for meeting the daily care needs of the child in question, excluding those who take care of children for remuneration or reward.

Acknowledgement

The cooperation, support, and willingness to participate in this process as the Early Childhood Centers principals within the Humansdorp, Oysterbay, KwaNomzamo and Kruisfontein areas were key towards the success of this report. Their participation allowed us to interview and do a walkabout that gave us a clearer perspective of each ECD centre.

An appreciation for the use of one of the preschools to conduct our focus group discussions with the selected participants.

This report would not have been complete without the services of SAKHE a family-oriented organization of volunteers. It was through the Sakhe team of enumerators that we were able to complete our household survey on time.

A word of appreciation to the support team of Delapho Ndlovu through backend support throughout the project and to Wandile Ndlovu for assistance in conducting Afrikaans Interviews with the key informants.

Finally, the Kouga Wind Farm Community Development Trust (KWFCDT) for trusting me to deliver this evaluation project output

Chapter 1

Introductions, Background and Context

1.1. Introductions

This section of the report provides the background and context for a greater understanding of the contributing factors that funds from the Trust have enabled the success of ECD centres through support and valuable interventions. The Kouga Wind Farm Community Development Trust (KWFCDT) is a community development project that funded the provision and implement support to the Early Childhood Development (ECD) projects around four (4) communities within Kouga Local Municipality (KLM). This project activities at the Ward level (wards 1, 4, 5, 6 & 15) focused on stakeholders and communities in those areas as KLM covers greater Humansdorp, St Francis, Sea Vista, and Oyster Bay.

This project is in its second phase, where the baseline with first-phase interventions focused on Cohort 1 and second interventions focused on Cohort 2 as well as different assessment time schedules. From Cohort 1, ECD centres and their teachers as ECD practitioners were assessed for the baseline process (13). For the follow-up process (11) were assessed. However, for the second phase, 14 were assessed during a follow-up process. For Cohort 2 assessment for ECD centres and their teachers was done for 12 and a follow-up process of (12).

1.2. Background and overview

South African government acknowledges that early childhood development is an educational process thus moving this from social development to basic education. This has elevated the issues of stimulation at cognitive, emotive, and physical to enhance growth and development. Something that goes beyond care. ECD in South Africa is regarded as a key pillar to remedy the poor educational outcomes from basic education as stated in Vision 2030. The KWFCDT (also referred to as the Trust) as community development has seen this as a critical funder, focused on increasing young children's access to quality ECD services in the targeted Kouga Local Municipality in the Sarah Baartman District through its R20 Million investment to this project. The area is surrounded by small towns such as Humansdorp, Jeffreys Bay, Westin, Thornhill, Sea Vista, Patensie, and Hankey. These small towns are characterised by low levels of education (basic education) and social ills such as alcohol abuse, high poverty levels and high unemployment levels, especially for youth.

According to the census 2022, the Kouga Local Municipality has a population of 107,014 population size, an increase of 8456 since the 2011 census (Stats SA 2022) with a gender distribution of 47,4% male and 52,6% female. Educational institution attendance (5-24 years) at 67,5%, household informal dwellings at 84,7%, and access to piped water in the dwelling at 72,2% (StatSA 2022). The settlements in the Kouga Municipality that are within a 50 km radius (from Jeffreys Bay include: [Cape St Francis](#), [Gamtoos Mouth](#), [Hankey](#), [Humansdorp](#), Kouga NU, [Kromrivier](#), [KwaNomzamo](#), [Loerieheuwel](#), [Oyster Bay](#), [Patensie](#), [St Francis Bay](#),

[Thornhill](#)) are the major tourism towns which is the economic driver in the area through accommodation, restaurants, and tourist attractions. This is followed by farming (e.g., citrus). 65% of the population is of working age (15-64), and the dependency ratio is 53%. There are 29 447 households and 2002 agricultural households. The average household size is 3.2. Unemployment is 21.5% and youth unemployment stands at 26,7% (SAStats Census 2011).

In 2020 a baseline study was done which helped provide the basis for the study. However, in areas where there is no baseline national and global instruments will be used to help guide the process. For example, the Department of Social Development (DSD) provides guidelines for ECD services as a national instrument whereas UNICEF and SGD toolkits will be used as global guiding frames for working with children between 0-6 years.

Based on the affiliation to the Centre for Early Childhood Development (CECD) annual reporting, a self-assessment process as well as monitoring progress helped determine the return on investment and the status of deliverables of goals and objectives.

1.3. The Context

The Kouga Wind Farm Community Development Trust also known as the TRUST invested in infrastructure upgrades and skills training, about R10 million from the R20 million ECD budget (KWFCDT 2022 Report). This investment serves a very important purpose; founded by the investors of Kouga Wind Farm, a renewable energy project based in Oyster Bay, as a part of the latter's commitment to community development in its beneficiary communities. From its 26% stake in the renewable energy project, the Trust ensure the designated communities benefit meaningfully by investing these funds in various community development initiatives. They see themselves as a catalyst that builds community resilience, sustainability, and self-relianceⁱ.

The ECD programme is one of the Trust's flagship projects as it elevates access to quality ECD services for those living in marginalised communities around the Eastern Cape. Making it possible for children to grow and develop to their full potential, as well as reducing inequalityⁱⁱ. The programmatic focus of the ECD has its pillars highlighted in Figure 1 below.

The project focused not only on formal ECD programmes but also incorporated informal ones through infrastructure development, nutritional support through collaboration with the Lunch Box (Fund) and professional development pieces of training for ECD staff, on educational material, capacity building to broaden knowledge, creative approaches in stimulating physical and mental development for children at these centres. The aim was to work with all the ECD centres in the specific wards focusing on strengthening existing ECD centres in these highlighted areas regardless of whether they were formal, or informal.

The stimulation of children's physical and mental development has been done in partnership with Africa Plus (A+) through its 3 main goals indicated in Figure 2 below. This means outcomes and impact can be linked directly to the intervention of A+ as one of the service providers. This, however, does not disregard the environmental and societal impact linked to community and ECD ecosystem players that contributed (directly or indirectly) to the ECD services offered within the targeted communities.

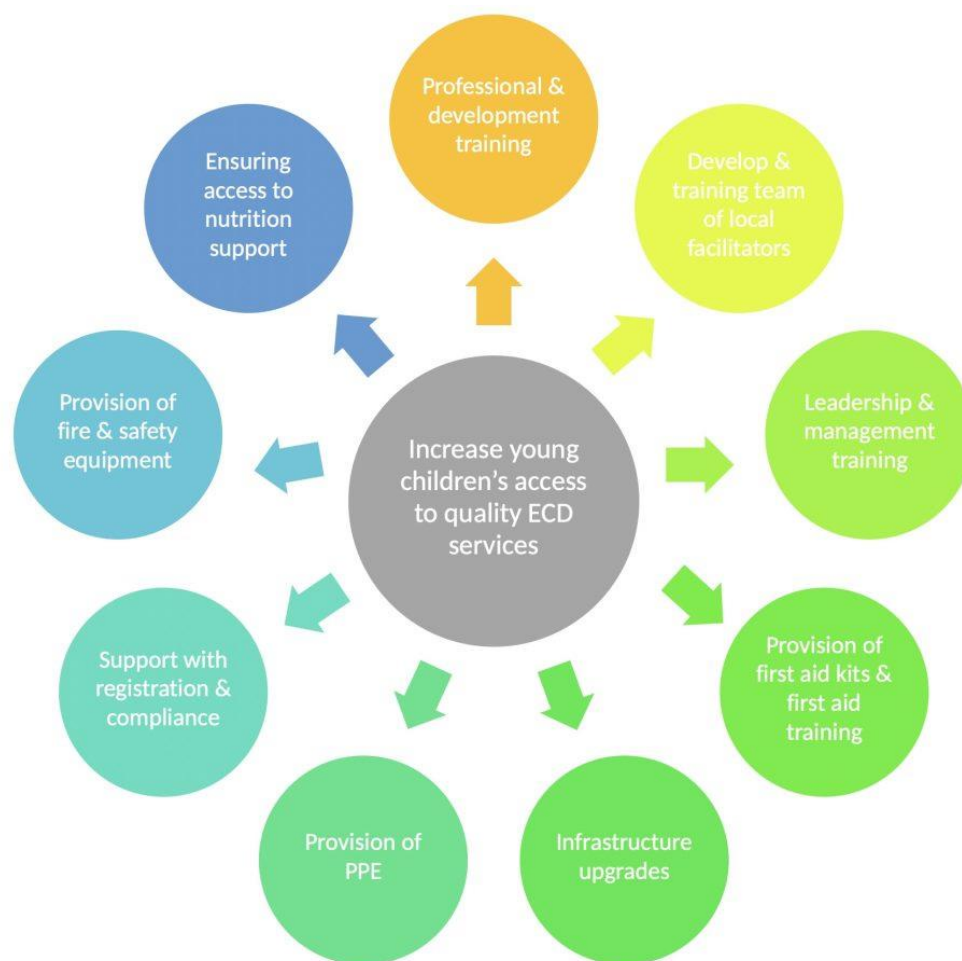


Figure 1 ECD Pillars for the Trust (Courtesy of KWFCDT)

1.4. Strategic Collaborative Partnership Approach

1.4.1. The Trust

The Trust through its investment of R20 mil financial injection fosters and supports the nine pillars of the ECD project as highlighted in Figure 1 above. These not only meet the educational development of children within the Kouga Municipality (KLM) but also ensure that the social needs of children within this community are met. To achieve these the Trust also entrusted the services of collaborative strategic partners in CECD, who sub-contracted Africa A Plus.

1.4.2. CECD

The CECD was responsible for some parts of the project components which included Leadership and management training, provision of first aid kits and first aid training, infrastructure upgrades (and building a partnership with Breadline Africa to increase this work), provision of PPE (relevant only to the project in 2020 not part of this evaluation process), support with registration and compliance, - provision of fire and safety equipment,

Ensuring access to nutrition support (done through organising a partnership with the Lunchbox Fund), and both CECD and A+ provide mentoring and support.

1.4.3. Africa A Plus

For this project, A+ was responsible for implementing and developing a training team of local facilitators as well as professional and development training. A+ works to ensure the sustainable delivery of a quality early education through the facilitation of professional staff development and school leaders both on-site as well as developing community A+ trainers who will support the schools by nurturing creativity, problem-solving, critical thinking, collaboration, as focus on outcomes of South African curricula i.e., CAPS (2011) and the 0-4 years National Curriculum Framework (NCF-2015). Hence, this partnership strengthened not only capacity-building-related outcomes for the ECD staff, and partnership with Africa Plus (A+) but also incorporated creative ways.

The focus was on the NCF curriculum, creativity, working with loose parts, reflection, and planning for 2024. The engagement in creative pedagogical workshops enabled ECD centres to nurture the children's creativity. Workshop for Grade R focused on the play-based and informal assessment of children as well as dedicated planning file essential for and with Grade R CAPS curriculum documents, planning and assessment formsⁱⁱⁱ

Africa A+ enables:

- A **quality early education** that prepares today's children to be tomorrow's citizens.
- The nurturing of **creativity, problem-solving, critical thinking, collaboration**, and an **entrepreneurial mindset**
- The practical **implementation** of ECD and Grade R **training**.



Figure 2: A+ focus areas (Courtesy of Africa Plus)

1.4.4. The Lunchbox Fund^{iv}

The Lunchbox Fund helps vulnerable and food-insecure children in South Africa get the education they desperately need to build a life free of poverty. The programme offers school meals high in protein and fortified with micronutrients to combat all aspects of malnutrition. Breakfast Programme includes nutritional fortified Maize Porridge in three delicious flavours: Vanilla, Wholewheat and Chocolate which is simply prepared using freshly boiled water. Lunch is a plant-based pastry of nutritionally fortified delicious foods that are familiar to the children. Ingredients are combined in a variety of ways to create a varied menu.



Figure 3: Strategic Partner: The Lunchbox Fund

1.5. The Scope

The purpose is to ensure that the R20mil budget invested in the ECD project meets the educational development of children and ensures that the social needs of children within the KLM community are met. The evaluation criteria for this project focused on 5 key specific areas: relevance, efficiency, effectiveness, sustainability, and impact. Hence, the main source of respondents were the key beneficiaries of the project (ECD founders and Principals) and stakeholders (households with ECD children). Key areas of focus were;

- a) Governance and management training
- b) Teacher training
- c) Mentoring and support
- d) Infrastructure upgrades
- e) Provision of education equipment
- f) Assistance with the process of registration

1.6. Objectives, of the evaluation

The objective of this evaluation looked at the following.

- Determine the effect of the facilitated Community ECD training by Africa+
- The impact of the ECD leadership, management, and educators training
- Oversight and support of ECD registration and compliance
- Management of Project Personnel
- Assess nutritional requirements and recommend suitable programmes
- Procurement of educational equipment and procurement/ development of learning materials
- Mentoring and support of all ECD key stakeholders
- Monitoring and evaluating project progress and implementation
- Oversight and managing ECD centre buildings and upgrades

1.8. Limitations

All 38 ECD centres were targeted but only 31 could be accessed as part of this report. Only 5 could not be reached due to the festive season shutdown.

The target of 50 households per area however, post-cleaning of data there were 190 to work with. The festive season meant seasonal/ casual work for caregivers. Sea vista had 20,

Kruisfontein and Kwanomzamo 30 each, Humansdorp and CBD and Gill Marcus/ Arcadia met target of 50 each.

1.9. Structure of the chapters

This report is structured in the following manner:

- Chapter 1: Introduces us to the report as it provides background, context, and the scope of this evaluation
- Chapter 2: Methodologies applied which includes multiple data collection, analysis, and triangulation.
- Chapter 3: Presents the main results of the evaluation, integrating the findings from various data collection techniques used
- Chapter 4: Summary of results and aligns them to the evaluation objectives
- Chapter 5: Sets out the main recommendations emanating from this evaluation.

Chapter 2

Evaluation Methodology Applied

2.1. Chapter Overview

The methodology followed in this evaluation can be briefly described according to:

- a) The theory of change that was adopted.
- b) Guiding Frames
- c) Data collection and data analysis approaches followed.

2..2. Theory of Change (ToC)

The theory of change refers to mini-steps that lead to the long-term goal and the connections between program activities and outcomes^v. Thus, mapping out what change is desired (result or outcome), and what needs to be done (activities, interventions) to bring about this change.

Our understanding of the Theory of Change for the ECD project is to ensure that children within KLM who are of ECD stages (birth till seven) are stimulated socially, cognitively, emotionally, and physically. Besides this being part of protecting the rights of children^{vi} the desired change is to develop their full potential. The KWFCDT supported multiple interventions as well as collaborated with strategic partners, that enabled the achievement of this outcome.

The complex dynamic factors in the early developmental stages of children such as the socio-economic status of the household, social ills affecting the community, poverty, and parenting status (singlehood, minimal household income, intergenerational household etc) cannot be ignored.

We believe that ECD services are never offered in a vacuum, but externalities can be crucial factors that indirectly influence and affect this program due to; a) cultural or social norms about child-rearing and education. b) Economic conditions affecting parents' ability to support early learning. c) Government policies related to child development and education.

This ToC is based on the consultancy team's understanding of how the work has been done. However, it is acknowledged that there is an existing ToC that guides the collaborative work of the project.

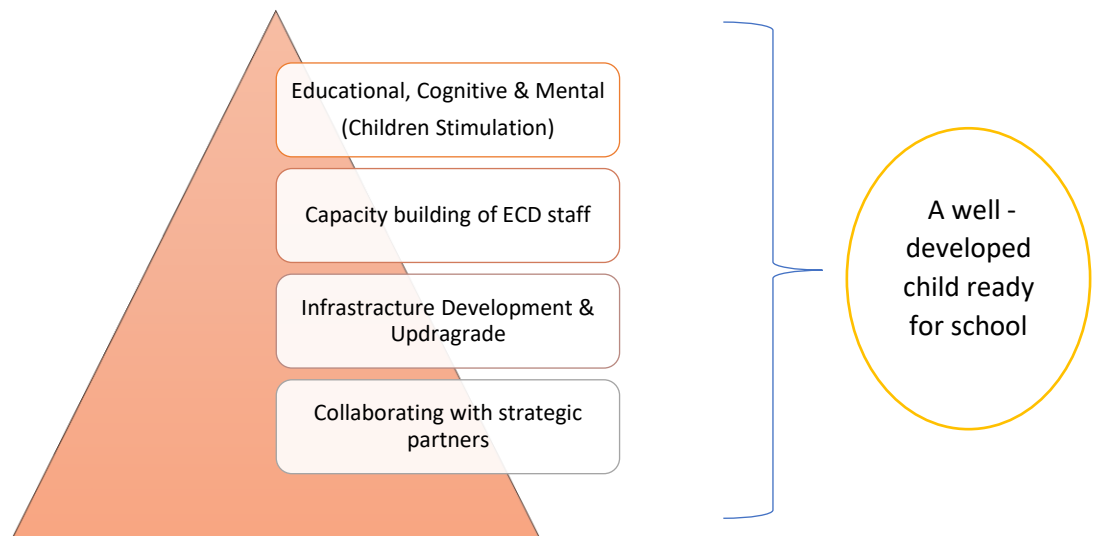


Figure 4: Theory of Change as understood by the consultant

The consultancy believes that the goal is to stimulate and improve cognitive, emotional, social, and physical development, leading to better school readiness. To achieve these KWFCDT invested in funds that support the development of ECD centres, and educators so they can enable the bio-cognitive-psych -social and intellectual development of children below the ages of 7 years. Due to the contribution of guardians and/or parents as caregivers at this developmental stage, it is essential to include these partners as they contribute to achieving the desired change. We acknowledge that intermediate and short-term outcomes have been essential stepping stones that enable the achievement of the goal.

With the established and establishment of community-based ECD centres training was required for intervention where ECD educators can facilitate and implement child-centred programmes as teaching methodologies. This requires the right material resources that stimulate key developmental areas (physical growth, cognition & social, reading & writing, health & nutrition) and the monitoring with parental/ guardian support for child development. To achieve these diverse activities at multi-levels that engage micro, meso and macro players within the ECD ecosystem. These are community, organisation, educator, and household levels

The investment done by KWFCDT enhanced opportunities for establishing and running thriving ECD centres with built capacities for ECD educators to become not only quality educators but also child development specialists within the local communities. The capacity building was done via an ECD specialist service provider. We also assume that; a) The community spaces where the ECD centre functions are governed by community leaders and parents recognize the value of ECD. b) Trained ECD educators will implement learned methodologies. c) Parents and caregivers have the time and resources to participate in workshops and support child development at home. d) Sustained funding and resources are available.

From the theory of change, we can conclude that the ECD service outcome is to have a well-developed child. To achieve this, stimulation that improves cognitive, emotional, social, and physical development, for better school readiness is required.

2.3. Guiding Frame

The targeted communities were grouped by the team to ensure that the homogenous and heterogeneity of the areas were also captured. The grouping was done as follows: areas of Sea Vista, Oyster Bay and St Francis Bay (group 1), KwaNomzamo and Umzamowethu (group 2), Gill Marcus and Arcadia (group 3), Kruisfontein and Vaaldam (group 4), and Humansdorp (group 5). From these areas KWFCDT identified 38 ECD centres (as listed in spreadsheet Appendix B) however, work directly with 33 ECD centres, making our baseline to be 33 ECD. Targeted communities are within areas that are fluent in Afrikaans and isiXhosa thus interviews, focus group discussions and instruments are used in these languages to converse and ensure participants are comfortable in self-expression.

Based on the above-mentioned interventions the consultancy developed a guiding framework for this evaluation project is considered. The proposed framework indicates how this report should be read. To gain a better understanding the consultancy has developed a model to understand how the project has been implemented.

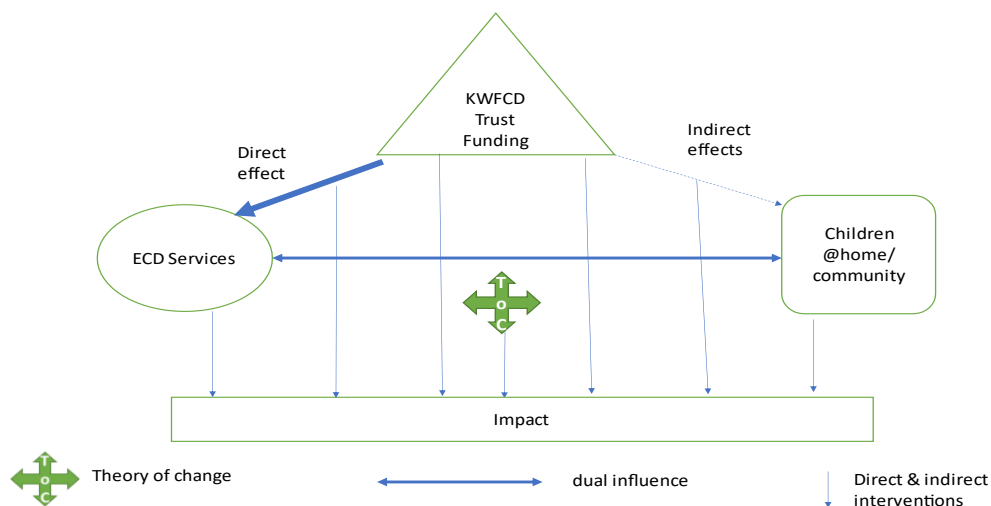


Figure 5: Proposed consultancy framework

We acknowledge that the R20 Million funding (R20 million budgeted with R10 million already spent) from the Kouga Wind Farm Trust has been the catalyst that triggered interventions as these funds were spent directly on the improvement of ECD services to the 38 centres that are rendering services to children within the 0-6 years. The diversity of ECD services benefits children living within the community as well and centres tend to integrate societal needs where parents or caregivers cannot provide meals for the children the ECD partners with Lunchbox to provide nutritious meals.

As highlighted earlier in our Theory of Change (ToC) the contributions made by the externalities as crucial factors that directly and indirectly influence the effect of the ecosystem on this program are acknowledged. Due to these elements, the reading of this report addresses the direct and indirect effects at the ECD level and the community level via household findings. To determine impact which is the lower level of all the diverse interventions is presented and data has been triangulated.

2.4 Childhood development stages (cognitive, social, and emotional)

Cognitive development indicates how children think, explore and figure things out. Development of knowledge, skills, problem-solving and dispositions, which help children to think about and understand the world around them. It is mostly aligned with Piaget's cognitive theory and its 4 stages: a) Sensorimotor stage (0–2 years old) b) Preoperational stage (2–7 years old) c) Concrete operational stage (7–11 years old) and d) Formal operational stage (11 years old through adulthood).

There is a strong connection between the development a child undergoes early in life and the level of success that the child will experience later in life. For example, infants who are better at distinguishing the building blocks of speech at 6 months are better at other more complex language skills at 2 and 3 years of age and better at acquiring the skills for learning to read at 4 and 5 years of age. When young children are provided with an environment rich in language and literacy interactions and full of opportunities to listen to and use language constantly, they can begin to acquire the essential building blocks for learning how to read. Family, early learning centres, caregivers and ECD services can enhance the stimulation of this cognitive developmental process^{vii}. A child who enters school without these skills runs a significant risk of starting behind and staying behind.

The importance of social-emotional development in early childhood education is gaining recognition. Children who develop strong social-emotional skills are more likely to succeed academically and have better long-term outcomes. Thus, a growing emphasis on fostering social-emotional skills, such as empathy, self-regulation, and problem-solving, in early education settings. Emotionally healthy children are better able to establish and maintain positive relationships with adults and peers (Trawick-Smith, 2014^{viii}). For healthy social-emotional development, children require stimulation, engaged play, positive feedback, and shared experiences. Events led by children during the facilitated learning gain a better understanding of learners' interest in teachers and care caregivers to plan meaningful opportunities throughout the day that help children practice and learn social skills.^{ix}

Social-Emotional Developmental Milestones in Preschool

Age 3	Age 4	Age 5
Plays make-believe with dolls, animals, and people Copies of adults and friends Notices other children and joins them in play Shows affection for friends without prompting Shows concern for crying friend Shows a wide range of emotions	Interested in new experiences Pretends to be something else during play (teacher, dog, superhero) Make-believe play is more creative and complex Dresses and undresses self Would rather play with other children than alone Can name two or more friends	Wants to please friends Wants to be like friends Follows rules when playing games with others Takes turns when playing games with other children Likes to sing, dance, and act Is aware of gender Can tell what is real and what's make-believe Shows more independence Does simple chores at home

Calms down within 10 minutes after you leave May get upset with major changes in routine	Comforts others who are hurt or sad Cooperates with other children Often cannot tell what is real and what's make-believe Talks about what they like and what they are interested in Likes to be a "helper" Changes behaviour based on where they are Avoids danger, like not jumping from tall heights on the playground	Can tell you their first and last name and age
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Figure 6: Developmental milestones courtesy of Centers for Disease Control and Prevention (2021). Developmental milestones. https://www.cdc.gov/ncbddd/actearly/pdf/FULL-LIST-CDC_LTSAE-Checklists2021_Eng_FNL2_508.pdf

2.5. Societal challenges on early childhood and interventions

Monetary poverty is closely connected to poor health and well-being, as well as to limited access to education, nutrition, healthcare services and safe environments^x. There is an acknowledgement that children living in poverty are extremely vulnerable, discriminated against and isolated thus, enhancing their livelihood requires (Atmore et al. 2012) intentional interventions. Basic infrastructure, such as running water, access to electricity or suitable sanitation were identified as far back in 2012 (Atmore et al.) and are relevant now as they were then in registered and unregistered community-based ECD facilities. Poor infrastructure at ECD facilities presents significant health and safety risks to children attending these facilities but can also point to poor quality ECD service provisioning. However, the opposite is so significant as the outcome means good infrastructure provides safety and points out good quality ECD services received.

2.6. Key drivers of early childhood development

Nutrition as one of the key interventions that ECD services offer is based on the acknowledgement that hunger, malnutrition, and food insecurity are threats facing children in communities. Hence intervention programmes incorporated mitigating this challenge. Studies by Atmore et al. (2012) show the consequences of malnutrition on children such as damage to the brain, impaired motor development, cause significant developmental retardation, affect cognitive development, impair exploratory behaviour, impaired learning abilities and educational achievement, and can have long-lasting impacts on their health (Duggan, Watkins & Walker, 2008; Victora *et al.*, 2008 as cited in Atmore, et al., 2012). However, in learning, the child's ability to concentrate, focus attention, and perform complex tasks gets affected (Wildeman & Mbebetho, 2005 as cited in Atmore et al. 2012). Malnourished children are

usually behind in learning readiness as they fail to thrive or achieve their full potential (McNeil & Donald, 2006 as cited in Atmore et al. 2012).

Quality ECD education and educator training have been acknowledged as key qualification training recognised. This includes ECD (Level 4) qualification as the entry-level qualification for ECD practitioners as it provides 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). It should further be noted that a qualification cannot offer quality ECD services, practitioners develop mastery only after being trained. The ECD level 5) qualifications are intended to provide higher education to experienced ECD teachers and most principals are opting to have this level of qualification.

2.7. Our Data Collection & Data Analysis Approach

A mixed method approach was used where qualitative helped provide a holistic understanding of the ECD project whilst quantitative data offered complementary measurable outcomes. The qualitative data provides context, depth, and understanding of experiences. The **Key Informant Interviews (KII)** mostly were with principals of ECD and or founders of the ECD as they captured quantitative measures of progress and qualitative insights of experiences and perceptions. However, measure beyond knowledge, attitudes, and practices related to ECD was triangulated with **Household Surveys** directed at parents, and caregivers to enable us to highlight not only developmental changes due to ECD interventions but also the ECD's relevance, effectiveness, efficiency, and impact in the community based on its ECD services.

Focus Group Discussions (FGDs) were limited to principals, staff, and founders of the ECD. However, the diversity of the participants highlighted diverse perspectives on the ECD program's impact and effectiveness. No other stakeholder groups such as board members participated in the FGD.

Site visits were done as part of **in-depth interviews and structured observations** where we observed ECD centres to measure the quality of education, infrastructure, registrations, and educational initiatives. For in-depth one-on-one **Interviews** conducted with ECD principals/educators, and caregivers to understand their perceptions, experiences, and challenges. The Structures observation included walk about at each visited centre to observe and determine the infrastructure at which ECD services are offered. However, these walkabouts helped us not only with direct observations for our informed and unstructured observations of ECD centres, homes, and communities but also to understand the program's real-world impact and dynamics.

The ECD population was all 38 from there 31 were individually visited. One (1) has closed (no longer operational), and one (1) serves as an aftercare targeting school-going children (outside the ECD age group). Five (5) could not be visited as they were already closed for the festive season. For the latter, a virtual follow-up was done for an online survey.

At **households**, we opted for cluster sampling with stratification due to our specific targeted communities. We targeted households with children (ren) of 0-6 years as they might have used or are using ECD services (household of interest). A minimum of 50 households was identified and selected from each of the core areas KwaNomzamo, Kruisfontein, Sea Vista, and Umzamowethu from Oyster Bay. The incomplete data during the cleaning up of data meant from the 250 households surveyed only 190 household surveys could be used to work on. Sea vista had 20, and Kruisfontein and Kwanomzamo each collected 30 (i.e., 60 combined). Humansdorp CBD area and Gill/ Arcadia met target of 50+ each. Linked to these are limitations experienced about achieving a minimum of 50 households per area.

Enumerators were selected from [Sakhe](#) Family Care Development Centre, the local milieu to capitalize on their contextual knowledge and linguistic proficiency. They have previously done similar work, and the researcher had the oversight of the data collection endeavour, to assure the quality and compliance with our established methodologies. One Data Manager was charged with orchestrating the data inflow, conducting quality verifications, and performing initial analyses. This structure optimized the coverage of the targeted demographic and enhanced the accuracy of data. The team of five (5) enumerators, collaborated seamlessly, as each focused on the area and was conscious of the ECD centres serving the community. Enumerators focused on household surveys as we opted for due to our specific targeted communities (our core areas) of KwaNomzamo, Kruisfontein, Sea Vista, and Umzamowethu from Oyster Bay.

The above-mentioned data collection strategies were complemented by a multi-methodology that incorporates these for direct impact (specific to children or families) to capture in-depth insights into the transformation brought about by the ECD project. Document Review enabled us to understand project design, intended outcomes, and progress as we analysed project documents and reports. The interconnection of our multiple data sources, sampling, and indicators to support the evaluation questions have been elaborated in our Evaluation Question Matrix (EQM) as Appendix 2.

Triangulation helped to analyse multiple data including surveys, interviews and FGD to identify patterns, and themes, validate findings, refine data collection methods, and maintain alignment with the project's ToC.

Chapter 3

Results and Findings

3.1. Introduction

This section presents results based on the main goals and objectives that respond to issues around governing boards, training for teachers, leadership and management, mentorship and support, infrastructure upgrades, the provision of educational equipment and assistance with the process of registration. In this section, we have separated the results from the ECD to the household survey. This helps to show impact at different levels through both direct and indirect interventions.

3.2. Results on the ECD

The results are based on those who individually visited ECD centres. Categories of staff complement indicated the following: teacher(s), principal/ founder, caregiver/ cook/ assistant. They were complemented by volunteers, interns, and student teachers to fulfil this role. The participants were from the different wards within the Sarah Baartman.

On governance

On governance participants indicated a diversity in terms of governing body. All private centres did not have boards. Those who had boards highlighted the inconsistent participation of board members and how these required more time from their side to actively manage the process. Hence, the active participation of the governing board was the weakness in terms of managing the ECD governance.

On training for teachers as part of staff capacity development

In terms of participating in activities that build ECD staff capacity it could be stated that both teachers and principals participated mainly in the A+ capacity-building workshops at times, this included all employees of the ECD which include both caregivers and caretakers as indicated in Figure 7 below

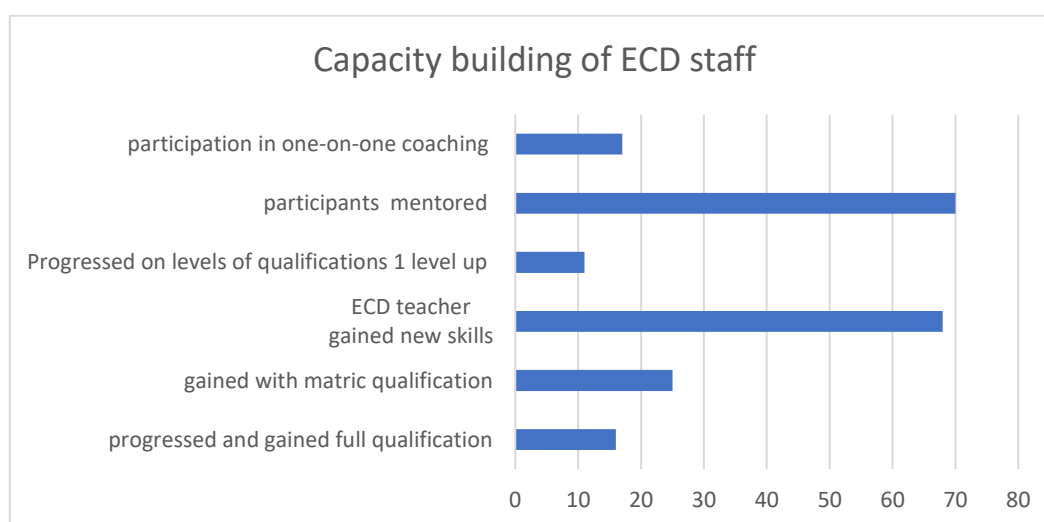


Figure 7: Capacity building activities

Beyond the participation in the A+ workshops it could be stated that others opted for personal development to complement the existing workshops which included PlaySA, Systems-based improvement approach, Play-based approach, and ETC training.

Based on capacity to provide ECD services it could be stated that a minimum of 2 paid staff with a maximum of 8 with several registered learners per centre ranging from 12 (the smallest school) to 100. The number of available qualified teachers per learner is one teacher per 13 learners on average, making it easier for learners to receive quality time. With a staff-learner ratio of about 1:13 the quality of attention to meet the needs of children is significant especially when relevant quality services are provided. Hence, diverse services provided must be linked to the category of learner's developmental stage needs (age appropriate).

- a) baby care; 0-12 months
- b) tiny toddler 12 - 24 months and 2-3years
- c) Grade R 3-4 years
- d) Grade RR 4-5 years
- e) Grade R 5-6 years. However, not all ECDs visited offer this service due to the CAPS assessment requirement for Grade 1 school readiness

Qualifications of educators highlighted that there are three key qualifications that teachers, principals, and staff had to complete. Level 3: most have this level already achieved as the foundational teaching level for ECD qualification. The others are Level 4 and Level 5 where very few have managed to achieve level 5. The challenge with regards to educational progression amongst staff is twofold insufficient access to bursary scheme for current ECD staff as the age limitation is the main issue. Secondly pursuing self-develop is always hampered by the limited incentives that ECD remunerate.

On health care, nutrition, and safety of children

The focus looked at three key areas the health care where discussions explored the First Aid training for staff, the availability of the kit at each centre and its location (health and safety issues which are dealt with later). This was followed by the access to clean water and sanitation. Finally, we explored the availability of veggie gardens at the centres. Results indicated that 89% of ECD centres have at least one (1) staff member who has been through the First Aid training as indicated in Figure 8 below. It was also highlighted that those trained in first aid have also trained other staff members to enhance the capacity of servicing children during an emergency. From the 11% that do have anyone with first aid training, they highlighted the effective use of clinics to support them in cases of emergencies. However, all participants highlighted that they have been administering and monitoring children where medication brought by family as prescribed and stipulated according to the doctor/clinic.

Did your ECD participated in First Aid training

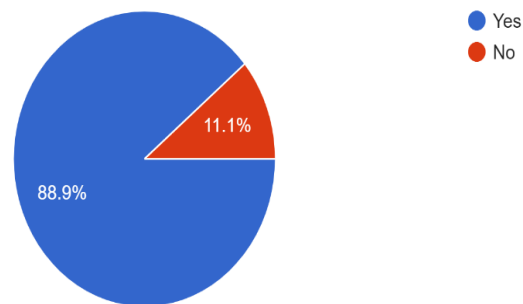


Figure 8: ECD centre with staff with and without 1st Aid training

Result regarding centres with access to clean water (including, taps, water tanks, and boreholes) 74% confirmed the access especially from the municipality as seen in Figure 9 below. However, some highlighted that they buy the drinking water as the municipal water is not always of good quality.

Does the ECD have access to clean water

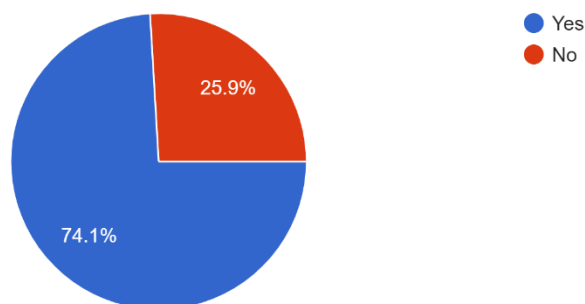


Figure 9: ECD access to clean drinking water

We further explored not just water but the sanitation for the learners at the centre where 70% (4% less than those who have water access) indicated that these is not accessible (see figure 10 below). This was linked to the absence of ablution systems especially for the informal settlement (Kwanomzamo and Sea Vista).

Does the ECD have basic healthy clean water for sanitation

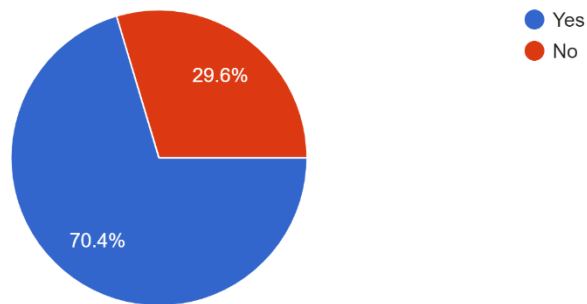


Figure 10: ECD with water for sanitation

Although water and sanitation are key aspects of healthy development access to fresh fruit and veggies are also contributors to healthy nutrition. We explored the availability of veggie gardens at the centres as this was a low-hanging fruit to teach children about the environment, health, and nutrition. Only 15% indicated the presence of a veggie garden as highlighted in Figure 11 below. Reasons such as the absence of land, space, or absence of someone to help start the vegetable garden, were highlighted. Most available space centres earmarked those available spaces to be used for outdoor play activities.

Does the ECD have access to a veggie garden

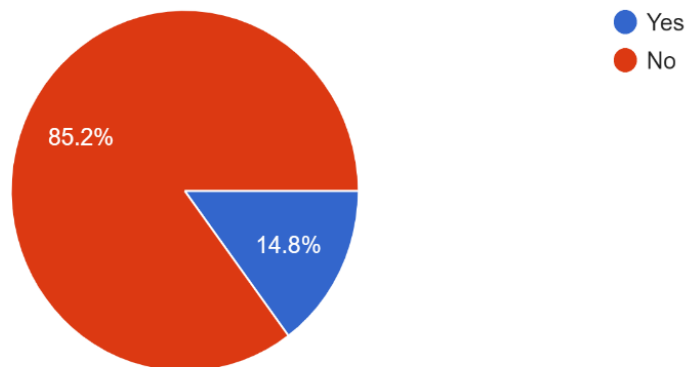
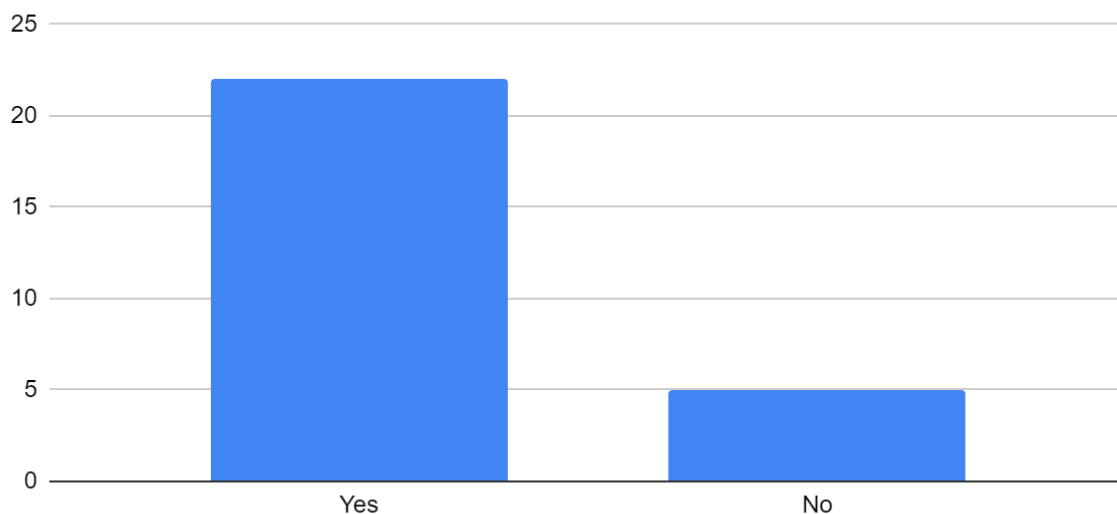


Figure 11: Presence of veggie gardens at ECD centre

On health and safety

With regards to health and safety, we explored the availability of monitoring fire and or fire hazards with the presence of fire extinguishers at each centre. Linked to this was the status in terms of annual servicing of the apparatus. Figure 12 below indicates that only 5 participants did not have fire extinguishers.

Count of Does the ECD have fire extinguishers and a full first aid kits



Count of Does the ECD have fire extinguishers and a full first aid kits

Figure 12: Availability of fire extinguisher

For those where these were present, they were all wall-mounted and securely placed away from potential use/abuse by the children. However, not all could confirm the up-to-date service status. Further, it was indicated that at least one person in a centre has been trained on the use of the fire extinguisher. However, fire drills are not a consistent activity done with the children.

With regards to the storage of potentially harmful substances and the monitoring of potential risks that could be harmful to children, all indicated lockup facilities as the option. This includes a lock-up storage facility, a lock-up cupboard, a locked room (principal office) special/ separate room within the home (not accessed by children). Yet the option of placing such risky substances higher up in the office or teaching room where children could not reach.

The regular replenishing of first aid kits is not a consistent process thus emergencies are dealt with ad-hoc as some centres indicated that they have never been faced with an emergency except for minor cuts and bruises.

Leadership and Management

The centres were managed by the principal at times these were also the founder. For some, the principal/ founder was also teaching. This dual-triple role works well in smaller schools as compared to bigger schools (more than 20 learners). However, managing a class (category group) has been another option. Only one had a principal who was not involved with teaching but was a cook/ caretaker and was previously the chairperson. The leadership contribution was mainly on ensuring the administrative role, smooth running of the school (not day-to-day), managing parents/ caregivers as key stakeholders as well as marketing the ECD for the recruitment of new learners were some of the key responsibilities. The A+ programme was very strong on leadership development for principals as it helped improve the management of systems and people

Resourced centres

With regards to cognitive, social, and emotional stimulation the ECD was asked with regards to the availability of resources for play indoors and outdoors and, learning through reading books, playing with puzzles etc. Figure 13 indicates the striking balance between the art material for play and learning where 57% indicated the absence of such when compared with 44% that indicated presence.

Does ECD centres have sufficient art for play and education material

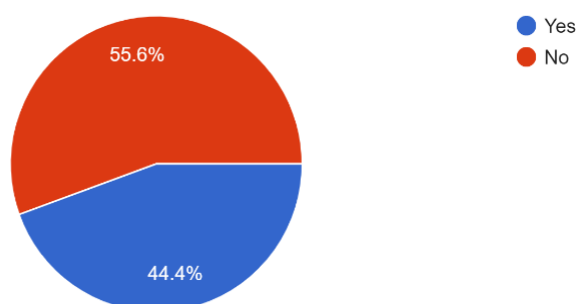


Figure 13: Availability of art play and educational material

However, with regards to books/reading materials, a different picture gets painted where 61% indicated having sufficient as seen in Figure 14 below. It should be stated that emphasis was on sufficient as most indicated that they have insufficient books for all children. This means that 40% stated that they stimulate children cognitively by reading a book for the big group instead of having all children individually access books at once. It was also indicated that even though there are sufficient books (61%) they acknowledge that some are old, outdated, and have pages missing. However, the relevance for children to identify with was also highlighted.

Does ECD centres have sufficient books for all children

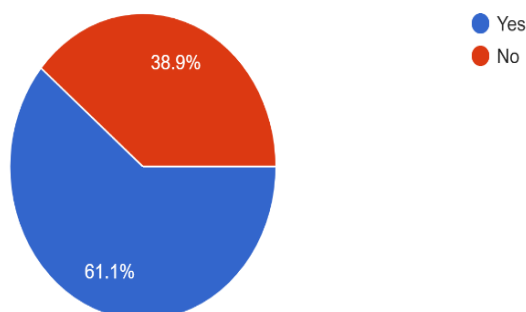


Figure 14: ECD with sufficient books

In terms of blocks and puzzles 78% of centres indicated to have sufficient even though these needed constants replenish annually and at times throughout the year.

Does ECD centres have sufficient, blocks and puzzles

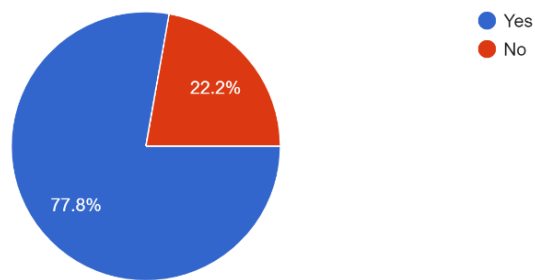


Figure 15: sufficient blocks and puzzles

Books and puzzles were above a 60% threshold whilst art play material was still below the 50% threshold

On gaining new skills and or new qualifications

Participants responded in terms of the qualifications and skills gained during the period the CED was supported by the Trust. The following results are shown,

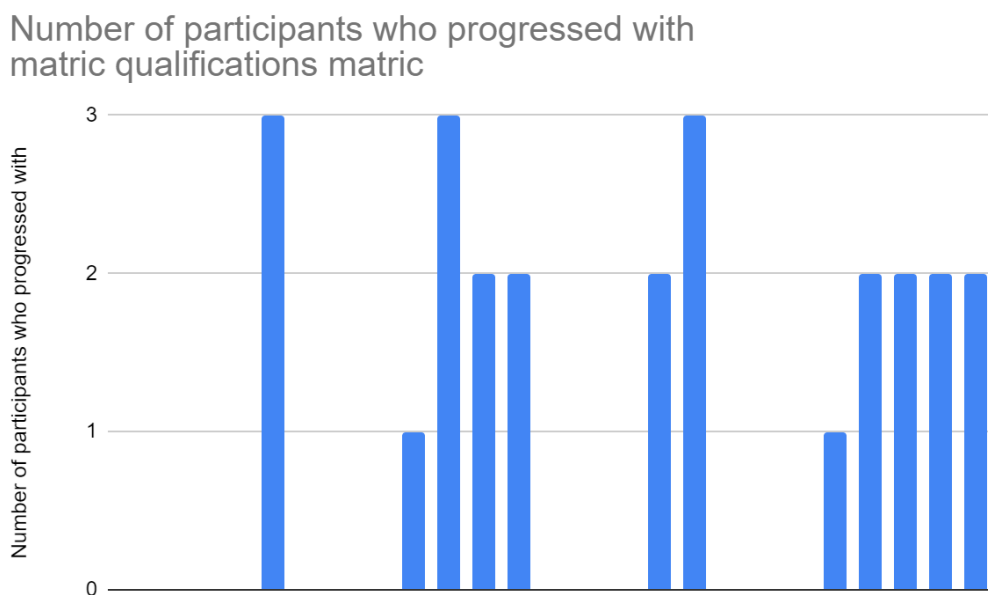


Figure 16: ECD staff with a matric qualification

From the participating ECD, 25 were highlighted to have matric qualifications. However, the specification of the time when the qualification was received was not explored as the level of teacher education was the key (as seen in Figure 16 above).

Number of participants in the ECD teacher training
(# gained new skills)

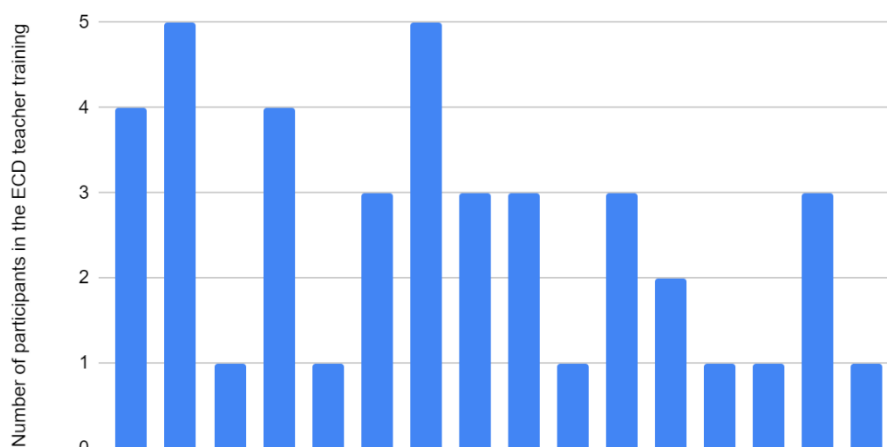


Figure 17: Number of teachers and principals per ECD that gained new skills

With regards to the number of teachers that gained a new skill, the responses were higher as caregivers were included here as the responses were not limited to the teachers only thus resulting in 41 having gained new skills (as seen in Figure 17 above)

On Coaching and Mentoring received

The services of A+ through both workshops and training were viewed not only as a capacity-building platform but as an engagement for coaching and mentoring on one-to-one and group levels. Only 11% indicated no mentoring services received

ECD that participated in one-on-one coaching

Count of Did your ECD participate in the one-on-one coaching

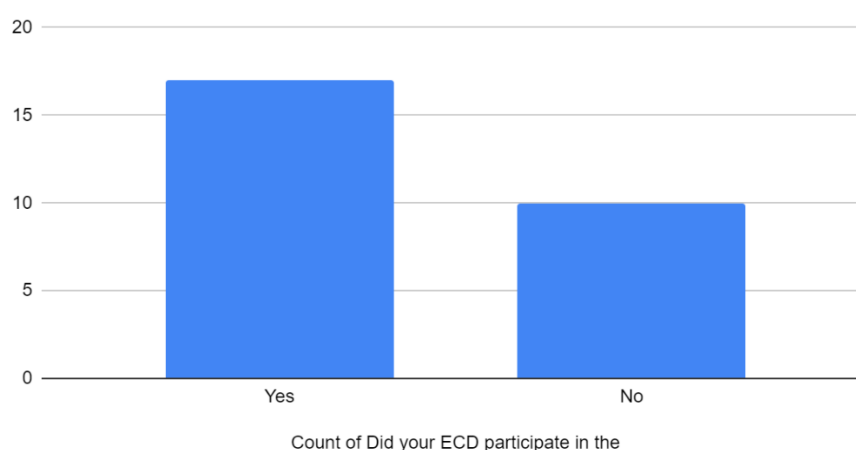


Figure 18: Participants in 1-on-1 coaching

More ECD centres participated in the one-on-one coaching as compared to those that did not (as seen in Figure 18 above). However, the opposite could be stated when looking at key

ECD stakeholders (e.g., governing body) where only 5 indicated yes as indicated in Figure 19 below.

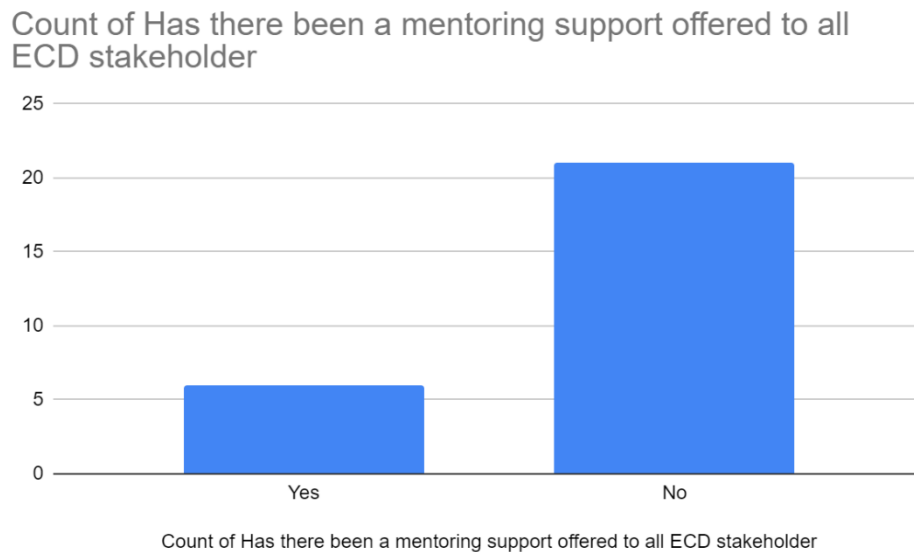
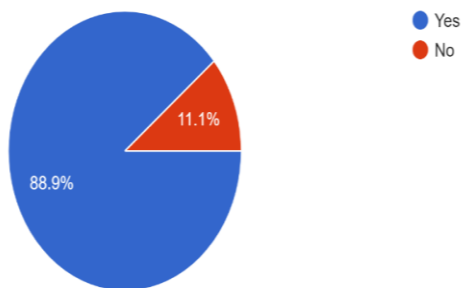


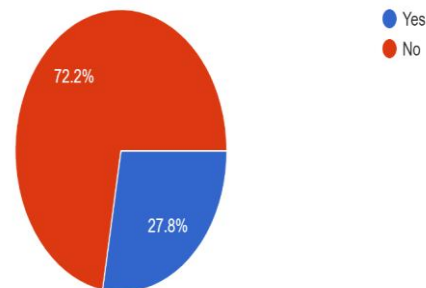
Figure 19: Mentorship offered to stakeholders

When it comes to group mentorship and workshops when compared to individually being directly supported and mentored there is a reverse in percentages as seen in figures 20a and 20b below.



% of ECD participated in workshop & mentorship

Figure 20a: % participated



% of supported & mentored ECD

Figure 20b: % supported

‘The leadership mentorship training done by A+ helped us in diverse areas especially in managing our staff as well as dealing with staff issues as principals. Specific administrative support gave us confidence in the way we keep our files and administer our centres ‘.

Some of the principals were also A+ facilitators who were supporting the diverse ECD Centres.

■ Numbers of staff actively improved in program implementation or are doing things differently due a mentorship
■ Number of participants in the ECD teacher training



From the confirmed, we followed up with the type of activities that they have improved on and these can be summarised using word cloud as shown in Figure 22 below. Word Clouds help reveal what the participating audience thinks, gain an understanding of respondents' feelings about a topic/situation, and summarise their view of a topic.



Diverse staff members benefited from the mentorship and coaching programs as this was not limited to teachers. Instead, givers, principals and teachers also participated. However, this opportunity was never open to other stakeholders such as governing boards. The mentorship and coaching programme enhanced essential skills and knowledge such as filing, daily planning, making effective use of limited resources as well as working with spaces/ corners. The key was allowing children to dream and be creative with the time and theme of the day. For some, the use of paper, pen and pencil became a new programme that enabled learners to reimagine and be creative as well as school readiness. Some of the mentorships enabled participants to deal with career-related personal growth. For instance.

The support from my mentors Thembisa & Petra helped me deal with some of the challenges I have been battling as a principal. Hence, I ensured that my staff participated. The impact of A+ support to a centre from an impoverished community brought creativity to my team and the work they do [Marche Hitchson from Sonstraal Rainbow Daycare]

I struggled as a principal as I joined the centre later where everyone was also part of. However, the mentoring process helped me to deal with staff issues. Now we have regular staff meetings where I can communicate, plan, and know how to deal with staff-related issues better, a reflection my A+ mentor encouraged. I have about three (3) -on one coach outside the ECD services for different aspects of personal, growth, and career [Ntombomzi Ndamase from Masikhule Preschool]

Mentoring and coaching helped me to do my admin filing [Nomgqibelo Principal of Lelethu Daycare]

Ms Roode was mentored and coached with program and daily planning [Elton Dart from Eagles Accolade Academy]

We were mentored on play-based training as this was included in the centre. Tembisa coached us on a one-on-one basis on how to implement it well [Nadine Pienaar from Grace Kids]

All staff participated in the mentoring sessions that focused on developing a creative mindset. This in-house mentoring enabled us to be open-minded about different ways of doing things. However, no one-to-one coaching sessions were received, but open to having someone [Heidi Moss- Kokewiet Learning Centre]

Some highlighted minimal or no services in terms of mentoring and coaching

We only attended the A+ Workshop as part of our mentoring sessions, we also know that Thembi from A+ was also a coach but we never received such services [Kunjulwa from Simanye Daycare]

No mentoring and no coaching received [Phumla -Suyaphuhla Day care]

On infrastructure upgrades,

We asked participants about ECD upgrades that have been supported by the Trust. The response indicated that 63 % of ECD have been through some form of upgrades done by the Trust as shown in Figure 23 below. This was as small as branding (signage and painting) to building a classroom/school / renovating a small shack to be a double-store hybrid facility that functions as a home and ECD facility in an informal area. Those who indicated not having received any upgrades include those on the list to receive upgrades and those new who have

recently joined to be beneficiaries of the Trust thus nothing has been done yet as they are still at the beginning phase.

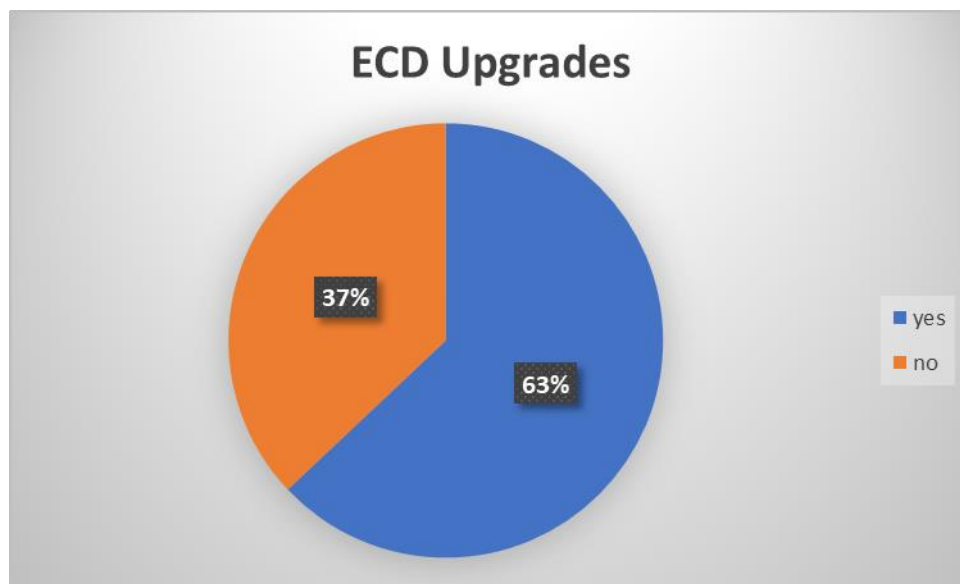


Figure 23: ECD upgrades

It highlighted that the infrastructure upgrades contributed to the visibility of the ECD centre and how they were viewed by the community, through equipment (indoor & outdoor), visible branding, and *‘infrastructure we could not afford such as burglar bars for safety of us and children’*.

On provision of educational equipment

Regarding the educational equipment, we focused on both indoor and outdoor equipment for play and stimulating educational activities. Three key questions were asked, two explored procurement and the third focused on the creation and development of learning material by the educators. *“We have sufficient resources especially our simulation tools are some of the best”*

The results revealed that in terms of procurement figure 24 below shows us that there has been an upward trajectory when it comes to the availability of educational material as indicated by the blue line even though the procuring of equipment was not that high.

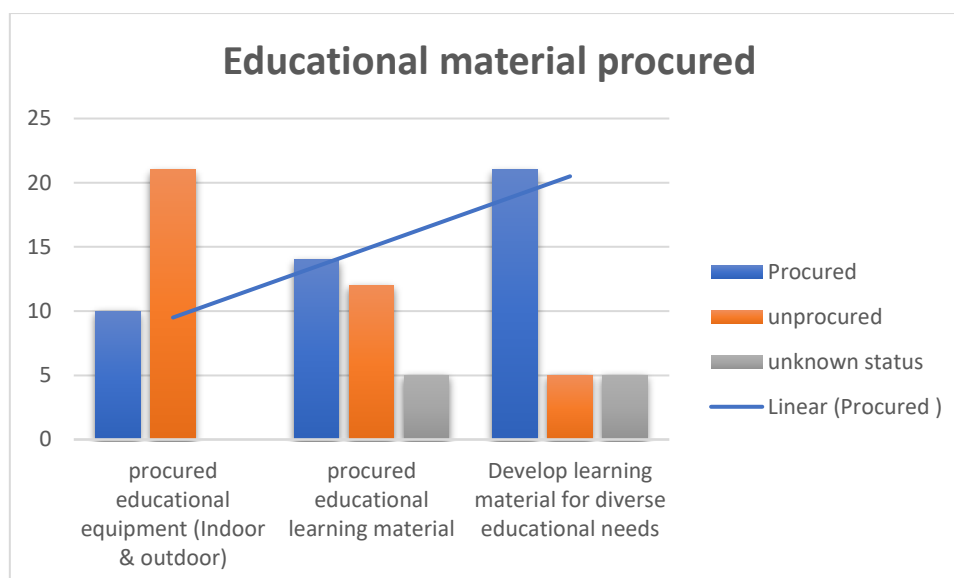


Figure 24: Procurement of educational material and its trend

However, those not procuring any educational equipment including educational material have shown a downward trajectory even in terms of making their material

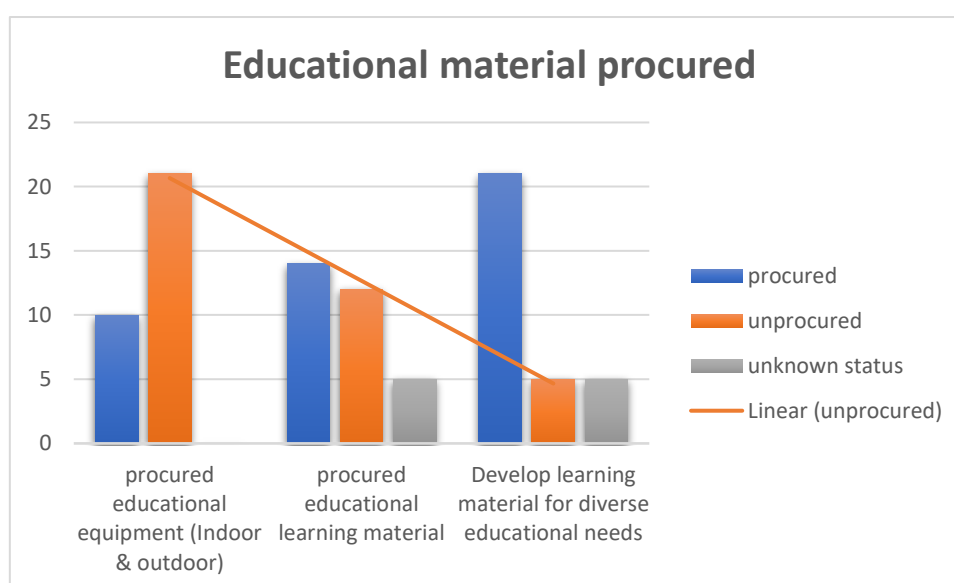


Figure 25: Non- procurement and its trend

The upward and downstream trajectories in Figures 22, & 23 seem to show the procurement level. Hence, when centres do not procure (upward trajectory), they develop their material (e.g. recycling) meaning low procurement is linked to highly developed materials. The opposite can be said about centres that highly procure (downward trajectory) educational material as they are low in developing their material.

When this is compared with the sufficiency of educational material which is inclusive of books, puzzles, art for play material and numeracy and literacy material we noted that the sufficiency rate is higher when compared with the insufficiency rate as indicated in Figure 26 below.

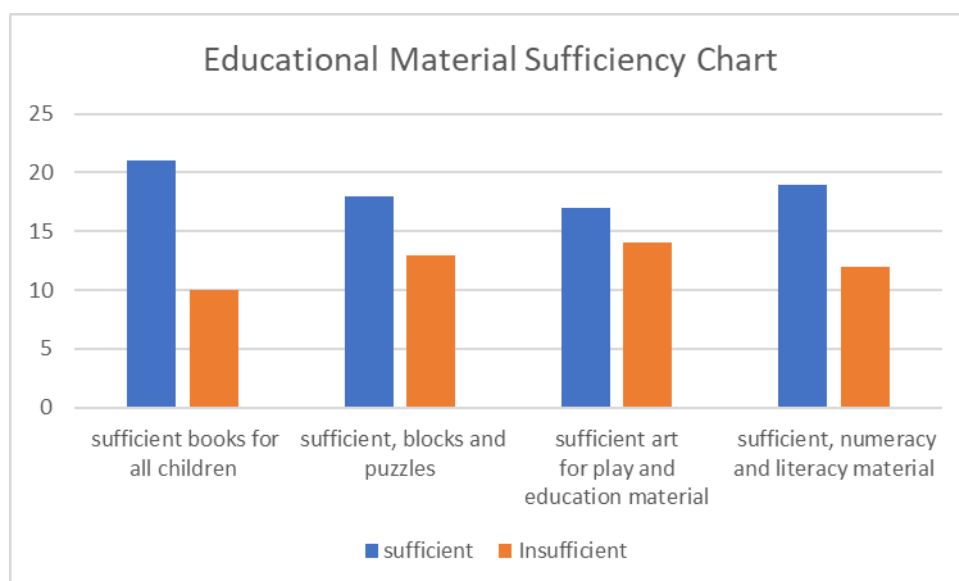


Figure 26: Educational material sufficiency rate

On assistance with the registration to determine a 100% compliant. Results indicated that the centres' registration status is either fully registered, partially registered or working on the registration process (recently applied- all relevant documents submitted). Results referred to some form of registration which includes NPO registration with the DoSD and or registered with CIPC as for Profit entity, others registered with the DBE as partial care, and others are transitioning from their registration from DoSD to DBE. Lastly, registration with the local municipality was also included. Others are registered as private but partial care registrations with outstanding, DBE registrations which is viewed as problematic. There are that viewed NPO and DBE registration as being completed yet local municipality zoning issues are complicating the process to register.

Siyaphuhla one of the new beneficiaries for the Trust indicated that they are not registered in any platform.

Different forms of registrations were indicated as the ECD were indicated to function as different entities. These included registration for non-profit organisations (NPO) with DSD and or CIPC as private entities, the Department of Basic Education (DBE) registration, and local municipality for zoning which for some were still outstanding. Some have recently applied to be registered and were awaiting an outcome from the company registration (CIPC). Only one indicated no form of registration whatsoever

On Community ECD training beyond the Africa+

Participants highlighted that for training and development, they participated in diverse training available and were not limited to what A+. Hence, they complemented what A+ was offering with other available self-development within the local community. Of the participants, only

one (1) indicated to have never participated in the A+ workshop. The rest indicated how the ECD including others (besides the Principal/founder) have also gained new skills and knowledge from participating in the workshop. One highlighted that she has been in the ECD as an educator for the past 22 years but the development from the A+ workshop has helped her to be up to date with recent trends. One stated that the workshop helped with systems improvements of the ECD which directly impacted her academic progression. One stated that they have completed the Playsa² course, (a play-to-learn approach), a free in-service Early Childhood Development training course that was developed in partnership with the Department of Basic Education, UNICEF, Cotlands and LEGO Foundation (cotlands.org.za). Only one (1) indicated that she did not participate in the A+ workshops.

On sustainability

ECD have different forms of financial sustainability where for some fees are the only means yet others are recipients of conditional grants from the department (DBE). Whilst grant-dependent households can pay minimal fees the inconsistency of the All Pay grant system has a direct effect on the parent's ability to pay fees consistently on time especially, since they are mainly grant-dependent.

Conditional grant payment from the department is not always paid on time as there are several delays which affect the deliverable of ECD activities such as buying food and paying salaries to staff. The self-funding approach at the ECD centres forces the centres to be vigilant in sourcing other sponsors, donors and or target new companies for their social responsibility fund.

However, the longevity of the ECD centres is based on the multi-model approach where a combination of ECD and aftercare. The services offered by the centre are highly attributed to the experience that families and children get linked with passion, patience, love, and care received (attitudes of the staff).

3.2.1. Other significant comments made

New opportunities that came due to the networking platforms that A+ training and being part of the Trust beneficiaries were highlighted

New Legos arrived as we were at the Centre after training on the use of the material

Upgrades done by Windfarm; the personal coaching helped with the filing system

More staff workshops focused on Admin training, More outside learning and developmental tools, the potential for a veggie garden, and not enough developmental learning equipment per child.

² playsa.org is a free in-service Early Childhood Development training course that was developed in partnership with Department of Basic Education, UNICEF, Cotlands and LEGO Foundation. The playsa.org online training course complements existing, and formal training and people enrolled on the course can earn 15 CPD credits as set out by the South African Council for Educators in terms of section 5(b) of the South African Council for Educators Act 31 of 2000.

Status updates were indicated by some of the ECD centres

Haasbakkies Day has Changed from an ECD to an AFTER-CARE centre for Primary school learners.

Specialise training for special needs children requires complementary services for relevance and effectiveness

This is a special needs school with ECD & ABET levels 1 & 2 due to low cognitive function levels with higher biological age. A need for relevant learning materials that are Xhosa and Afrikaans relevant for learners to identify with Sports alignment for the special needs children and curriculum implementation geared towards artisans a need for complementary support services (HR- speech therapist/ counsellors etc.)

Based on the **observation of visited sites** it could be stated that not all visited sites have upgraded infrastructure

There is no sanitation system a child us the grounds outside and there is only an adult bucket system no veggie gardens principal is offering care services that exclude ECD stimulation Daycare has no registration and no governing body

There is no child-friendly toilet but uses a potty The church facility use cannot be upgraded or converted for child-friendly / ECD relevant the teacher that participated in the A+ mentorship workshop could not indicate what has been applied to improve the services at the centre/ could be a case of training done, new skills gained but no resources to apply gained skills. The apathy of the staff was visible

Facilities faced with plumbing issues and not enough shelf storage space per classroom.

Another classroom is needed as 4 babies and 10 (3-5-year-old) s are educated and kept in the same class of 5m x 6m(estimation).

The Centre previously had an autistic child even though ramps are not there. Adult toilet supported with a chair. Revamp the ECD to add a kitchen instead of using the house kitchen. one of the two teachers is currently on maternity leave (substituted by temp)

Concerning **educational and cognitive stimulation**, the following comments were made

The school requires a method of dividing 1 big hall(room) as it currently houses 4 different classes of different ages {20(5-6 years) 20(4-5 years) 7(2-3 years)}, which is split only by markers. This does make learning and teaching effectively significantly harder. The school also requires Innovative means of hiring more teaching staff, due to financial constraints, the school struggles to hire and retain new teaching staff and thus relies on volunteers or Inter teachers for teaching assistance (who are less likely to remain at the school for significant periods).

Educational puzzles are replenished, and the parental committee functions only on hot, although there is always room for improvement, we work creatively with what we have

an outdoor jungle gym is being upgraded to accommodate bigger children. A+ helped fill the gap where we are now reusing papers and our spaces creatively. We did accommodate a special needs child (ADHD) with the support of a specialist thus we require special training for teachers to manage children with Autism spectrum at ECD even though they will be referred to Rainbow (special needs care centre) at the end. We are aware that our books are outdated, diverse movement stimulation could be improved and fantasy corners

The school has managed to self-source alternative educational material, but after inspection, they all might not be appropriate to better equip the learners. The school has no means of self-sourcing printed material or internet access but relies heavily on public libraries to source any such educational material at a cost. Due to high gang activity in the area, the school cannot also fully ensure the learner's safety while at school.

3.3. Results from Household

This section presents results from household surveys as well as indicates the impact of ECD from a community/household/caregiver perspective. The distribution of households surveyed per area as presented in Figure 27 below shows that Sea Vista and Kwanomzamo have the lowest number of households surveyed based on the 190 households done.

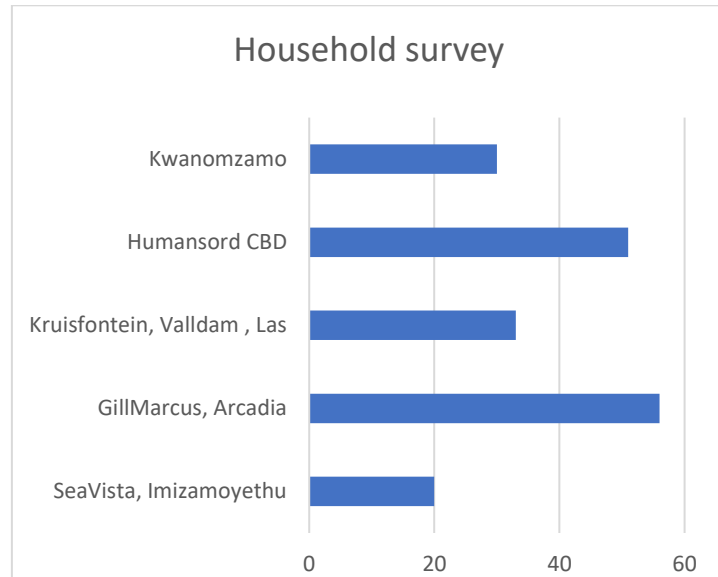


Figure 27: Areas surveyed

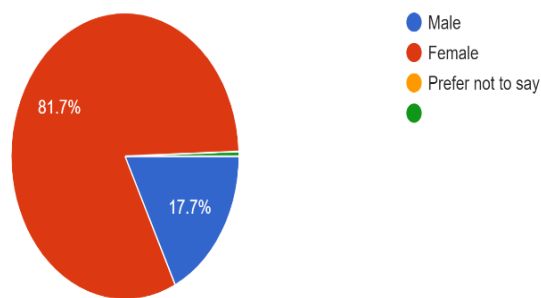


Figure 28: Gender Analysis

Biodata of HH participants highlighted the age and gender as indicated in Figure 28 above and Figure 29 below

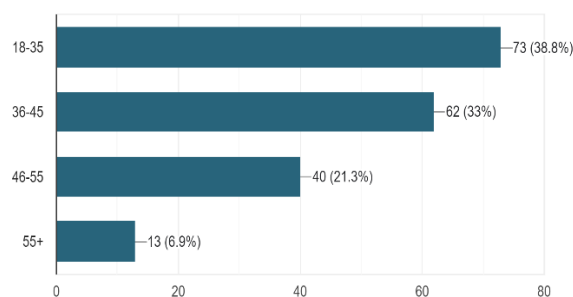


Figure 29: Age Analysis

Participants in households were predominantly female within the age groups of 18-35 (38%) and 36-35 (33%). Predominantly these are the caregivers at household levels where they indicated relationship with 0-6year old to be parent, guardian and siblings as indicated in figure 29 below

What is your relationship to child (0-6 year old)?

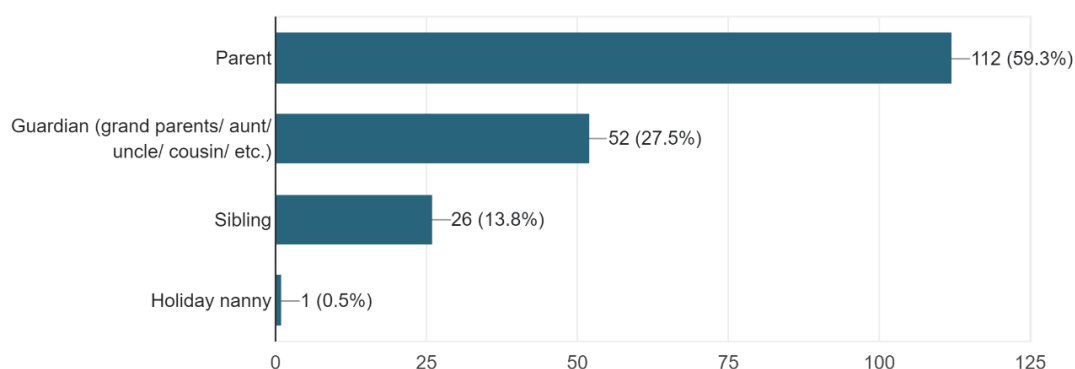


Figure 30: Relationship with 0-6 child

The result where the number of ECD children per household when compared to the different age categories of the ECD clusters was highlighted in Figure 30 below.

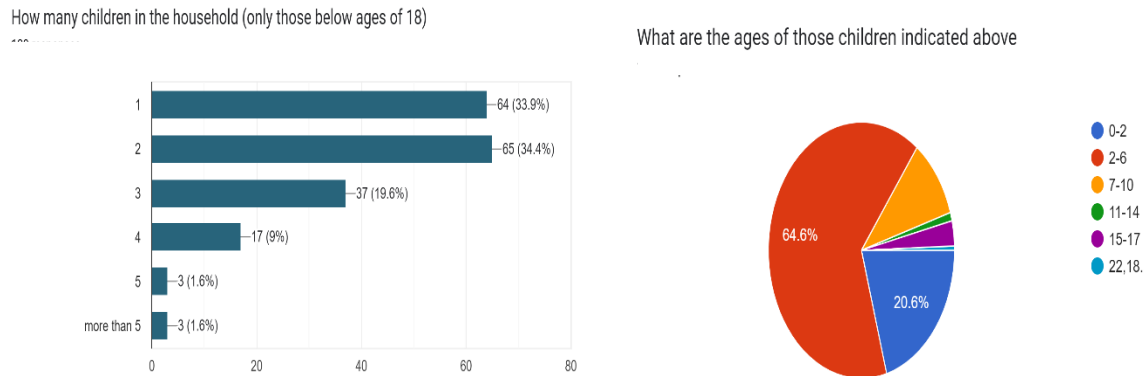


Figure 31: Number of ECD children at HH and the age categories

Based on Figure 30 above it could be stated that households visited mostly had at least 1 to 2 (33% and 34 % concurrently) children, aged between the 2-6-year-old (65%) followed by 0-2 years (21%). With our purposive sampling criteria (i.e., only interview families with a 0-6-year-old child(ren) and have granted consent to be interviewed we did not ignore the number of children in the household as they also contribute as role modelling siblings.

Although the household income was not determined (as it was not part of the evaluation), the number of adults earning some form of income was explored. On average there was at least one (30%) or two (49%) adults earning an income as indicated in Figure 31 below. This indicated that with some form of income, households could create opportunities for CD children to attend ECD programmes.

How many adults earning some form of income including government grants

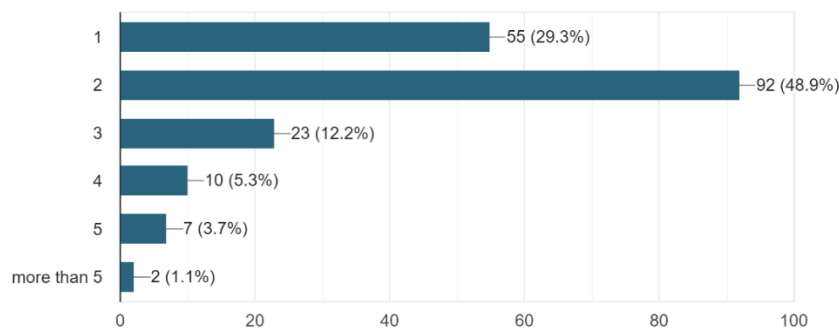


Figure 32: Income-earning adults at HH

We looked at the exposure of children at home to diverse developmental activities. Figure 32 highlights that there are supplementary and complementary activities done at the house. The prevalence of engaging children in households in these is high

How often do adults in the household engage in the following activities with the child(ren)?

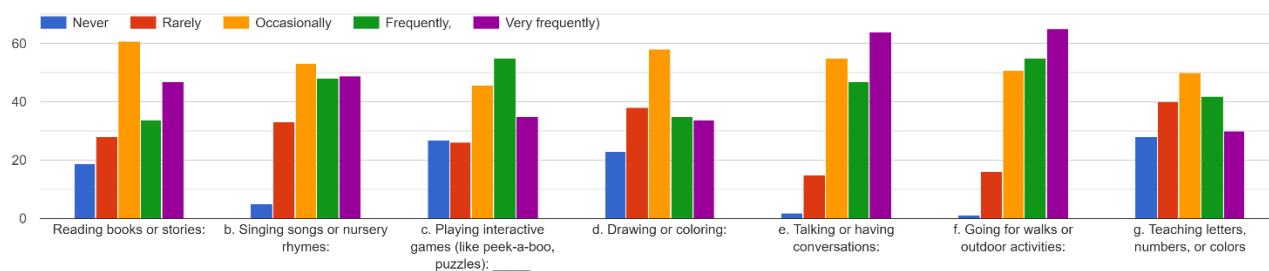
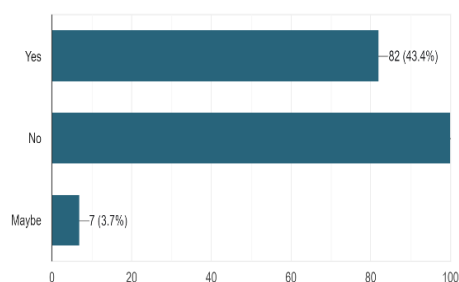


Figure 33: Frequencies of engaging ECD children in complementary activities

Even though there are diverse activities at home (as seen in Figure 32 above) however the frequency of these contributing towards cognitive stimulation such as books and television time was presented in Figure 33 below. The presence of indoor stimulation (43%) as compared to the absence thereof (53%) where television and electronics have played a huge role in stimulating children for more than 3 hours at home.

Are there toys, books, or other learning materials available for the child(ren) in the house?
189 responses



On average, how many hours a day does the child(ren) watch television or play with electronic devices?
189 responses

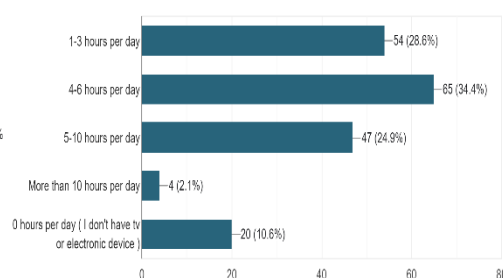


Figure 34: learning through books vs learning through TV

How Local ECD Services are viewed by Household / Community

From the household surveys, we went further to unpack how communities at households perceive and view the local ECD that serves these communities. It is in this section that we looked at issues of relevance, effectiveness, efficiencies, impact, and sustainability.

On relevance of the ECD Program

Households were asked the rate the extent to which they perceive the ECD program at the specific ECD near their locality to be addressing the developmental needs of their children. With a 1-to-5-star rating as indicated in Figure 34 below.

To what extent do you feel the program addresses the developmental needs of your child(ren)?

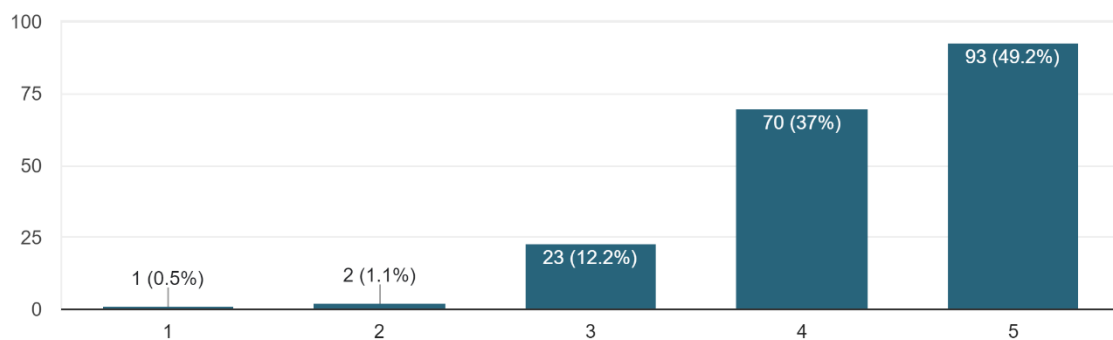


Figure 35: Rating of ECD program meeting needs of children

There is an overwhelming agreement with regards to the relevance of the services offered by the ECD where 98% rated beyond the addressing need (on average level 12% with almost 37% and fully at 49%).

We further followed up with the alignment of ECD programmes with household values (both culturally and socially). Results are presented in Figure 35 below.

How aligned are the program activities with your household's cultural and social values?

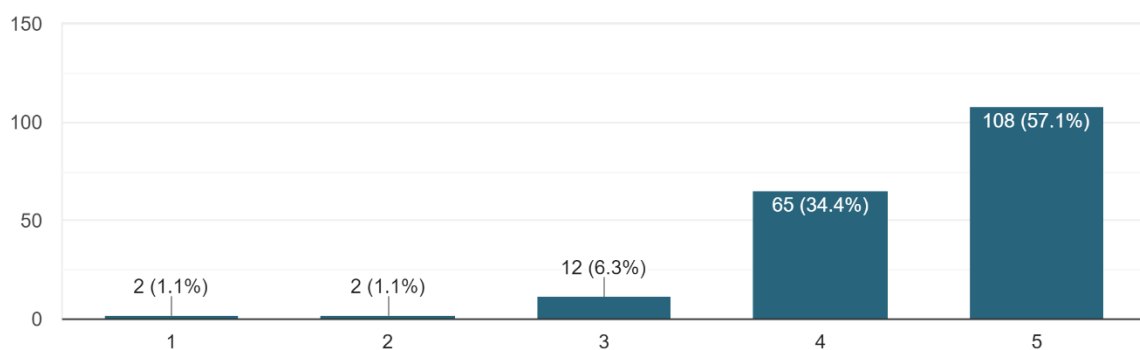


Figure 36: Alignment of ECD programmes with household values

There seems to be an alignment of 97% (on average 6%, with 34% indicating almost aligned and 57% fully aligned), where programmes offered at the ECD align to the cultural and social values of households.

Effectiveness of the ECD Program

This helped measure the ECD programme in meeting objectives effectively. Based on the perspectives, the results of household responses are highlighted in Figure 36 below.

Were you aware of the objectives and activities of the early childhood development program before enrollment?

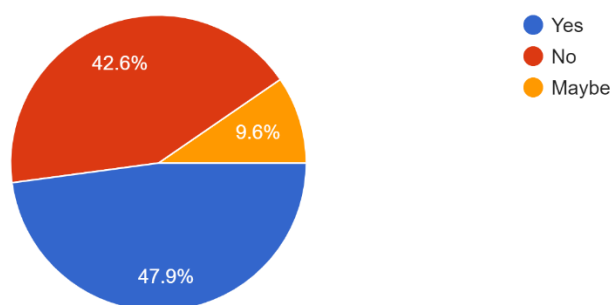


Figure 37: Household awareness of ECD objectives and activities

Knowledge of the objectives and activities of the ECD programmes highlighted there was an almost equibalance for those who know (48%) and those who do not know (43%) with 10% who were unsure. This speaks directly to the participant's role as parent/ guardian/ sibling and how engaged they are in knowing aspects such as the centre's objectives. However, activities done at the centre get to be played back at home as participants observe these in households as well as in the community.

Observation of changes at home and or community was explored at the household to determine contributions made by ECD programmes as shown in Figure 37 below.

Since your child(ren) attended the ECD program in your area have you noticed any positive changes in your child(ren)'s behavior or skills?

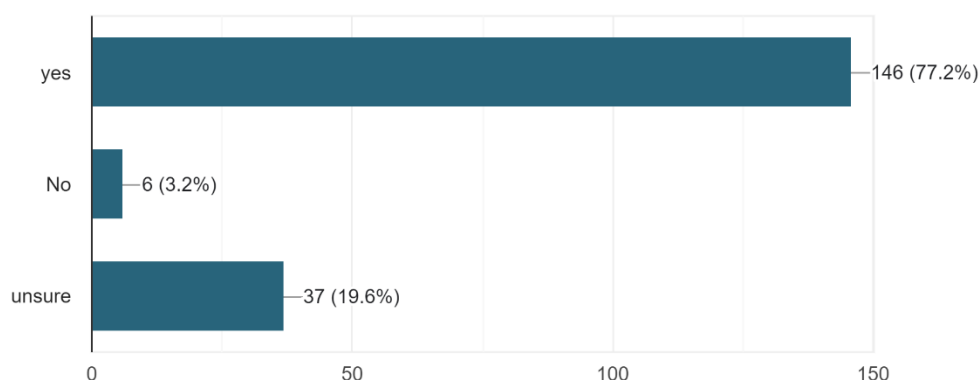


Figure 38: Observable changes notice.

The 77% of participants who highlighted noticing positive changes in their children since attending the ECD programme highlighted social and behavioural changes as the visible changes they have observed. These were complemented with words such as.

“They were shy children and never played with other children. Now they love being around children of their age”

“My son had an attitude but now he's well-mannered”

“My daughter never played with other children. She watches educational television and repeats things she learned at the day-care”.

“He used to cry a lot now he's happy and understands school going”

Then there was 20% were not sure stated

“maybe”

“I think I will see positive changes”

“have not recognised anything”

Yet the 3% that stated nothing highlighted the following as reasons to justify these responses:

“I work a lot not enough time with kids”

“I think I will see positive changes”

“I'm not always around”

We then asked households to rate the overall effectiveness of the ECD programmes in enhancing the development of children using a 1-5-star rating. Figure

Please rate the overall effectiveness of the program in enhancing your child(ren)'s development

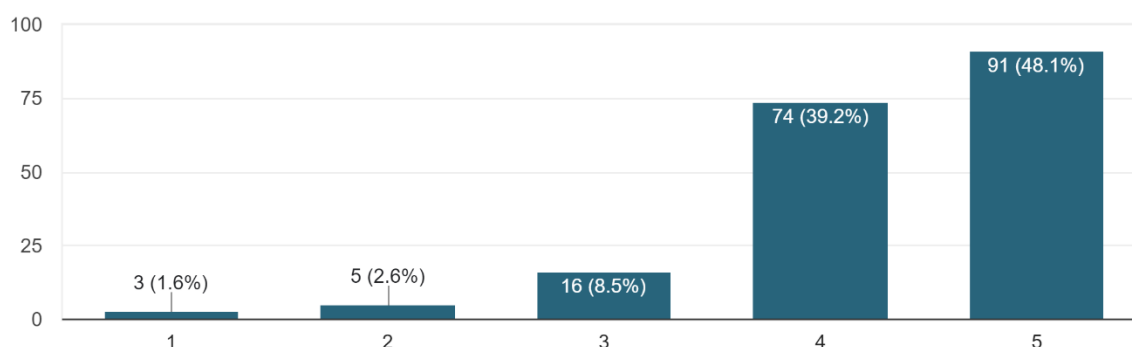


Figure 39: Effectiveness rating of the overall ECD programme

The effectiveness of the programmes offered at the ECD was rated high with 48% fully effective, 39% somehow effective and 9% effective, making it 96% effective.

To what extent do you feel the program addresses the developmental needs of your child(ren)?

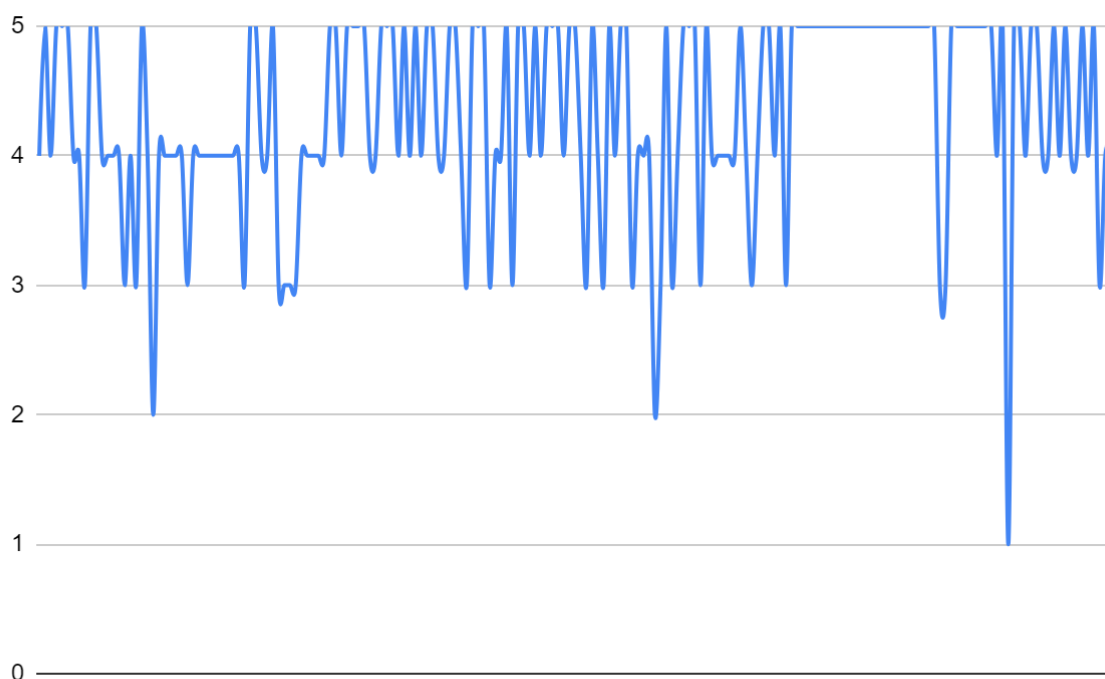


Figure 41: the rating of ECD services

To determine the overall effectiveness of the ECD programme in enhancing the child's developmental phases household perception was explored and the results have been presented in figure 41 below. Results indicated that more than 75% of households rate these at 5 (excellent) and 74% with very good.

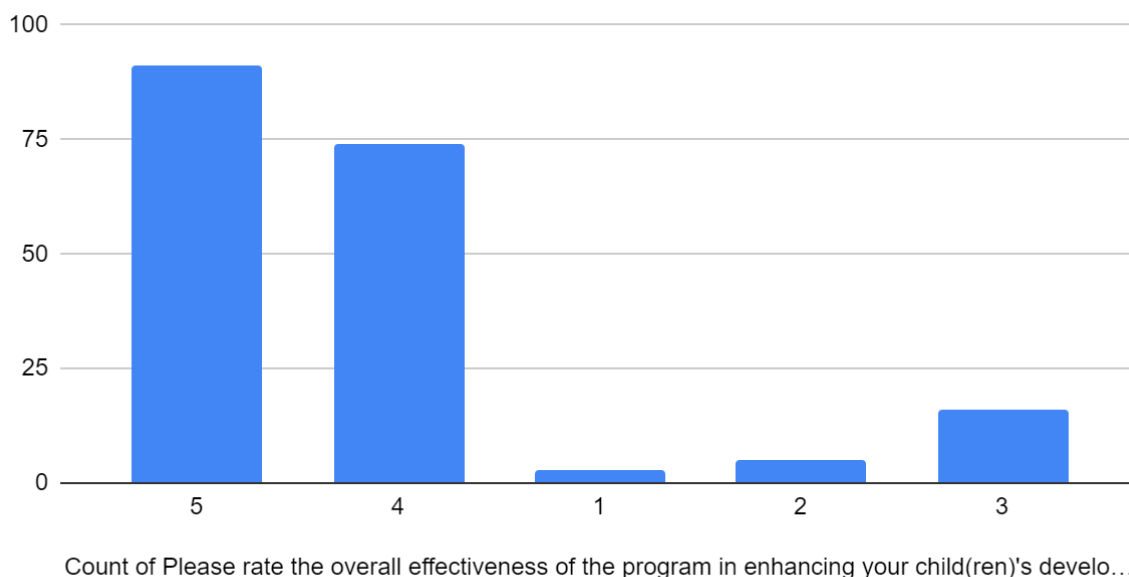


Figure 42: rating in terms of the ECD programme enhancing child development

Exploring specific areas or skills where household guardians and or caregivers observed to have significantly improved in the child due to the ECD program. The following were

highlighted. Mathematical knowledge, appreciation of shapes and sizes as well as art and creativity were the prominent observable skills gained (shown in Figure 42-word clout below). Both social skills and numerical skills are major identifiable skills that children develop by merely attending an ECD centre.



Figure 43: skillset developed through attendance of the ECD programme

Households highly perceive the frequency and duration of the ECD programmes as relevant as none of the participants indicated that the programme is not relevant instead some perceived it as being maybe relevant as seen in Figure 43 below.

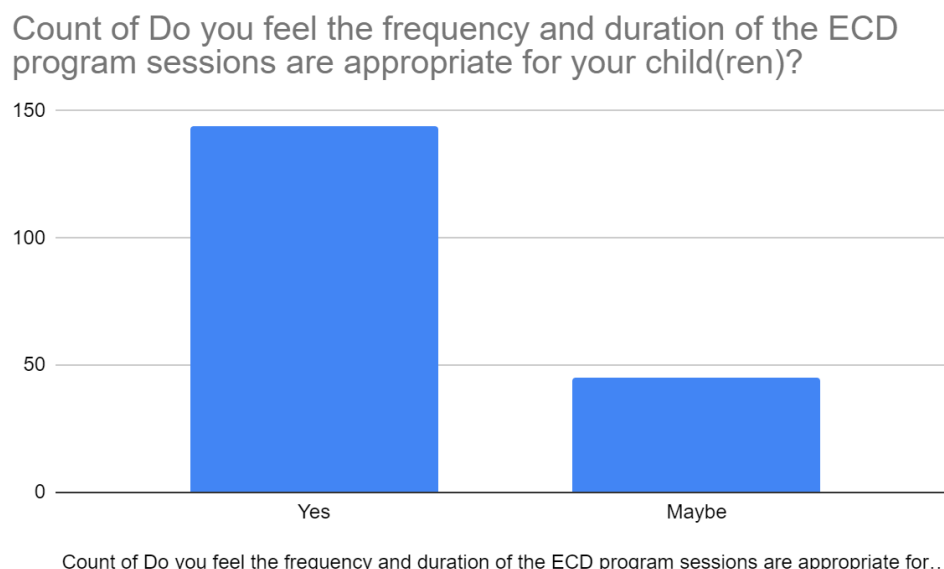


Figure 44: Frequency and duration of ECD services

Justification of these responses varied widely from suitable for personal circumstances as a working parent to benefits for the child's stimulation and growth (as seen in figure 44 below)

The direct impact of the ECD programme on the household was also determined in terms of how these influenced daily household routines with the child(ren). Results showed that household routines are highly influenced by ECD programmes (as shown in Figure 45 below)

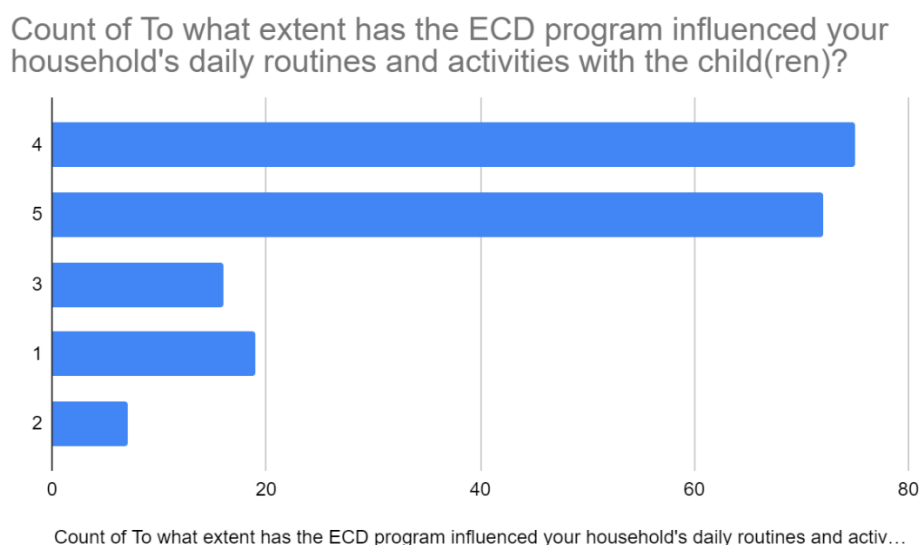


Figure 46: Extent to which ECD programmes influence households

To further determine the impact of ECD on households we asked direct questions about the observable impact of Windfarm Trust to the ECD centres where the children attend or those in the neighbourhood. Results highlighted diverse observable outcomes as shown in figure 46 below.



Figure 47: Word cloud on Trust (Windfarm) observable impact

Thus KWF 's interventions at ECD are seen at households mainly as building new classrooms revamping schools, supporting skills programmes with education material, and providing food and water tanks for ECD centres. Although there was a diverse response to the Windfarm (Trust) interventions at ECD knowledge education and learning seemed to have been more

prominent. Training material for educators and resources that make teaching and learning easier for progression, inclusion, and a better learning environment. Linked to this is the fact that the Trust is viewed as a good influence that helped improve ECD services as seen in Figure 47 below

Count of How have ECD program, services centers in your area improved or changed after windfarm intervention?

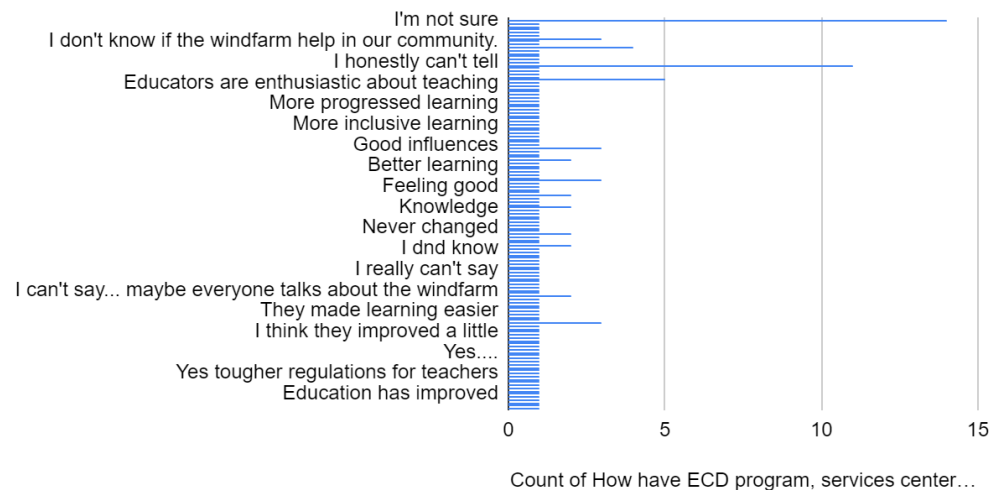


Figure 48: Positive changes at ECD centre due to Trust (Windfarm) intervention

However, with regards to ECD services that are still to improve household participants highlighted bigger and better classrooms with a bigger playground in secured facilities /child-friendly buildings with learning material for the psychosocial development of the child(ren) as presented in Figure 48 below.

Count of What are the ECD services/ programs that you believe still need improvement or changes?

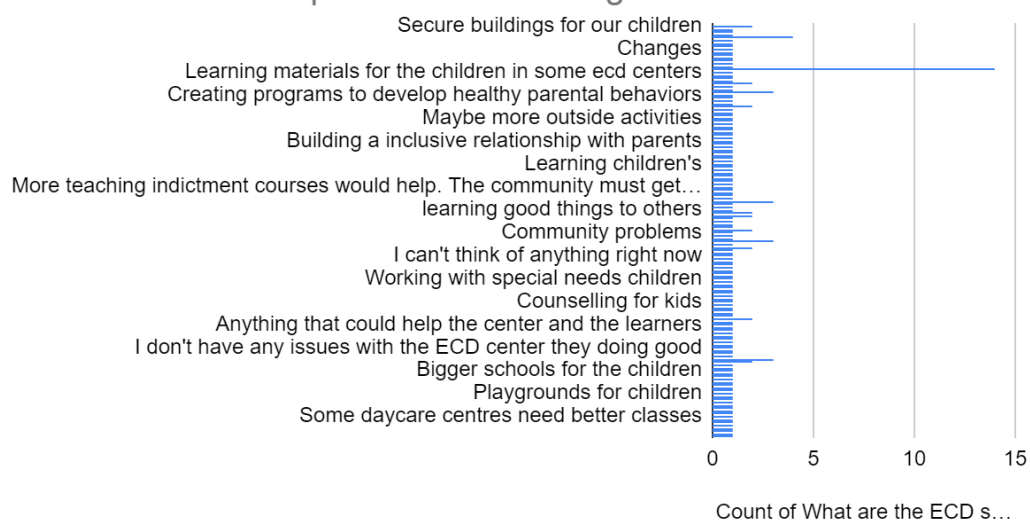


Figure 49: Required Trust intervention programme according to households

3.4. High-level summary of Focus Group results

On the effectiveness of A+ training workshops received

- Effective teaching and learning approaches (use of themes, spaces, and corners)
- Child-centric teaching approach (ability to let children use imagination to develop their creativity)
- Continuous and incremental daily improvements on processes (doing things differently). Moved from colouring to allowing children to draw self-images
- Increase in the quality of services offered (from more sleep time to more quality learning time)
- New teaching methodologies help achieve the outcome

Effect of implemented training on ECD children

- Confident children with a positive self-image. Personally, This is seen also post ECD level as schools also comment about the confidence of children from ECD
- The use of fantasy corners has allowed children to express themselves. The family states that children are engaged at home and are willing to assist as well as contribute to help with a task.
- Themes are taken from the classroom to outside (to allow thought processing) which continue at home
- Children's ability to enact what they learnt at the centre
- Learning and practising social behaviour (good manners, foundational values, principles of engaging and communication)

Financial sustainability

- Dependency on fees leads to inconsistency of funds due to delays for All Pay grant recipients
- Payment of conditional grants to complement funds delays at times thus affecting the nutrition programme (especially those not benefiting from the Lunch Box programme).
- The inconsistency in the number of children at the centre is a predictor of kind of support (financially or in-kind)

The value brought by strategic partners

- Availability of at least one nutritious meal per day for children (Lunch Box)
- Free multiple workshops (paid by Windfarm)
- Accessibility of the partner's services for all
- Capacity building for (all) diverse ECD staff (A+)
- Infrastructure improved accessibility, visibility, security, and child-friendly equipment
- Well-resourced ECD centres with sufficient stimulation tools (books, blocks, puzzles, numeracy)

Impact on the children

- Absence of these interventions, kids would have been underdeveloped with no stimulation

3.5. High-level summary of observations results (Walkabout)

The walk-about was merely an observation and questions were limited to clarification. The focus was on the infrastructure, indoor and outdoor equipment, and potential hazardous items safety issues.

Bathrooms

- Bathroom where child friend
- Hygienic and clean
- Number of toilets per learner
- Gender appropriateness and how separate genders access bathrooms
- Adult and children's bathrooms are separate if no clarity is sought on what system is used

Classroom observations

- Conditions of class – all kids are comfortable
- Classroom design allows for teaching
- Pictures on the wall, book available and accessible
- Teaching aids (variety and the themes)
- Teacher-learner interaction when there are visitors. Is the teacher able to manage and control the class?

Kitchen

- Availability of dishwashing area
- Cooking material separate from the teaching area
- Storage facility for dishes and cutlery
- Dangerous material left unattended that could be accessed by the children

General

- Is the gate locked or anyone can walk into the centre with no control (safety/security)?
- How safe are the outdoor equipment and playground (hazardous/potential harm)?
- Roof leakage signs
- Good ventilation (e.g., can windows open and close)
- Separation of house/ home/ office/ ECD centre and if learners access all areas

Chapter 4

Summary of results

4.1. Introduction

The valuable contribution of the Trust in ECD, infrastructure, activities and play as learning goes beyond creating a stimulating environment for ECD children but creates a social value that enables children to thrive through quality education. The Trust has been able to meet its deliverables in the following areas

Deliverables	Achievement level
Increase young children's access to quality education	
Professional Development and training	x
Develop and train a team of local facilitators	x
Leadership and management training	x
Provision of 1 st Aid training and 1 st Aids kit	x
Infrastructure upgrades	Not measured
Provision of PPE	x
Support with registration compliance	X
Provision of fire and safety equipment	x
Ensuring access to nutrition support	x

Table 1: Deliverables achieved

4.2. Effects of the facilitated Community ECD training by Africa+

- New learning occurred that benefited both practitioners (as educators) and children (as learners)
- New approach to teaching and learning
- Accessibility of facilitators and willingness to engage beyond classrooms
- Practical application as well as support during implementation of newly learned skills
- Peer support throughout the learning
- Engaging with diverse groups built not only new skills but new support networks

4.3. The impact of the ECD leadership, management, and educators training

- Ability to manage own staff
- Improved communication skills with staff which goes beyond task orientation – work-related but understanding personal development and career aspirations
- Enhanced effective leaders as principals
- Management of our administration
- Educator training improved the quality of services offered at the individual centre
- ECD staff embraced the new learning, and new ways of doing things and brought changes into the classroom
- Increase in the quality and diversity of services offered at the centres

4.4. Oversee and support ECD registration and compliance

- The support in registration reduced the complex application process
- Multiple ECD registrations can be a daunting process
- The time it takes for an individual ECD practitioner to finalise and complete the registration takes practitioners away from the core functions of teaching and learning

4.5. Management of Project Personnel

- Regular site visits supported ECD practitioner in delivering their goals
- Monitoring of numeracy and social skills as ECD outcomes and how these are stated/confirmed by households are
- Identifiable skills that ECD children develop.
- Diverse interventions by strategic partners and how these elevated the work of the Trust

4.6. Assessment of nutritional requirements and recommend suitable programmes

- There was a diversity in terms of the meal provisions and the times.
- At least one nutritious meal (breakfast or lunch) was offered at the ECD.
- Meals were done through the Lunch box. If it's breakfast children will eat their lunch, or breakfast and lunch will be provided at the ECD and children bring snacks from home.
- The variety of food with supplements offered was nutritious for the developing body

4.7. Procurement of educational equipment and procurement/ development of learning material

- An upward ward trajectory on the procurement of equipment to enhance stimulation, as well as supplement/ complement existing outdoor /indoor educational activities.
- An increase in the self-created/ developed new material to complement the existing ones (ECD practitioners use of recycled material) as self-created educational material allows creativity (of practitioners and children).
- Developing your own is easier and less costly when compared to outdoor equipment that is mostly sourced externally and requires funding/ sponsorship for that to be achieved.
- The downward trajectory for not procuring indicates sufficient resources

4.8. Mentoring and support of all ECD key stakeholders

- A 90% attendance and participated in the mentorship through the A+ workshop
- An improvement in the quality of the programmes offered by ECD centres
- Leadership development with regards to leading self, and leading others)
- New knowledge gained and new skills developed.

4.9. Monitoring and evaluating project progress and implementation

It should be noted that the changes in water access can be directly linked to the poor quality of the municipal taps. Some centres resort to only buying drinking water and use poor-quality water for sanitation. Yet others have water tanks through support from the Trust.

Item	Baseline	Current results
Access to clean water	12 no clean water	74% (yes); 26%(no)
Access to clean water & sanitation	6 no access	70%(yes); 30%(no)
Veggie garden	7 centres	
Meals	34 centres	
First aid training		89% (yes); 11% (no)
Fire extinguishers	5 no access	
Sufficient stimulation resources (books, puzzles , art, and numeracy material)		78%
Sufficient stimulation resources (books , puzzles, art, and numeracy material)		100%
Sufficient stimulation resources (books, puzzles, art , and numeracy material)		44%

Table 2: Progress monitoring

4.10. Overseeing and managing ECD centre buildings and upgrades

- 63% of centres have been upgraded
- Diversity of upgrades includes new classrooms, new schools painting and refurbishment

Chapter 5

Recommendations

The following recommendations are made

5.1 On Capacity building and training services offered

- a) Supporting and funding an excellent programme offered by A+ is highly appreciated and a motivation to the ECD practitioners, however, it falls short of the element of being a full qualification

It is recommended that a similar approach for accredited training supported by the Trust also be considered

- b) Training content to incorporate governance, administration, and programmatic issues not only for ECD practitioners but also include another key stakeholders to track the right governing boards.

It is recommended that the A+ model be upscale and replicated for the benefit

- c) Personal development of ECD practitioners has been limited (level progression) due to lack of funds.

It is recommended that the Trust have a bursary scheme or fund that encourages the personal development of practitioners. This could be a contractual repayment agreement either as a loan / serve at the ECD for an agreed period.

5.2. Water and Sanitation

There was a consensus concerning the poor quality of water within the local municipality. This enabled the sanitation process to continue. Drinking water required a multitude of processes as these were accessed from different sources (e.g., local taps then boil it, buy from local businesses). However, for those that could not afford to buy this was a health hazard

It is recommended that a multitude of water management systems be explored and incorporated beyond JoJo tank, and or delivered water but option water purification systems, and reuse of grey water for sanitation.

5.3. Leadership and Governance

Not all centres indicated active governance, some highlighted it as being ad-hoc or event-focused. Thus, managing or recommending a training programme is not always effective or a viable option. The privately owned centres mostly did not have a governing body. The absence of a structure that can hold practitioners accountable can put everyone at risk.

It is recommended governing body be part of the ECD, therefore capacity building to support members of the governing body be strengthened

Privately run ECDs are viewed purely as a business so are family-run ECD centres (same as a family business), however systems and structures should be put in place for independence and accountability through the governing body (clear governance). This includes running the enterprise (ECD) in the comfort of your home.

It is recommended that as part of compliance governing body should be present

5.4. Nutritious Meals

The prevalence of Lunch Box meals was mainly in those ECDs that were not privately owned and mainly located in the middle-to-lower socio-economic areas. Hence, this ensured that at least children had a decent meal with the required micro-nutrients.

It is recommended that a review of the non -non-qualifying centre be ongoing as the status and number of children fluctuate

5.5. Registration and compliance ‘

The multiple registration for compliance can be a daunting process for the ECD large or small as this changing process can take the administrators away from the core function. Support has been made available to ensure that ECD centres are registered.

For consistency and to minimise the multiple registrations it is recommended that these be clustered into i) core and essential (must have), ii) supplementary (good to have), and iii) complementary optional.

5.6. Educational Material

Although results have shown that ECD centres have sufficient books, there is a need for relevant content in the books for inclusive education if children are to identify with the character, especially for children with special needs.

It is recommended that for inclusivity to be incorporated as early as ECD for educational material to incorporate the diversity of learners in terms of disability not to be limited to books for special schools – children need to see themselves being included and for those in non-special school need to know that children are diverse.

Results have shown that there is a need for art material (only 44% resourced) as it enhances creativity that goes beyond the fantasy corner.

It is recommended that artistic creativity through art be developed and supported through the Trust and or strategic partners

Focus Group Recommendation

5.7. Recognition of the capacity building and skills development for ECD educators

The success of the capacity building training programme that incorporates all levels of ECD staff regardless of qualification levels has increased the self-confidence of ECD facilitators as well as encouraged others to upskill themselves. It is recommended some form of recognition of ECD facilitators who increase or complete an accredited program be considered to increase the level of qualification.

5.8. Sustainability of the ECD centres

ECD centres depend on grants or fees from parents, yet the private ECD seems to be able to be financially viable through the fee-paying parent. Some suffer to even pay the salaries of their staff due to the challenges linked to grant recipient households, even though they ensure that the household circumstances do not deprive the child of receiving early development education.

- a) It is recommended that monitoring (track and trace) of registered children no longer attending the ECD be recorded and supported by the DBE to ensure all ECD-qualifying children attend
- b) It is also recommended that grants and funding to support salaries of the operational core staff be made available for consistency of delivered services

Household Recommendation

5.9. ECD as a child's safe environment for healthy growth

How the community views and values the ECD centre is an indicator of the relevancy and significance of the centre. It should not be limited to the services offered but its location within the community, and the impact the centre has on child safety hence it should be protected by the same community as part of the symbiotic mutual relationship/ownership linked to the quality of care and services provided.

- a) It is recommended that every ECD be viewed and regarded as a safe environment for children, where they get nutrition and where there is love and care. The Gold Standard.
- b) It is recommended that the quality of services provided complements the household expectation in terms of developing socially acceptable behaviours in children, gaining basic cognitive skills (reading and numeracy) and creativity

5.10. Conclusions

It could be concluded that disparities in accessing quality early childhood services were glaring where aspects such as the socio-economic status as well as the location of some ECDs meant parents could not afford to pay nor provide support for the growth and development of children.

The Lunchbox intervention came as a great source of nutritious meals. However, this is where the training and development of teachers and support staff are needed. Challenges and disparities in ECD address including issues related to socioeconomic status, race, and geography, as well as challenges in identifying and addressing developmental delays and disorders in early childhood.

Appendix 1: List of Beneficiaries (Spreadsheet)

Name of ECD Centre	Principal's name	Town	Suburb/ township	Category
Magaba Day care	Sienna Pinzi	Francis Bay	Sea Vista	Group 1
Angels Day Care	Petronella Ruiters	Humansdorp	Gill Marcus	group 3
Arise and Shine	Nomathemba Sibengile	Humansdorp	Kwanomzamo	group 2
Jeugkamp	Mauricia Prince	Humansdorp	Jeugkamp	group 4
Dienkie Dot	Felicity Toll	Humansdorp	Gill Marcus	group 3
Disney Centre	Charlotte Visagie	Francis Bay	Sea Vista	Group 1
Emmanuel Day Care and Care Centre	Wilma Busher	Humansdorp	Gill Marcus	group 3
Grace Kids	Nadine Pienaar	Humansdorp	road 59	group 5
Haasbakkies Daycare Centre	Amber Vorster	Humansdorp	Gill-Marcus	group 3
Kate van der Merwe	Doreen Brown	Humansdorp	Arcadia	group 3
Kleine Engele Dagsorg	Liza Rattel	Humansdorp	Panorama	group 4
Kokkewiet Creche	Annie Goeda	Oyster Bay	Umzamowethu	Group 1
Kokkewiet Learning Centre	Heidi Moss	Humansdorp	Humansdorp	group 5
Kruisfontein Educare Creche	Florence Felix	Humansdorp	Kruisfontein	group 4
Lelethu Ikhaya Day Care	Nomgqibelo Tilese	Humansdorp	Kwanomzamo	group 2

Little Angels Daycare Centre	Aletta Korkee	Humansdorp	Arcadia	group 3
Makhulu	Nomfondo Gayiza	Francis Bay	Sea Vista	Group 1
Masikhule Pre-School	Ntombomzi Ndamse	Humansdorp	Kwanomazama	group 2
Mickey Mouse Daycare	Well done Miti	Humansdorp	Kwanomazamo	group2
MJA Daycare	Nomonde Siqwengana	Francis Bay	Sea Vista	Group 1
Nkqubela Creche	Nomlungelo Mtsele	Humansdorp	Kwanomazamo	group2
Noluthando Day Care	Ncomeka Beauty Nteta	Humansdorp	Kwanomzamo	group 2
Nolutho Day Care	Nolutho Charlie	Humansdorp	Street	group 5
Pink Panther Projek	Mieta Blou	Humansdorp	Vaaldam	gtroup 4
Rainbow Centre	Martha Hutchinson	Humansdorp	Arcadia	group 3
Siembamba Early Learning Centre	Elsie Vermaak	Humansdorp	Vaaldam	group 4
Simanye Daycare	Khunjulwa Thongo	Humansdorp	Kwanomzamo	group 2
Talhado Montessori Preschool	Cathryn Hempel	Francis Bay	Sea vista	Group 1
Wielie Walie Educational Centre	Hester Herselman	Humansdorp	Street	group 5
Eagles Accolade Academy	Kristy Hart	Humansdorp	Kruisfontein	group 4
Kiddies Clubhouse Creche	Felicity Toll (temp principal)	Humansdorp	Vaaldam	group 4
Noncedo Daycare Centre	Veliswa Boyi	Humansdorp	Kwanomzamo	group 2
Chioma Safehaven Daycare Centre	Marlyn Dyantyi	Humansdorp	Kruisfontein	group 4
Faith in Action	Annaline Didloft	Humansdorp	Las	group 4
Twinkle Daycare	Margaret Zietsman	Humansdorp	Humansdorp	group 5
Thina Daycare	Nombulelo Gloria Dayizana	Francis Bay	Sea Vista	Group 1
Ducklings Daycare	Laurenchia	Humansdorp	Humansdorp	group 5
Siyaphuhla Daycare Centre	Phumla Sylvia Ngaka	Humansdorp	Kwanomzamo	group 2

Appendix 2: Matrix of Evaluation Questions & Data Source

An evaluation matrix tool has been developed as a structure that helps to streamline the evaluation process as it links evaluation questions, indicators, methods, data sources, and standards focusing on the criteria of efficiency, effectiveness, sustainability, and impact as well as evaluating the specific needs of this ECD project

Evaluation Criteria	Evaluation Questions	Indicators	Methods	Data Sources	Standards/Benchmarks
Efficiency	How efficiently were resources used in the project?	Cost per beneficiary; Time taken for activity completion compared to plan	Cost analysis; Time-tracking	Financial records; Activity logs	Set budget; Project timeline
	Were there delays or challenges in delivery?	Number of delays; Reasons for delays	Qualitative interviews	ECD Project staff; Beneficiaries	Project plan; Expected challenges
Effectiveness	Did the project meet its objectives?	Achievement rate of project objectives	Progress review against objectives	Project reports; Beneficiary feedback	Project objectives
	We are teaching methodologies effective?	Learning outcomes achieved; Participant engagement levels	Observations; Surveys	Teachers; Students	Learning outcomes framework; Engagement benchmarks
Sustainability	Can the project continue after initial funding?	Existence of local stakeholder involvement; Number of trained local personnel	Stakeholder analysis; Training records review	Training logs; Community leaders	Stakeholder engagement plan; Training targets
	Are there mechanisms for long-term benefits?	Number of sustainable interventions; Community ownership levels	Qualitative interviews; Focus groups	Community members; Project staff	Sustainability plan
Impact	How has the project impacted children?	Developmental milestones achieved; Socio-emotional growth indicators	Child assessments; Parent/teacher feedback	Assessment records; Parents	Developmental milestones; Growth benchmarks

	Changes in attitudes towards ECD?	Shift in community perceptions; Increased enrolment in ECD programs	Surveys; Qualitative interviews	Community members; School records	Baseline perception survey; Enrollment targets
Training and mentorship received	Progression and new qualifications achieved	Number of ECD staff with new qualifications New NQF level New skills	Surveys; Qualitative interviews	ECD staff /educators	
	What quality of training for educators	Number of teacher training programme for ECD number of participants who completed	Surveys; Qualitative interviews	ECD staff /educators	The baseline indicated needs on -First Aid training, -ECD teacher training, -mentoring support programme for ECD Practitioners
	What mentorship and support was received	Number of mentoring support programs Number of participants	Surveys; Qualitative interviews	ECD stakeholders/beneficiaries	
Leadership and Governance	Ability to lead and manage the centres	Number of participants mentored/coached/trained on: - leadership & governance -role & responsibilities -effective governing structures.	Qualitative document review	ECD centres	King IV School Governing Body Policy
Management of Project Personnel	Ability to manage people	Number of participants mentored/coached/trained on talent management	Self-assessment questionnaire	ECD staff/	the baseline report 30 principals do not have a matric certificate, 24 principals
Registration and Compliance	How has the ECD been mentored and supported with the Registration and Compliance process	Number of 100% compliant ECDs with the registration	Qualitative FGD & document review	ECD centres	Baseline on the coaching programme
	How new infrastructures comply with the diverse educational needs of children	Number of new ECD infrastructures/ buildings that comply	Qualitative document review	ECD centres	Building upgrades and facilities to be; -child, disability, and gender-sensitive -provide safe, nonviolent, inclusive and -effective learning environments (SDG toolkit)

	with different levels of stimulation				
Health and Nutrition	Assess nutritional adherence	Number of ECDs with access to clean drinking water, healthy nutritious meals, veggie gardens	Document review of monthly and quarterly monitoring reports on progress and adherence		The baseline indicated that from the 38 ECD centres surveyed, <ul style="list-style-type: none"> - 12 are not clean, - 6 do not have access to clean drinking water. - 7 centres had veggie gardens - 34 centres provide a main meal.
Procure educational equipment and procurement/ development of learning material,	how the needs of children with different levels of stimulation are met through diverse educational equipment	Procurement compliance of educational equipment	Review document on quality of procured equipment use/apply diverse special learning materials	ECD centres	The baseline indicated only 22 of the 38 ECD centres have sufficient books, blocks and puzzles, art, numeracy, and literacy material and 16 centres do not have enough chairs and tables.
	What new educational resources and equipment have been procured to stimulate learning and play	Review of health safety and child protection	Document review and self-assessment questionnaire	ECD centres	The baseline indicated that 28 centres had fire extinguishers & first aid kits but all reported they needed training. Also 8 centres do not store harmful substances out of the reach of children,
	How procurement of new infrastructure enhances development to stimulate diverse educational	Universal compliance on procurement of new infrastructure/ new building		ECD centres	

Endnotes/References

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