

Unblocking the System to Strengthen Implementation of Early Childhood Development Policies and Practice in South Africa

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ABSTRACT

Government sectors responsible for early childhood development (ECD) often have competing priorities and obligations which manifest through fragmentation, silo conflicts, and power dynamics, thus failing to implement ECD policies in South Africa effectively. This article aims to provide a framework for strengthening the implementation of ECD policies to enhance quality early childhood care and education (ECCE) in the Gauteng province of South Africa. Using a qualitative approach within an interpretive paradigm, data was obtained through open-ended semi-structured interviews, observations, and field notes. Key stakeholders, including ECD managers, practitioners, and education officials, were purposely sampled. The conceptual lens was used for exploring the current implementation of ECD policies at the systems level in the theoretical framework. The findings revealed communication and information blockages at the level of national, provincial, and district offices. As a result, ECD centers were left uninformed of the new policies and frameworks for implementation. A framework that stipulates standardized training for the Department of Education officials, support for ECD principals, managers, and practitioners, and open communication through bi-annual conferences and monthly community of practice (CoP) virtual meetings will ensure that policies are implemented and that quality ECD education is achievable in South Africa.

KEYWORDS

Early childhood care and education; early childhood development; policy implementation; quality education; strengthening.

INTRODUCTION

Early childhood education (ECD) is the comprehensive term that applies to “the processes by which children from birth to nine years grow and thrive physically, mentally, emotionally, morally and socially” (Department of Education, 1995, p. 33). The South African government recognized ECD as an all-encompassing approach to protect and promote the optimal development of young children, especially in disadvantaged areas (Republic of South Africa [RSA], 2015; United Nations Children's Fund [UNICEF], 2010).

South Africa embraces a continuum of responsibilities to provide equal access for all young children to quality care and early learning opportunities (RSA, 2015). Most children in South Africa do not have access to quality childhood development services (Campaign for Real Reform for ECD, 2020). Currently, 3.2 million children are not accessing any ECD programs, and of those who do have access to some form of ECD program, 2.5 million are in unregistered programs and only 800 654 are in registered centers (Thorogood et al., 2020). This constraint is a concern, given that more than sixty percent of children endure extreme poverty which might have life-long consequences. In this regard, the South African government developed ECD policies to reconstruct the ECD sector and deal with the inequities inherited from the past apartheid government to improve the quality of education. Among others, policies such as the National Integrated Early Childhood Development Policy (NIECD) (RSA, 2015) and the national curriculum framework for children from birth to four (NCF) (Department of Basic Education [DBE], 2015) were developed. The NIECD policy stresses the need for a multi-sectoral approach by promoting service delivery across government departments, which includes the Department of Basic Education (DBE), Department of Health (DoH), and Department of Social Development (DSD), thus ensuring comprehensive, integrated ECD service delivery (RSA, 2015, p. 63). Furthermore, the aforementioned policies seek to ensure that legal ECD frameworks, organizational structures, institutional arrangements, planning, and funding mechanisms are established in the lead departments (DBE, DSD and DoH) in the short term (2015-2017).

The NIECD policy stipulates that government departments are required to channel adequate resources towards guaranteeing that babies and young children from birth to four years are cared for and receive appropriate stimulation in the areas of emotional, cognitive, and physical development (RSA, 2015). Although considerable commitment has been demonstrated by the South African government, the inadequate provision of ECD comprehensive programs persists due to multi-sectoral and disintegrated services from key stakeholders like the DSD, DBE, and DoH (Davids et al., 2015). The aforementioned authors state that ECD stakeholders at national, provincial, and district education offices work in isolation, without a common vision or understanding of providing ECD services. The appalling situation of ECD in South Africa suggests that teachers, especially those responsible for young children between the ages of birth to five, do not have guidance to design and interpret learning programs (Mahlomaholo & Mahlomaholo, 2023; Shaik, 2022). To elaborate further, ECD services in South Africa are hindered by structural problems which include inadequate practitioners' training to acquire

knowledge to care for children, funding and infrastructure, monitoring, and support of program implementation (Makhubele & Baloyi, 2018). In this regard, most young children in impoverished communities are affected and have limited provision of quality care and learning opportunities. The researcher considered it necessary to explore the challenges that impede the implementation of quality ECD practices in South Africa, to provide a framework for collaboration among ECD stakeholders. This article also outlines the conceptual framework for a shared understanding of quality in ECD practices.

Research questions

In light of the above context, and the aim to develop a collaboration framework, the following research question was pursued in the study:

- What strategies can be proposed in unblocking the system to strengthen the implementation of ECD policies and practices?

Research objectives

To achieve the aim of the study and answer the research question, the study was guided by the following objectives:

- Investigate the challenges that hinder the implementation of ECD policy practices in South Africa.
- Contribute to the improvement of ECD policy practices by proposing a framework for collaboration among stakeholders involved in early childhood practices.

LITERATURE REVIEW

The importance of strengthening the implementation of ECD policies

Research suggests that the first years of life, from birth to four years, is a sensitive period when the brain develops (Atmore et al., 2012; Biersteker et al., 2016). In addition, the importance of viewing ECD as a holistic process when children develop emotionally, socially, and cognitively is emphasized (Biersteker et al., 2016). For their part, Jamieson et al. (2017) stress the importance of investing in quality care and learning during early developmental stages, urging for strengthened implementation of ECD policies in South Africa. Sayre et al. (2015) suggest that South Africa needs structured learning activities and a supportive environment to enhance ECD implementation policies. Furthermore, researchers highlight that achieving quality care and education for young children requires addressing social inequalities such as education and health care through integrated services (Biersteker et al., 2016; Mbarathi et al., 2016).

The quality at which ECD services are implemented determines the level of children's educational outcomes. However, access to quality care and education in South Africa is mainly affected by the diverse economic, social, and historical backgrounds and settings in which children are raised (Atmore et al., 2012). In South Africa, young children, particularly in marginalized communities, have inadequate resources in infrastructure, funding, nutrition, sanitation, and quality ECD programs. Atmore et al. (2012) and Jamieson et al. (2017) concur that ECD practitioner training and development, ECD programs, monitoring, management, and leadership are vital to enhancing quality care and education. In contrast, the lack of quality early

childhood development services deprives young children of performing maximally and achieving desired learning outcomes (Biersteker et al., 2016).

ECD policies in the global and national context

In 1989, the Convention on the Rights of the Child (CRC) was formally adopted, and the laws and protocols to protect young children (United Nations Educational Scientific and Cultural Organization [UNESCO], 2000) were ratified by countries like Finland, Botswana and South Africa. These countries also adopted other legal protocols, including the UN Millennium Development Goals, the African Charter, UNESCO, Dakar, and Moscow frameworks. Against the backdrop of international commitment to embrace the ECD legal frameworks, South Africa prioritized ECD by developing ECD policies to ensure that young children receive quality basic care and education (Mbarathi et al., 2016). Furthermore, South Africa developed the NIECD policy (RSA, 2015) with the intended purpose of integrating ECD programs provided by government departments (DBE, DSD and DoH) for the holistic development of young children (RSA, 2015).

The COVID-19 pandemic highlighted the unequal and unjust treatment from the government departments regarding their accountability to ECD centers and practitioners (Bipath & Aina, 2021). The appeal for "Real Reform in ECD" highlights the initiatives taken by practitioners to work with NGOs. It also seeks to challenge the government's lax approach to ECD (Campaign for Real Reform for ECD, 2020). The campaign for real reform for ECD was launched in August 2020 in response to the poorly drafted Children's Amendment Bill, which did not address the concerns of the ECD sector. The campaign raised concerns about inadequate consultation with the DBE regarding the migration of ECD services from the DSD. Subsequently, thousands of people in the sector rallied behind the campaign, calling for real reform for ECD and the Children's Amendment Bill to be improved. The united action among practitioners has shown that there is an urgent need for the government to take responsibility and accountability for the youngest citizens in its care (Bipath & Aina, 2021). Furthermore, greater attention to communication between the different departments and within the levels of the DOE is essential to improve the ECD services.

Integrating ECD services to strengthen the implementation of ECD policies

ECD government sectors frequently have conflicting agendas and commitments that show up as fragmentation, silo disputes, and power dynamics (Mahlangu et al., 2019; Neuman & Devercelli, 2013). As a result, they fail to realize the multi-sectoral policy goals of ECD. Vorster et al. (2016) also point out that ECD provision and services, particularly in under-resourced communities, are of low quality and disintegrated due to the lack of collaboration among ECD stakeholders who are stationed at the national and provincial levels, district offices, and ECD centers. These officials work in isolation without a common vision in providing ECD services.

Non-compliance with the DSD's ECD registration requirements and regulations to register childcare facilities is one of the main challenges limiting the quality care and development of young children in the majority of underprivileged ECD centers in South Africa. According to the

DSD, ECD centers must maintain a secure and hygienic setting for young children. Regrettably, most day-care centers in South Africa are located in unofficial settlements, constructed in homeowners' backyards (Matjokana, 2021).

Only 38 percent of ECD centers are registered with the DBE and 48 percent with the DSD in South Africa (Biersteker et al., 2016). In this regard, the majority of ECD centers remain unregistered and are not provided with funding, monitoring, and support by key stakeholders, namely the DSD, DBE, and DoH, for young children to thrive in a well-resourced environment. The researchers further state that most ECD practitioners in disadvantaged areas are unqualified, with only 12 percent of practitioners known to have the National Qualification Framework (NQF) training qualifications recognized by the DBE (Biersteker et al., 2016). In addition, ECD practitioners who are qualified receive inadequate training and thus cannot provide young children with high levels of quality care and foundational knowledge (Plagerson, 2023). The quality of early learning for young children in poor communities has and continues to deteriorate (Atmore et al., 2012; Jamieson et al., 2017).

Researchers note that various structures ranging across private, non-governmental (NGOs) and community-based organizations (CBOs), individual creches, and preschool centers are providing most ECD services (Aubrey, 2017; Vorster et al., 2016). The government departments' ECD services continue to be subpar because of an over-reliance on the private sector (Vorster et al., 2016).

Considering the above, this research project sought to probe the perceptions of ECD practitioners, managers, and officials from the district, province, and national education offices to establish a collaboration framework for quality service delivery.

THEORETICAL FRAMEWORK

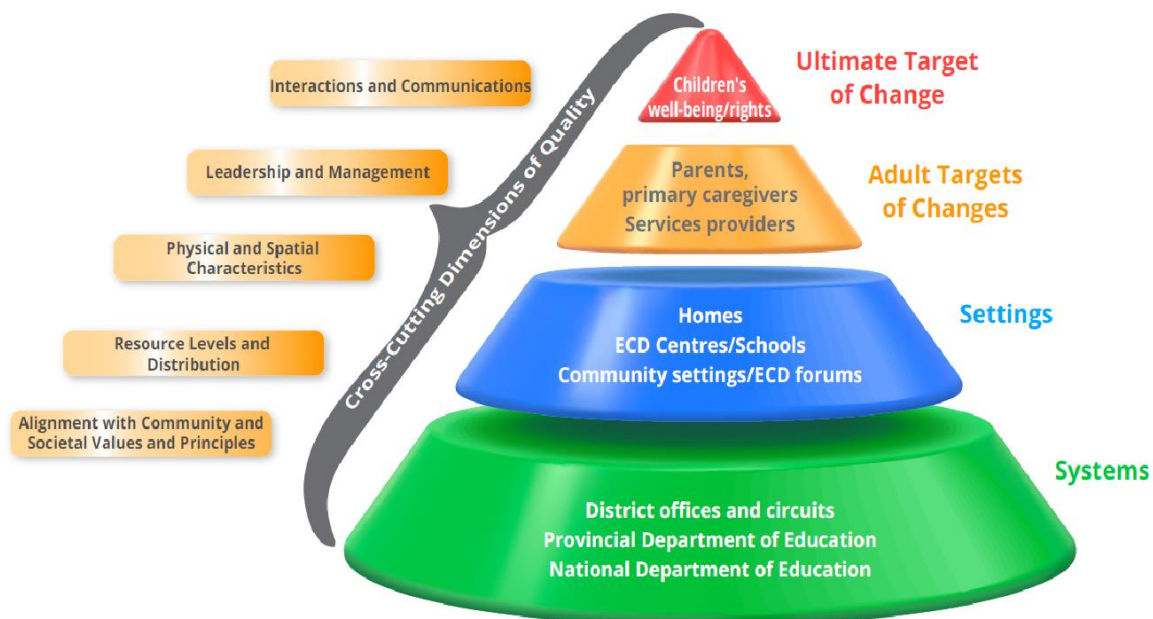
Ecological and system-level settings and cross-cutting quality dimensions

The holistic development in the early years includes the physical, cognitive, emotional, and social skills to prepare children to become adults who will make a significant contribution to society. The holistic well-being of children requires intervention through services and programs in education, social, and health sectors within the framework of a supportive policy environment and cross-sectoral collaboration (Richter et al., 2017).

The ecological system theory, as proposed by Britto et al. (2011), is one of the theories central to the delivery of multi-sectoral services. Britto (2012) and Davids et al. (2015) emphasize that quality ECD relies on collaboration among ECD stakeholders in sharing knowledge regarding required interventions. Neuman and Devercelli (2012) add that quality early learning programs call for multi-sectoral, integrated ECD services and interventions. For this study, Britto et al.'s (2011) framework for ecological and system-level settings and cross-cutting quality dimensions was selected to deepen the understanding. Figure 1 depicts the framework.

Figure 1.

Ecological settings, system levels, and cross-cutting quality dimension (adapted from Britto et al., 2011)



The framework in Figure 1 depicts the larger organizational and institutional structure within which ECD centers are located and managed. Similarly, in the South African context, ECD services fall within diverse institutional structures which include the national, provincial, and district/circuit offices that fall within the DBE, DoH, and DSD government departments. For this reason, the framework was chosen due to its comprehensive organizational support systems for the delivery of an integrated early learning environment. Both Davids et al. (2015) and Vorster et al. (2016) contend that the multifaceted ECD services should promote a quality environment that advances children's holistic development.

Based on Britto et al.'s model, the various levels of education at national, provincial, and district offices as well as ECD centers have varying degrees of ECD service implementation. The outcomes of ECD services require adequate training, funding, infrastructure, advocacy, monitoring, and support from stakeholders. Also, the delivery of the latter services can only be achieved if stakeholders understand their roles and responsibilities to improve early learning standards for the benefit of young children's emotional, intellectual, social, and physical development. Therefore, the national, provincial, and district education officials, ECD managers, and practitioners must collaborate in their activities. Researchers agree that quality ECD programs require a competent system where there are regular coordinated meetings, dialogues, and negotiations among ECD stakeholders (Biersteker et al., 2022; Neuman & Devercelli, 2012; Britto, 2012). The implementation of quality ECD services requires the competency and collaboration of all stakeholders working with young children.

RESEARCH METHODOLOGY

This study followed a qualitative, interpretative research approach. According to Creswell and Poth (2017) and Maree (2015), in qualitative research, the researcher is in a position to understand the participants' beliefs and daily practices. In this instance, the researcher employed a qualitative method to explore how participants' beliefs and daily practices influenced the care and education provided to young children in their environment. The researcher gained insight into the challenges faced by district, provincial, and national education officials, as well as ECD managers and practitioners in fulfilling their professional responsibilities.

Research design

A multiple case study design was chosen, consisting of three cases from the national, provincial, and district offices and two cases from ECD centers in the Hammanskraal, Tshwane metropolitan municipality, Mandela Village. This approach enabled the researcher to closely examine data within a specific context to understand the phenomena better and draw rich interconnected information in different ECD centers (Fasipe, 2016).

Data collection

Semi-structured, one-on-one interviews were undertaken with national, provincial, and district officials to investigate their perceptions regarding the challenges faced when implementing ECD policies. One-on-one interviews allowed for anonymity and elicited honest views and opinions (Creswell & Creswell, 2018). A focus group discussion using semi-structured interviews was conducted with ECD managers and ECD practitioners. These focus group interviews with the ECD center officials proved helpful because the interaction between interviewees yielded substantial information since they were working together and had similar ideas (Creswell, 2013). Site visits, writing notes, observation of the environment, and the interactions of the interviewees were also used to collect data. All interviews were recorded and later transcribed before they were analyzed.

Sampling

According to Palinkas et al. (2015), purposive sampling is a technique that involves selecting certain cases based on a specific purpose. The researcher selected specific participants who were proficient and experienced in the topic of interest (Etikan et al., 2016). The participants were from the DBE, Provincial Education Department (PED), and Tshwane North district office. The officials (n=3) selected work in Johannesburg and Tshwane metropolitan areas and are responsible for the chosen ECD centers. The two ECD centers chosen were situated in the semi-urban and rural areas of Hammanskraal in the Tshwane metropolitan municipality, Mandela Village. The principals and practitioners selected (n=4) spoke about their real-life experiences in caring for young children between the ages of birth to four years.

Table 1 illustrates the samples, the pseudonyms used for participants, and the sequence of the data generated.

Table 1.***Sample and data generation sequence***

Dates	Participants	Roles and responsibilities	Pseudonym	Interviews	Duration
10/02/2020	DBE official	Developing ECD policies	NO	One-on -one interview	1 hour
21/02/2021	PED official	Provision of skills, resources, and support in executing ECD policies	PO	One-on -one interview	1 hour
12/02/2020	District official	Training, monitoring, and supporting the ECD centers	DO	One-on -one interview	1 hour
03/03/2020	ECD center manager Urban	Supervises, plans, and carries out care and educational activities in the designated areas	CM1	One-on -one interview	1 hour
03/03/2020	ECD center manager semi-rural	Supervises, plans, and carries out care and educational activities in the designated areas	CM2	One-on -one interview	1 hour
03/03/2020	ECD practitioners urban	Care and development of young children in the designated areas	Pr1	Focus group interview	2 hours
03/03/2020	ECD practitioners semi-urban	Care and development of young children in the designated areas	Pr2	Focus group interview	2 hours

Data analysis

Reading through the transcripts of the interviews conducted with ECD managers, practitioners, and officials served as the basis for the thematic analysis. Maguire and Delahunt (2017) posit that thematic analysis is concerned with the identification of themes in qualitative data. In this paper, thematic analysis was conducted by identifying common themes by segmenting all data into small elements and reconstructing them into groups of themes (Borden, 2014, p. 2). This grouping was done through the coding of information from participants, using both predetermined and emerging codes. After reading and re-reading the participants' quotes, common trends were identified which were grouped into themes after various stages of coding.

Reliability and validity

To ensure the study's reliability, the researcher employed participants from the ECD sector within a comparable context for cross-referencing the collected information. Moreover, an audit trail, consisting of transcribed interviews, was utilized to cross-check the findings obtained from ECD managers, practitioners, as well as district, provincial, and national officials (Maree, 2015). Additional sources including field notes and observations were also incorporated for a thorough investigation of the phenomenon, contributing to the study's validity and credibility (Henry & Foss, 2015).

Ethical consideration

Before undertaking the research, ethical clearance was obtained from the University of Pretoria and the Gauteng Department of Education. Consent letters were prepared to explain the nature and aim of the research. All participation was voluntary and anonymous.

FINDINGS AND DISCUSSIONS

Based on data from the face-to-face and focus group semi-structured interviews, observation, and note-taking, the following themes relating to the research question emerged as a lack of understanding of the roles and responsibilities in implementing ECD policies; a lack of consultation with ECD stakeholders from the different levels in the education department; and challenges experienced in strengthening the implementation of ECD policies at the centers.

Theme 1: Lack of understanding of the roles and responsibilities in implementing ECD policies

“We train ECD practitioners through TVET colleges. We professionalize ECD by training practitioners for NQF level 6. We hope they will then go to work in formal schools if they are lucky. DSD offers stipends for the practitioners and furniture for their centers. However, they will need parental contribution to buy toys and other things needed” (NO).

Given that ECD practitioners are trained by TVET colleges it would seem that there is no responsibility assigned to the provincial and district officials regarding training, monitoring, and support. These officials are not trained and hence lack knowledge about what to expect and observe.

Participant NO, a national official, also mentioned, *“Some of the officials from the DSD, especially social workers go to ECD centers and monitor curriculum. This confuses the practitioners sometimes, as social workers are not trained.”* The statement was concerning because, according to the NIECD, it is the responsibility of the DBE to train practitioners on the ECD curriculum. NO further stated: *“For social workers to monitor, they must be trained first so that practitioners are not confused.”* ECD practitioners are confused because they receive too many visits from different departments. It seems that the departments are not clear about their responsibilities according to the NIECD. NO complained:

“Sometimes officials go to ECD center A, today I go there as an official from DoE, tomorrow, so and so go as an official from DSD, and on the other day they get a visit from DoH.” NO appealed that, *“officials should talk in one language, go with one thing in common. The problem is when going there differently in one ECD center. How about going there collaboratively? Practitioners get confused, but they say they are from the government; they do not have a platform to tell even anything about salaries. Whoever goes there, they accept him and welcome him. Communication is not strengthened. For example, when given funding, ECD centers, becomes difficult for all the departments to monitor how funding is used. As a DoE, we look at how the curriculum is implemented because we are not funding; we don't go deeper to monitor funding as it is not received from our side.”*

The above utterance shows and confirms that the NIECD's multi-sectoral responsibilities have resulted in confusion, and the decision to shift the function to the DBE could have been the best idea.

However, within the DBE, there also seemed to be confusion about roles and responsibilities. When NO was asked about how she monitored the implementation of ECD policies at the ECD centers, she responded as follows:

“Only registered ones are monitored and supported by the province. ECD has now moved to DBE, I, and we are in the process of registering all ECD centers. The national department develops policies, provinces implement those policies and district monitors policies in registered ECD centers.”

This statement demonstrates that the different levels in the organizations seem to have specific roles, however, the provincial officials and district officials are not confident about the content of the ECD policies or frameworks that they need to monitor and implement, hence the failure of policy implementation.

PO's subsequent comments demonstrate the ECD officials' inefficiency and incapacity in the delivery of their services. When asked about how monitoring and supporting district officials in implementing ECD policies at the centers work, she replied that *“district officials are employed to monitor Grade R. They only monitor ECD centers close to the schools but no intensive monitoring.”*

The district official who is the custodian of the ECD centers in her respective district expressed that, *“We don't have the National Curriculum Framework (NCF), it is still in the pipeline, they have not done any policy so far for 0-4”* (DO). Participant CM2 also indicated, *“I don't have an idea”*. From the participants' responses, it was evident that training or advocacy regarding the implementation of the NCF had not reached the key ECD implementers of the ECD policies to provide quality care and early learning for young children.

When the DO was asked how they monitored the implementation of ECD policies at the ECD centers, they answered, *“Officials should be trained on what to look for at the centers. We don't have guidelines to monitor these centers. This is not yet our responsibility for 0-4-year-old children, but 4-6 years.”* This utterance shows that she lacks the confidence to monitor ECD centers due to her inadequate training and lack of appropriate monitoring and support tools.

Researchers O'Carroll and Hickman (2012) indicate that inadequate training of practitioners limits quality teaching and learning practices at the ECD centers. The rural ECD practitioners and managers mentioned that NGOs trained them. However, it is unclear what kind of training was offered by the NGOs and whether the officials are knowledgeable about the content. Thus, it could be possible that the blockage occurs due to a lack of common knowledge and understanding of the ECD policies at the provincial and district offices. The district officials were uncertain of the policies themselves and thus avoided training or monitoring of ECD centers. Lack of accountability from the national office to ensure effective training for these officials and proper job descriptions that speak to officials' roles and responsibilities are not agreed upon or discussed.

Theme 2: Lack of consultation with ECD stakeholders from the different levels in the education department

Participant NO mentioned that there is a lack of consultation with ECD stakeholders on the implementation of ECD policies. There is also little evidence of such consultation from the findings, particularly at the district and ECD center level. Britto et al. (2011) echo that

consultation among ECD stakeholders brings an opportunity to have a common vision towards implementing ECD policies. As theorized by the researchers, the bottom of the quality model shows the systems as the foundation of quality dimensions. At the top of the DBE system, the national office representative, NO, stated that *“Provinces are provided with a budget to monitor and train districts, to train ECD practitioners and improve ECD centers. The district sends reports to provinces, province to DoE, and report in the interprovincial meetings.”*

However, these officials' fragmented roles and their lack of understanding of policy implementation strategies seem to have resulted in persistent inadequate provision of ECD services for young children at the rural ECD centers.

The findings revealed a lack of understanding of leadership roles by the DBE officials due to vague job descriptions. The findings of this study corroborate those of Britto et al. (2011), that leadership requires clearly defined roles and responsibilities and continuous interaction to reach a common goal in strengthening and implementing ECD policies. Furthermore, there seems to be no funding or human resources available for the training of practitioners and principals at ECD centers. PO stated that *“four officials are responsible for the whole province, there is lack [of] human resource, it is the mandate of the department to reorganize the sector on ECD.”*

NO further stated, *“NIECD policy is used to work with various departments through National Interdepartmental Committee where several departments meet quarterly. DSD, DoH, DSD meet quarterly.”* However, she expressed her frustration about the lack of dialogue and negotiation when rendering ECD services to other stakeholders. Similarly, Heikka et al. (2018) note that the provision of ECD services by key stakeholders is fragmented. Decisions are made independently, contravening the NIECD policy prescripts to strengthen stakeholder interaction in ECD services.

Participants DO and CM2 confirmed that ECD centers work in silos by following their programs. The ECD principals and practitioners are not trained on common programs in caring for and educating young children. CM1 stressed the importance of all the ECD centers working with a common, structured, standardized program to provide young children with quality foundational knowledge. Aubrey (2017) maintains that ECD services in South Africa are mainly catered for by non-government organizations and do not have an integrated system; hence, strengthening the implementation of ECD policies is a challenge, particularly in rural areas.

Theme: Challenges experienced by ECD stakeholders in ECD policy implementation

Participants DO, CM1, and CM2 reported that funding for ECD centers is provided and managed by DSD. ECD managers' experiences at both centers showed discrepancies in receiving funding. CM2 shared that the primary source of income at the center is the parents' contribution, which is minimal and inconsistent. Research concurs with CM2 that most families live in poverty and cannot afford to pay for ECD services, leaving the provision of care and early learning in a dire

state, where the standard and quality of living of children from poor communities remain unchanged (Atmore et al., 2012).

The principals and practitioners at the ECD centers all complained about the inadequate training that the ECD practitioners receive from NGOs regarding the new ECD policies or frameworks. In addition to the frustrations, DO and PO mentioned that they were undoubtedly short-staffed at the various levels of the department. From the biographical data, we noticed that the officials who were in the ECD posts were not necessarily qualified for ECD. The challenge in training the ECD practitioners and principals could be due to departmental officials' lack of expertise or experience in ECD. Similarly, Atmore (2012) and Vorster et al. (2016) state that inadequate capacity to support the ECD centers could be caused by a lack of funding from the DBE.

Participant NO reaffirmed the current situation faced by the district offices: *“Districts lack the capacity to implement policy. Some ECD centers are shacks with children of different ages. When the Department of Public Works trained practitioners, they became confident and left to open their own ECD centers due to poverty.”* Municipalities cannot monitor the mushrooming centers. This poses a human resource problem as practitioners realize that they can earn a small stipend from the DSD. Sun et al. (2015) also agree that low-quality teaching and lower job satisfaction are associated with the absence of sufficient funding in rural areas. Consequently, ECD practitioners begin to see an opportunity to open up more centers as this becomes a stable source of income.

Participant CM2 indicated that inadequate infrastructure hampers registration and access to ECD services. In this regard, inadequate resources are a hindrance to implementing ECD policies (Vargas-Baron, 2019). The findings revealed inadequate physical resources in rural areas, such as water, sanitation, and teaching and learning resources. CM2 also shared her experiences with the lack of physical resources that affect the implementation of ECD policies. However, the NIECD policy has set national norms and standards for infrastructure provision, irrespective of young children's geographical location.

Viviers et al. (2013) concur that in the poorest areas, the non-registered ECD centers are not funded or supported due to not meeting the infrastructure requirements. In contrast, the South African Children's Act (38 of 2008) and the NIECD policy aim to prioritize funding for young, vulnerable children (RSA, 2015). However, the implementation of ECD policies is still affected by inadequate ECD services, particularly in impoverished communities.

In light of the above, the findings underscore the need for a better understanding of the roles and responsibilities of ECD stakeholders in implementing ECD policies and practices. Furthermore, the experiences of participants in leadership and management positions, such as provincial officials, district officials, and ECD managers, revealed challenges in ECD policy implementation and practice. Data showed that inadequate shared responsibilities and interaction among these officials impede the implementation process.

Moreover, the results indicated instances where visits to ECD centers were unrelated, stemming from the lack of communication and collaboration among officials. The uncoordinated planning from ECD stakeholders results in confusion among practitioners at the centers, hampering the intended purpose of enhancing the implementation of quality programs. Furthermore, the study indicates a discrepancy in the understanding of the NIECD policy requirements, as consultation and service integration between the provincial and district offices is lacking. The overarching discussion emphasizes the disintegrated approach and siloed working of ECD stakeholders in implementing policies. In this context, knowledge and understanding of policies by implementers, especially managers and practitioners, is affecting their daily practices. Regrettably, the quality of care and development for young children, especially in disadvantaged communities, is further compromised.

Britto et al.'s (2011) conceptual framework has proven that quality implementation of ECD policies is reciprocal and necessitates a competent system at all policy implementation levels. Nevertheless, the results revealed disjuncture and a lack of meaningful relationships and dialogue to create the coherent implementation of ECD policies among the national, provincial, and district officials. This aforesaid statement is aligned with the DSD (2015), affirming that ECD policies aim to foster a shared understanding and daily practices for equitable access to ECD services. Furthermore, the South African policies and the National Development Plan (NDP) emphasize the need for a streamlined and integrated system to ensure universal access to early childhood programs. The Children's Act additionally requires the state to create a system that is appropriately resourced, well-coordinated, and effectively managed for early learning (DSD, 2015; Biersteker et al., 2022). Contrarily, the results of the study reveal a fragmented, uncoordinated ECD system, disproportionately affecting the most under-resourced centers and further reinforcing poor early learning opportunities (Biersteker et al. 2022; Heikka et al., 2018).

Recommendations

The findings of this study highlight the lack of collaboration and integration in the approach of the officials at different levels in the DBE to create an enabling environment for quality ECD services. The disjointed communication revealed that officials were unaware of their roles and responsibilities in providing quality ECD services. The participants' responses revealed limited collaboration in advocacy, training, management, monitoring, and support. In the main, the district officials, ECD principals, and practitioners revealed limited knowledge of the ECD policies, and surprisingly, no knowledge of the NCF, which is essential in developing the quality of ECCE in young children.

The ECD stakeholders from the different departments work in silos, limiting the potential to create a competent system for quality care and the development of young children. Provincial and district officials face challenges due to inadequate funding, human resources, training, and infrastructure, which hinder their ability to provide support and monitor progress.

The recommended model of Britto et al. (2011), which uses the example of a "spinning top", might unblock the roles and responsibilities of top-level DBE officials. The detailed expectations of the roles and responsibilities of ECD stakeholders at the various DOE levels, such as the national, provincial, and district levels, should be shared and agreed upon to ensure coherent activities and decision-making in implementing the ECD policies. "*Unblocking the system for effective ECD policy implementation*", as described in Figure 2, could provide guidelines for South Africa to ensure that policies created have action plans and practical steps for easy implementation.

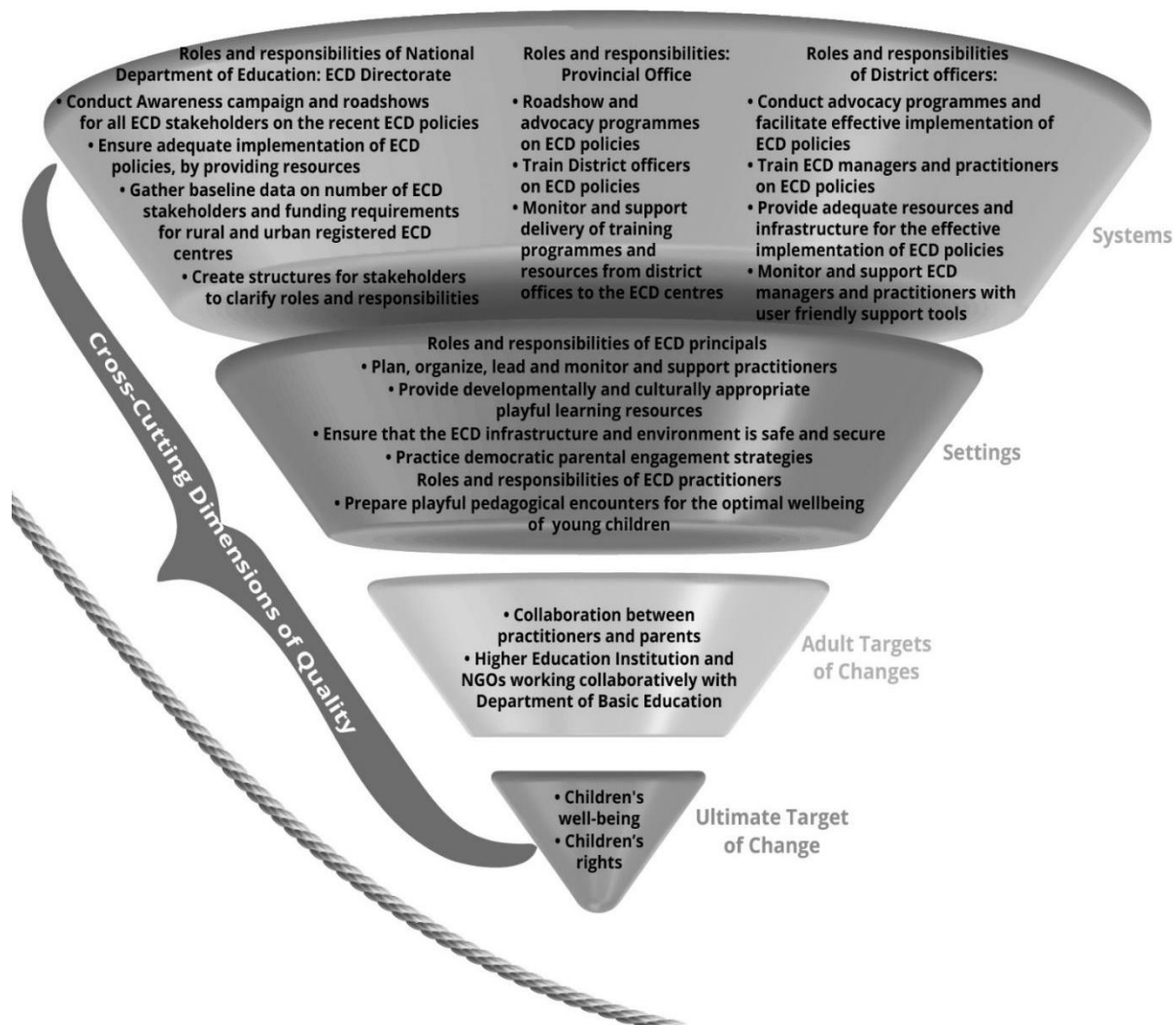
The metaphor of a spinning top, with the string being open communication and working collaboratively, uses the Britto et al. (2011) theoretical framework as a scaffold. The dimensions of quality in implementing ECD policies are revealed at the level of action of officials, principals, and practitioners. Advocacy, awareness, training, monitoring, dialogue and negotiation, infrastructure, registration of ECD centers, collaboration, management, and funding, are all important factors in harnessing quality in the ECD centers. The provision of quality ECD services was adversely affected by the socio-economic setting where young children grow up. For example, the quality provision of infrastructure and funding in the rural ECD center was jeopardized by the fact that it did not meet the infrastructure requirements of the DSD.

Participants at the national, provincial, and district offices showed confusion regarding their roles and responsibilities in implementing policy, perhaps due to the lack of communication opportunities to discuss effective ways of supporting ECD centers. The response of the national official who is at the top level of developing policies showed that there are structures in place to enhance interaction; however, consultation and dialogue among stakeholders are missing and would not create an enabling environment for the development of young children. Consequently, quality early childhood care is compromised at the ground level – that is, at ECD centers.

From the top level to the ground levels, the framework calls for all ECD stakeholders to understand their roles and responsibilities. Continuous feedback between the different levels of stakeholders to ensure coherence and progress in implementing ECD policies would assist in achieving quality in ECD. Identifying challenges through standardized tools for support and monitoring would assist in the early intervention of possible problems. Working together and open communication is the string that spins the ECCE policy implementation top.

Figure 2.

“Unblocking the system for effective ECD policy implementation”, Ecological settings, system levels and cross-cutting quality dimension.



(Adapted from Britto et al., 2011)

CONCLUSION

Government departments work in silos, but Britto et al.'s (2011) model unlocks ways of working collaboratively to implement ECD policies to provide quality ECD services for young children to develop holistically. The uniformity of understanding ECD policies and interaction among ECD stakeholders across all levels – national, provincial, district offices, and ECD centers – was examined to identify challenges faced in implementing ECD policies in South Africa. The study reveals that policy misunderstandings and communication barriers at the top levels hinder the implementation of curriculum in ECD centers. Furthermore, the national officials did not have adequate manpower to monitor and support the policy developmental implementation roll-out plan.

The study recommends that national officials should take the lead in developing support and monitoring systems with standardized tools. In addition, they should create forums for dialogue and bi-annual or quarterly seminars for all levels in the hierarchical ECD system to discuss progress and barriers in implementing ECD policies. It has become urgent for the DBE to collaborate with higher educational institutions and work together with all levels in the department and ensure that ECD principals and practitioners are trained in effective pedagogy, leadership, and management of ECD centers and receive more funding for resources. All ECD departmental officials should also receive training for the effective monitoring and support of ECD centers to ensure the well-being and success of our youngest citizens, the babies, toddlers, and young children.

Limitations

The study involved purposefully sampled participants from the Gauteng province in South Africa, specifically, Department of Education officials, ECD center managers, and practitioners. Since this is a qualitative study, the sample has limited statistical robustness and, as a result, cannot be generally applied to a larger population.

In addition, the study focuses on the perspectives of sampled participants and overlooks other ECD stakeholders, such as the DSD, policy experts, non-government organizations (NGOs), and community-based organizations (CBO) which could have enhanced the study's overall understanding.

Given the potential variability in the findings across different provinces, it is recommended to conduct further research in other areas and stakeholders to facilitate a comparative analysis of results.

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