Perceptions of Up-scaling Community-based Sites to Provide Reception Classes in South Africa

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ABSTRACT The present paper reports on the perceptions of Community-based Early Childhood Development service providers regarding progress and challenges in the provision of reception classes. It discusses data generated by means of narratives and in-depth interviews using a qualitative research design. Practitioners and managers from Community-based Sites with reception classes together with district officials in different districts participated in this study. The Community-based Sites that are registered safe guard the continuity of education programmes from these sites to schools thus, addressing the issues of segregation. Barriers identified as impacting negatively on the up-scaling of Community-based Sites included the slow progress made in registering centres and managers with matriculation as their lowest qualification seemed to understand the prospects of up-scaling Community-based Sites as they were starting to shape their careers in an attempt to embrace the concept of up-scaling. They extended their studies, registering their centres and in turn empowered by the departments. In addition, having retired teachers presented an interesting dynamic in this research, introducing a viable group of Community-based managers. These retirees can be a cornerstone of early learning education reform.

INTRODUCTION

Community and Home-based Centres remain fundamental to the development of early learning globally. Practitioners and managers of these centres are in the forefront of ensuring the first step of a literate society. According to the National Development Agency (2012), Community and Home-based Centres have been crucial in providing access to Early Childhood Development (ECD) programmes to 1.2 million children and continue to be the backbone of Early Childhood Development and provisioning in South Africa. As the demand for quality Early Childhood Education continues to intensify, the Department of Basic Education in South Africa has an obligation to transform a model of schooling which has been effective in providing education from the stipulated age of admission from the first grade to grade 12, to accommodate early learning.

In response to a call for quality early learning the Education White Paper 5 (South Africa 2001) proposed the incorporation of Community-based Sites into the public system of the provision of the reception year, in cases where the public primary school option is not available. Most Community-based Centres cater for children from 0 to 6 years, such centres usually have a reception class for learners aged 5 to 6, which is regarded as a Site when it is registered with the Department of Education. In order for the Community-based Sites to be fully incorporated they are required to fulfil the National Policy and norms and standards on the provision of reception year programmes. The possibility of up-scaling the Community-based Sites as part of public ECD provisioning of the reception class lies with the development of such sites, and the pre-requisite is their registration so as to regulate their services.

However, there are a myriad of challenges of up-scaling, starting with the phase of registration of Community-based Sites moving at a snail's pace. According to a national audit by UNICEF (2005) there were a total of 23,482 formal and unregulated ECD sites, which catered for 1,030,473 children in 2000. This huge number of children (16 percent of the child population) became part of formal schooling after 2000. The challenge of unregulated ECD centres still continues as the preliminary findings of an audit

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conducted in 2013 released by the Department of Social Development (2014) still portray a bleak picture regarding the number of unregulated centres. According to this report, of the 19 971 ECD centres that were audited; only 50 percent were registered with either the Department of Social Development or the Department of Basic Education. The complexities in up-scaling remain despite the increase in funding for ECD to R335.2 million in 2013 compared to R12 million in 1995 and the funding increase to R474.7 million by 2015 (Department of Basic Education 2013).

The potential benefits of up-scaled Community-based Sites include curbing the soaring inequality in the ECD provisioning, thereby allowing access to a recognised curriculum that will provide the necessary stimulation and thus, enhance school readiness. It is therefore not surprising that central to the debates on regulation of Community-based Sites are the issues of provision of education and care and the dangers of focusing on one and neglecting the other. According to the Centre for Community Child Health (2007), the delivery of distinctive service types offering either 'care' or 'education' programs has continued, regardless of the evolving needs of children and how this may affect their learning in subsequent years. The Centre for Community Child Health (2014) highlights the positive impact of involvement in caring learning frameworks on predicting performance and long-term development for learners who participated in such programmes.

Prior to 1994 most studies conducted in ECD in South Africa evaluated the provisioning of ECD (UNICEF 2005; Giese et al. 2011; Feza 2012). Biersteker (2012) and Artmore (2013) conducted research on access to ECD while Shumba et al. (2014) focused on parental perceptions on ECD provisioning. Internationally the Center for Community Child Care Health (2007) did research on care and education while Berg (2014) investigated children's activity levels in early years. There are no studies conducted to explore the perceptions of Community-based Centre ECD providers regarding up scaling sites in their centres to be part of an official system of providing the reception class.

Concepts of up-scaling Community-based Sites are complex especially in relation to disadvantaged communities as they are dependent on infrastructure, qualified practitioners, and the inclination of the Community-based Centre manager to participate in the processes of registration and effective management of the centre to safeguard sustainability. Up scaling Community-based Sites in this research refers to a process of not only identifying and including but also of developing all Community-based ECD Sites offering a reception class into fully-fledged early learning centres, thus providing both education and care to all learners. There is a growing body of literature advocating for integrated education and care services for the reception class pointing to the positive impact and longterm consequences in children's development (Peisner-Feinberga et al. 2014).

The present paper seeks to contribute to the debate on the prospects and challenges in upscaling Community-based Sites offering reception classes. A discussion of a current policy context in ECD in South Africa is provided in relation to matters pertaining to the reception class and challenges in the implementation of these policies in redressing inequality in Early Learning provisioning especially in disadvantaged communities is presented.

Current Policy Framework for ECD in South Africa

The decade from 1994 to 2004 had witnessed evolution and on-going inter-sectoral development of new policies and strategies aimed at meeting the needs of children. The picture portrayed in the developed ECD policies in South Africa reflects broader global thinking indicative of countries such as United States of America, United Kingdom, Canada and Australia reflecting ad hoc model with its focus between nursery and welfare. The term Edu-care (indicated in this research as education and care) was thus adopted, heralding a change in the ideological belief of mere child minding to taking real care of children by providing them with safe, nurturing learning environments that are educationally stimulating (South Africa 2001). The policies discussed below give direction to Community-based Sites in terms of provision of reception classes.

Policies by the Department of Education

The White Paper on Education and Training of 1995 had a mandate to transform education. South Africa was, during this period, also transforming the education system in terms of input equalization which translates to learner educator ratios, funding and process transformation leading to policies and curriculum change. According to this White Paper, the Department of Education had a particular responsibility for the education components within an integrated ECD strategy.

The Interim Policy for Early Childhood Development (South Africa 1996) provides for children at schools, namely, all 5 to 6 year olds in Community-based Centres and those that are at risk (0-5years) of experiencing barriers to learning a situation that could adversely affect their academic performance. The future plans were to have two categories of provision, for all children over 5 years in the school system; and for children at risk under five. The Interim ECD Policy document (South Africa 1996) indicated that lack of access was attributed to racial disparities that were evident, with one in three White infants and children receiving ECD services. There was therefore a need not only to address the inequities of the past, but also follow global trends leading to transformation in education as a whole.

The White Paper 5 on Early Childhood Development (South Africa 2001) paved a new way, focusing on the birth to 6 years age cohort, with an emphasis on educational provisioning and phasing in of Grade R (reception class) as part of the schooling system. The implementation of this policy exhibited a strong commitment to extending the care of young children into a framework of education and development as the Department of Education was mandated to register and fund Grade R services (Giese et al. 2011: 17). In relation to the birth to 4 years age cohort, the policy advocates a system of inter-sectoral collaboration in provisioning. Global recognition of the importance of ECD is thus, reflected in the efforts to provide structured, accredited ECD services, appropriate stimulation, nutrition, care and health services to pre-school children (Claessens and Garrett 2014). The phasing in of the reception class in schools was a major turnaround in the provision of ECD as 5-6 year olds were to receive formal education using accredited programmes progressing to the Foundation Phase. According to the Department of Basic Education (2011), the admission age for reception class has thus been changed to 4 years turning 5 by June in the year of admission. In this regard, the main goal of White Paper 5 on Early Childhood Development (South Africa 2001) was for all children entering Grade 1 to have participated in an accredited reception Year Programme by 2010. The universal enrolment target of 810 000 learners for the reception class could not be met by 2010 and was thus extended to 2014 (National Development Agency 2012). Research indicates that as much as progress has been made in reaching these targets: 620 223 were part of the reception class in 2009 (Department of Basic Education 2013) and 780 000 in 2014 the majority of children still lack access to these services. The intention for reaching the enrolment target according to Biersteker (2010) was to make the reception class compulsory by 2014, consequently, included as part of planned extension of free and compulsory 10 year education provision. Ghana in the sub-Saharan African Region was the first country with compulsory pre-primary education, starting from age 4 of kindergarten and mandated by a legislation passed in 2007/08 (UNESCO 2012).

Since the Department of Education had intentions of incorporating Community-Based Sites into the formal schooling system, it developed the Norms and Standards that the Community-based Centres have to meet including having a minimum of 27 learners in a site, a practitioner with at least matriculation, be registered with the Health Department, thus have an Non-Profit Organisation (NPO) certificate and also be registered with the Department of Social Development as a Place of Care. The district official responsible for checking if these requirements are met also focuses on whether the site is conducive for learning that is, has appropriate furniture for all the learners, enough space, ventilation and the toilets at the ratio of 1:20. In fact, the Community-based Centres can be the foundation and a corner stone of the education sector. Norms and standards for the Department of Social Development and Health are discussed in sections below.

The Curriculum Assessment Policy Statement (CAPS) (Department of Basic Education 2012) provides a foundation for quality learning and teaching for the reception class, with an emphasis upon three key factors namely, home language, Mathematics and Life Skills. The reception year class practitioners at schools were trained on the CAPS document in November-December 2011 to prepare them for its implementation in 2012. Such developments signal a shift towards the recognition of the reception class as the first grade of formal education. There is survey evidence that the majority of Community-based Sites are secluded from such advances. A study conducted in three provinces in 2010 brought out that: (1) about 14 percent of registered Community-based Sites offered schooling for the reception class only; about 30 percent offer only pre-reception class, with the rest offering both (Department of Basic Education, Department of Social Development, UNICEF 2011). Research results raise concerns with issues of education inequality, if the aim is to achieve education equity and provide the best possible start for all learners, then preferential allocation of resources undermine such efforts.

Policies by the Department of Social Development

The Social Welfare Department in South Africa came up with a White Paper for Social Welfare (South Africa 1997). According to this policy disadvantaged children under five years of age are the primary target for ECD services as they are considered to be the least serviced and the most vulnerable group. The Department was mandated to register ECD programmes and develop appropriate national standards which would be flexible in order to apply to a wide range of circumstances. The Department of Social Development (DSD) provides guidelines for Early Childhood Services (2006) indicating the minimum standards to be met by centres in order to be registered as Places of Care, the Norms and Standards Community-Based Centres have to adhere to include:

- Children with special needs in programs/ activities according to their abilities;
- Designing, documenting and implementing structured daily programmes/activities;
- Having health programmes adhering to policies, procedures and guidelines which must include practices aimed at preventing the spread of contagious diseases, having appropriate toilet and bathing facilities according to the different age groups, having sufficiently covered potties where there are no sewerage facilities and having nutrition programmes; and
- Having safety programmes adhering to policies, procedures and guidelines to en-

sure that children are supervised by an adult at all times, children are not punished physically and to ensure that all in-door and out-door programmes/activities are supervised.

The guidelines pertain to health and safety and active learning that is inclusive of all learners. It becomes imperative for centres to register with the DSD so as to access funding which is fundamental for their progress and permanence. The Norms and Standards are a first step in having strategies in place to facilitate the process of registering ECD centres in the community as Places of Care. According to a report by the National Institute for Higher Education (2011) challenges in registration of centres can be attributed to inability of centres to meet the stated standards.

Policies by the Department of Health

The Department of Health came up with the ten point plan of Health Sector Strategic Framework 1999-2004 aiming to improve access to health care for all. Free Health Care Policy (South Africa 1994) was developed to ensure access to public health services for children less than six years of age. The Strategic Plan for HIV and AIDS 2000–2005 which prioritises prevention, treatment, care and support, research and human and legal rights of children was also developed. The policies mentioned in this discussion are not ECD specific but their inclusion is justifies by the fact that the Department of Health is mandated to provide health care to children 0-9 years. The National Integrated Plan also requires an inter-departmental and inter-sectoral system for it to be realised.

The National Integrated Plan

The National Integrated Plan (NIP) model is not unique to South Africa as many countries around the world have developed national intersectoral ECD policies and legal frameworks according to Neuman and Devercelli (2012). It was only in 2005 that a lead agency or "institutional anchor" was established to coordinate ECD efforts horizontally. The NIP for ECD in South Africa (2005–2010) was developed to bring greater synergy and coordination to current government programmes undertaken by various departments to the benefit of 0 to 4 year olds.

UP-SCALING COMMUNITY-BASED SITES

The inclusion of information about NIP in this discussion is based on its priority to create an environment and opportunities for all children to have access to safe, accessible and high-quality ECD programmes that include a developmentally appropriate curriculum. Although the NPI spells out the details of the time frame and specific activities to be implemented, as well as the costs and funding arrangements (South Africa 2005) it lacks description on how the monitoring and evaluation of ECD programmes can be executed by three departments including education, health and social development. The unavailability of reliable statistics regarding the registered and unregistered centres by the Department of Social Development can be accredited to this shortcoming in the policy framework.

Against the backdrop of the foregoing challenges there was a need to investigate perceptions of Community-based ECD providers on the prospects and challenges in up-scaling reception classes as sites, thus be part of public provisioning of formal education.

RESEARCH METHODS

A qualitative exploratory approach was the method applied for this research. Narratives were used to provide insights on the perceptions of Community-Based ECD service providers on the prospects and challenges of up scaling their sites. My interest therefore was in the lived experiences of the interviewees in relation to the past, present and future changes in ECD provisioning. Data generation started with engaging the interviewees in narrating key events on how they developed over the years to meet the requirements of the different departments and how they perceived up-scaling of Community-based Sites. The individual in-depth interviews allowed me to delve into social and personal matters relating to the perceptions of up-scaling, thus allowing me to control the orientation, focus and sequence of the narrative (Butler 1997). This was an emergent design as the interview moved from being structural to a more conversant design, opening up later avenues for analysis not intentionally sought (Wright 2008). Sensitivity was applied to avoid distorting the information but participants were encouraged to reflect more deeply. Observation was made for all visited centres. To avoid pressure caused by limited scheduled time the arrangements with the participants was made three weeks before the date of the interview. Each interview lasted one hour.

Different types of coding were used in this research, firstly, interviewees were part of the analysis as in the narratives there were questions on their perceptions, secondly, the data was analysed using typologies which led to themes.

Background of the Interviewees

The provision of ECD services have changed since the development and implementation of White Paper for Social Welfare (South Africa 1997) discussed above. ECD centres in the community had been under pressure to register as No Profit Organisations and as Places of Care with the Department of Social Development (DSD). Registration is the only means of access to funding and of survival. Five Communitybased Centres participating in this research were registered as Places of Care, three had registered reception class sites, one in the process of registering and the other two were not. Two centres were in buildings that were owned and administered by municipalities before 1994, three centres were in spacious stands with neat shacks as classrooms and one was home-based.

Participants were purposefully selected, only practitioners of the reception class and their managers in Community-Based Centres who had been involved in ECD for more than 5 years formed part of this research.

The manager in centre one (CM1DBE) started the centre in 2006: she was a retired teacher with SPTD and a Further Diploma in Remedial education. There were 190 children in the centre 60 of them in the Reception class shared by two practitioners. Both sites were registered with the Department of Education in 2012. Both practitioners (P1aDBE and P1bDBE) had matriculation and were completing ECD level 4 sponsored by the Department. One of the practitioners was a male. The second manager (CM2DBE) started a centre in 2000 she had 160 children in the centre with one reception class of 27 learners. The manager was also a reception class practitioner as there was no one else in the centre that had done matriculation. She had matriculation, ECD Level 4 and was completing a National Professional Diploma in Education (NPDE) with the University of Free State. The site was registered and the manager was trained on CAPS.

The third manager (CM1DSD) had Standard 6 (Grade 8) a 65 year old lady who started the centre in 1972 with 120 children and a reception class of 15 learners. The reception class practitioner (P1DSD) had matriculation. The fourth manager (CM2DSD) also had Standard 6 (Grade 8) a 60 year old who started in 1978, she had 84 children, a reception class of 18 learners and a practitioner (P2DSD) with matriculation. Both reception classes were not registered. The fifth manager (CM3DBE) had PTC qualification, retired in 2000 and started a day centre. She had 130 children in the centre 34 of them were in the reception class which was not registered. The practitioner (P3DBE) had matriculation and an ECD Level 4 certificate. This centre is situated in a rural area. The sixth (CM3DSD) started in 1998 the manager a 40 year old had a matriculation and was completing NPDE. She was also a reception class practitioner, there were two other practitio-

ners who had matriculation in the centre. The practitioners and centre managers were from 2 provinces two different education districts in each of the provinces participated. A total number of five Community-based reception class practitioners (=5), centre managers (=6) and three district officials responsible for the Foundation Phase (one from each district) (n=3) participated. Participants were assured of confidentiality of their contribution and the excerpts from their narratives are indicated in codes according to their districts and the type of stakeholder (P = practitioner, CM = centre manager, DO = district official).

RESULTS

Progress with Registration

Both practitioners in DBE (sites registered with the Department of Education) indicated that they benefited from the integration of their sites. Centre managers indicated the importance of being recognised by community members as centres that were progressive. To them this was not only an achievement for the centre but also a personal one. The financial help they received from the department/s brought about relief and ensured stability and continuity of their centres. The officials indicated having registered very few centres in their districts.

"I am glad I managed to register, I feel proud of myself" (CM1DBE); "people in the communi-

ty trust us with their children, I no longer struggle to get help from the community". (CM3DBE); "most parents take their children to centres that are registered, they know them". (CM1DSD); the progress is slow, they do not understand the process"(DO1); "most sites do not qualify in terms of the number of learners or practitioners who do not even have matric"

The practitioners in DBE sites reiterated the financial support in terms of salary and the opportunity to further their studies and become fully fledged educators. Although practitioners in DSD centres were also happy about the stipend they wished that their centres were registered with DBE as there was a vast difference in the stipend.

(DO3).

"We get a salary like teachers at school, it's not much but good money" (P1DBE), "It is good to get money every month, before registration we all relied on the school fees, most of the time parents don't pay and sometimes they pay late" (P2DBE); "Practitioners in centres registered with education receive more money than us, when a centre is with education you have a chance of doing level 4 free, here you have to pay" (P3DSD).

Progress with Teacher Development

Two centre managers in DBE sites received training on financial management by the DSD as they first registered as Places of Care before registering with the Department of Education. All managers in DSD were trained on financial management.

"I know what to do when learners pay, I keep a record of the money I spend every day, the money for salaries is also recorded" (CM3DSD); "I was not recording money before I was trained, I would just spend it and the rest pay teachers" (CM2DSD); "I have to record every cent, even money I spend buying may be soap, these people just come anytime" (CM1DBE); "we are not trained by education, they are only concerned about the Grade R practitioners" (CM2DBE).

Of the six managers only two were studying, one from DBE site and the other from DSD centre were furthering their studies. Three practitioners were furthering their studies doing NQF level 4 qualifications. Practitioners from centres under DBE received two-day training for Curric-

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ulum Assessment Policy Statement (CAPS) in January 2013. In two centres where managers were also teachers of the reception class no practitioners were studying. In one of the latter centres (CM2DBE) practitioners did not have matriculation therefore did not qualify to teach the reception class according to the requirements of the Department of Education.

"I am doing NPDE with UOFS, the department wants us to study, I also love studying so I do not mind" (CM2DBE); "We were trained on CAPS.....last year: at least I know now what to do in class, but the assessment? that one is a problem" (P3DBE); "I am also a Grade R teacher, no one else qualifies here" (CM2DBE); "I wish I was in centres under the department, those people have a chance of studying, free, my friend is completing this year, at least there you have a chance of becoming a teacher, you get a salary" (P1DSD); "it is easier to work with managers that have an understanding, those with qualifications" (DO2).

Professional and Classroom Activities

Managers in both DBE and DSD centres were still responsible for the management of dayto-day activities of their centres. There was a difference when it accounted to the management of classroom activities. Managers in four centres (3 in DBE and 1 in DSD) felt that it was their responsibility to check and monitor classroom activities whilst in other centres manager relied on social workers who were monitoring classroom activities fortnightly. Two managers in the former category were retired teachers and the other two had matriculation and studying NPDE. The two managers in the latter category were not studying and had the lowest qualifications.

"this is my centre I have a vision for it, I want it to be the best" (CM1DBE); "Parents trust me with their children, I must know what is happening in the classrooms, I have to report to parents about the progress of children" (CM3DBE); "the social workers know what to look for I don't, why should I do their work? (CM1DSD).

Although the centres were using CAPS curriculum as their counterparts in schools, they were behind with the activities, some still finalising the work of the first term in the third term. Facilitators from the districts visited the centres to check on progress once, immediately after the training in 2013. Teaching in DSD centres was not aligned to CAPS and practitioners were motivated to do activities that stimulate learners cognitively.

"sometimes we are not sure of what to do" (P3DBE); 'I do not use these assessment forms, when they come I will ask them to show me how I can use them" (CM2DBE); "I do not want to rush children" (P3DBE); "we train practitioners only in sites that are registered" (DO1); "we monitor but it is difficult we also have to focus on schools" (DO2).

Challenges

Unannounced Visits by the Departments

Centre managers in DBE sites indicated that they were continuously under surveillance by the DBE, DSD and Health. Although they indicated that they were used to these visits, the fact that they were all unannounced was overwhelming. Centres under DSD were also monitored, participants indicated that the visits were weekly and they were also unannounced. Officials from Health also visited to check on the surroundings, toilets, cooking area and the number of learners in the centre. Each centre had a stipulated number of learners it can accommodate: centres were not allowed to exceed this number

"they are always here, we expect them at any time, but the people for Social are worse" (CM2DSD); "we always look out for them, the teacher next to the gate tells us if someone is coming and who that is, I have to be ready always" (CM1DSD).

There was a feeling of being overlooked by the DBE as their focus was only on the reception class practitioner, to the managers in two centres it was as if the officials no longer regard them as important as the reception class practitioners. The responses indicate that this treatment by DBE officials did not ogre well with managers and had created tension between them. Practitioners reiterated this, indicating that they felt excluded in some activities.

"when they come they just want to see the practitioner, I hate this, as if this one now owns the centre" (CM1DBE); "they only care about the Grade R practitioners" (CM3DBE); "they don't tell me when there are meetings, she doesn't pay me anymore, she say the money I get is enough"(P3DBE); "this is a major problem, they do not understand, it is the site that is registered not the centre" (DO2); "we are only concerned about the Grade R class" (DO1).

Vast Differences in Salaries

Another tension was created due to differing salaries. In DBE sites reception class practitioners were receiving a stipend of R5000.00 monthly: managers were complaining that the DBE was supposed to give them a stipend as well. They felt that practitioners undermine them because they were no longer their employers. Up and above the stipend that practitioners in town received they were also paid by the centre managers.

"I am also a practitioner so I get stipend" (CM2DBE); "now the practitioner earns more than I do, I started this centre I hired this person, this is strange" (CM3DBE), "it is a problem, we fight about this every month, she had to choose me because others do not have matric and now it is my fault" (P1DBE); "I have seen this happening, here I teach, I manage the centre, no problems, if I have more learners I will get people for younger ones" (CM3DSD); "another problem, you see you have to explain this every time, why it is the Grade R practitioner that gets a stipend" (DO2); "I think it is better in centres where managers are also practitioners" (DO3); "they don't understand, others end up not registering because of this" (DO1).

Fear of Losing Experienced Practitioners

Centre managers from both DBE and DSD feared losing practitioners, the latter to the former and both to schools. Centres manager in DBE indicated their fear of not only losing the practitioner but also financial support from the DBE. It would also mean re-registration as the newly employed will not have the qualification.

"you always think about it, schools are better, they love working there, there is nothing we can do" (CM2DSD); "it can happen but I employ mostly those who do not study, others who do not study cannot work at schools" (CM1DSD); 'she tells us to study, but you can see that she does not mean it, if I had matriculation I would not be here"(P1DSD); "there is nothing I can do to keep them here, I treat them well but then you will never know, I just tell myself that I will get others" (CM1DBE); "practitioners move to schools, managers also do that, they leave their centres with others, it is about money" (DO1).

DISCUSSION

The findings reveal both challenges and opportunities in up scaling Community-Based Sites to provide the reception class in South Africa. Some challenges have been highlighted in studies evaluating ECD provisioning, there is however a potential to develop and formalise the sector.

Inequality in Provisioning and Remuneration

The findings raise concerns about lack of uniformity in the programme provisioning even in centres that were registered with the Department of Education. The discrepancy was caused by insufficient training on Curriculum and Assessment Policy Statement (CAPS) and insufficient monitoring and support by district officials. Although the registered sites were aligned to the curriculum at schools centres under the Department of Social Development were not using CAPS. This finding resonates with other studies which drew attention to unequal provisioning of programmes in ECD. There is therefore, urgency regarding the registration of ECD sites with the reception classes in Communitybased Sites as a means of bridging this gap. Attending an early learning program is said to be beneficial for children's development, mostly for children from disadvantaged socioeconomic backgrounds (Bauchmüllera et al. 2014). Literature indicates that many children miss out due to lack of access and uptake (Bowes et al. 2011) or cost and quality (Coddington et al. 2014).

Vast differences in remuneration were a concern for all participants. Registering with DBE or DSD or both proved to be beneficial for centres in terms of financial support. Although financial assistance with salaries ensured continuity of the centres, it also posed a threat of a source of on-going conflict between DBE site managers and their reception class practitioners. Inability to resolve such conflicts could have a negative impact on relations and smooth running of the centre, thereby posing a threat to the gains made by the departments.

UP-SCALING COMMUNITY-BASED SITES

Prospects of Having Registered Sites

There seems to be motivation for studying in DBE sites as all reception class practitioners were furthering their studies. Evidence from practitioners in this study indicates that opportunities for further training organised at National Level were available for practitioners registered with DBE. The improvement in the Education system as a whole depends on the support for professional development. Research puts an emphasis on strong pedagogical content knowledge by practitioners for effective teaching and children's developmental outcomes (Harrison 2008).

The empowerment of centre managers in both the Department of Basic Education and Department of Social Development can be regarded as key to effective management of these centres and in ensuring that they remain feeders of primary schools in their communities. The DSD focused on financial management while the DBE on professional development of practitioners. The management style in all the centres was found to be autocratic due to their fear of losing practitioners and because of the stipend. There is a need for centre managers to familiarise themselves with policies pertaining to registration of Community-based Sites.

There are a number of retired teachers in South Africa, some took severance packages were offered to entice teachers to retire (Appleton et al. 2006), some teachers retire because of their inability to deal with the changes brought about by ever changing education curriculum, unattractive salaries and bad conditions of service leading to demoralisation (SACE 2011). The Community-based Centres managed by retirees were better managed and had registered sites.

CONCLUSION

The sample of this study was small so an emphasis on the findings cannot be placed. Besides this limitation and the exploratory nature of this research, the evidence can be used to extend the debate on ECD provisioning by including an angle of incorporation of ECD sites as part of provisioning of the reception classes. This paper therefore provides an understanding of the current situation regarding the registration of Community-based Sites. ECD providers were aware of the changes leading to up-scaling of sites, most practitioners and some managers regarded this as an opportunity to upgrade their qualifications so as to meet the requirements and become fully fledged practitioners recognised by the Department of Education. Some ECD providers made progress in registering their centres with the Department of Education to safeguard accreditation of their centres. However, it was difficult for some to either further their studies or even register their sites due to low levels of education.

RECOMMENDATIONS

The following recommendations are made based on the findings of this research. Lack of supervision by the Department of Education officials in registered sites was a major drawback: practitioners need all the support they can get to be on par with reception classes in Government schools. Grade R practitioners are trained and supported by district officials at schools to safeguard effective teaching and learning, the same must be done for Grade R sites in Community-based Centres to bridge the divide between Grade R learners in schools and those that are in Community-based ECD centres.

The registration of Community-based Sites is still new, unknown to many: there are misunderstandings and misconceptions about its process and intentions, a situation which if not dealt with can retard the progress. There is a need for the Department of Basic Education to disseminate information about the importance of registering ECD sites with the department. Centre managers need assistance in this process as the centres were not initially meant for formal education. Resources in up-scaled centres could be a problem without assistance from either the Department of Social Development or Education real progress in up-scaling will never be realised.

The finding about conflict in registered sites between the centre managers and practitioners necessitates urgent attention. It is the responsibility of the Department of Education to ensure that effective teaching and learning takes place in the community sites. It therefore becomes imperative to address issues that pose a threat of a source of on-going conflict. Information about the procedure in monitoring the sites and remuneration of practitioners need to be communicated with centre managers. It is also essential to compensate centre managers for accommodating Grade R learners in their centres as an incentive.

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