



IMPACT EVALUATION STUDY REPORT

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ACKNOWLEDGEMENTS

We would like to thank the ECD centres, day mother and playgroup facilitators supported by Assupol Community Trust (the Trust) for their invaluable insights and incisive inputs during the execution of the impact evaluation study. These have undoubtedly enriched the quality of findings and recommendations.

A special word of gratitude goes to the Trustees for providing strategic suggestions and propositions that will greatly position the posture of the Trust moving forward. Our engagement with them left us with an overwhelming sense that they care about the business of the Trust, they continuously apply themselves to analysing the operational environment, and that they have individually and collectively made a conscious decision to avail leadership and expertise to the Trust.

We acknowledge the guidance and stewardship provided by the CEO, Dr Vuyelwa Nhlapo. She continues to challenge both our thinking and observations and has provided the necessary institutional support to enable us to deliver on the brief.

We wish to recognise the sterling role played by the Trust partners in Gauteng and Kwa-Zulu Natal. The Umzinyathi District Municipality, uMsinga and Nquthu municipalities have respectively, provided unprecedented support to the ECD programme. Jointly, they represent one of the best models of partnerships that should be emulated throughout the country.

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As committed development practitioners, we wholeheartedly embrace the opportunity for being part of this incredible community of practice. In undertaking this assignment, we have observed noticeable change in our personal and professional development.

LIST OF ACRONYMS

ACT – Assupol Community Trust

CSI – Corporate Social Investment

DBE – Department of Basic Education

DSD – Department of Social Development

ECD – Early Childhood Development

EHP – Environmental Health Practitioner

LETCEE – Little Elephant Training Centre for Early Education

MOU - Memorandum of Understanding

NDA – National Development Agency

NDP – National Development Plan

NPO – Not for Profit Organisation

PPT – Project Preparation Trust

TREE – Training and Resources in Early Education

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EXECUTIVE SUMMARY

Assupol Community Trust (the Trust), is a was established pursuant to the scheme for the demutualisation of Assupol Life for the benefit of communities in geographical areas in which a substantial number of insurance group scheme members reside at the time of demutualisation

The establishment mandate of the Trust, as articulated in the founding Trust Deed, directs the Trust to contribute to social upliftment initiatives in three (3) designated areas, namely, Nellmapius (Gauteng), uMsinga and Nquthu (Kwa-Zulu Natal). Accordingly, the Trust intervenes in these areas through a comprehensive early childhood development (ECD) programme that seeks to deliver on two (2) primary goals, a) accelerate universal access for children 0-5 years, and b) ensure that children access quality ECD services.

These goals are implemented through the following strategic objectives:

1. To improve access to ECD services for children 0-5 years in Nellmapius, uMsinga and Nquthu.
2. To improve the quality of ECD services for children between 0-5 in Nellmapius (2 Wards), uMsinga (18 Wards) and Nquthu (17 Wards).
3. To facilitate compliance with basic standards of registration, health and safety in line with the Children's Act no 38 of 2005.
4. To promote good governance, partnerships and stakeholder relations in the City of Tshwane and Umzinyathi District.
5. To advocate for models that accelerate universal access to ECD for children 0-5 years.

The expected outcomes of the interventions are:

- Increased number of children accessing ECD services in Nellmapius, uMsinga and Nquthu.
- Increased number of children living in an environment of care, development, safety and security.
- Children performing better and being ready for school (health, growth and nutrition)
- Parents involved and supporting the development of their children.
- The City of Tshwane, Umzinyathi District Municipality, uMsinga Municipality and Nquthu Municipality prioritising ECD through funded programmes in their Integrated Development Plans

The Trust issued a Request for Proposals (RFP) to suitably qualified service providers to express an interest in conducting an impact evaluation study “to provide the Trust and its stakeholders with an independent reflective assessment of (its) work” over the period of implementation of the Strategic Plan of 2019 to 2022. The aim is to “ensure that the next strategy builds on lessons learned from the implementation of the Trust’s strategic objectives.

Nape Consulting (hereafter referred to as the service providers) was appointed in July 2022 to conduct the Impact Evaluation Study. The objectives of the study were articulated as follows:

- To assess progress against the objectives and outcomes of the strategic plan.
- To assess the financial and operational effectiveness of the Trust to deliver on its strategy.
- To provide recommendations to strengthen delivery of the strategy, including financial and resource requirements.

In undertaking the study, the service provider was expected to assess **impact, effectiveness, efficiency, sustainability and possible replication of implemented activities, achievement of planned results, programmatic and financial performance.**

The impact evaluation study was conducted using desktop reviews, interviews (phone/in-person/MS Teams) and field visits. The data gathering process consisted of semi-structured interviews, focus group sessions and key informant interviews.

It total, **107 respondents participated in the study.** This comprised a broad range of stakeholders including, **principals of ECD centres, training providers, local government representatives, Trustees and the Trust’s staff,**

The **key findings of the study suggest** that there is overwhelming evidence to support the view that the work of **the Trust has significantly impacted children 0-5 in the designated areas, namely, Nellmapius, Nquthu and uMsinga.**

The ECD intervention programme, in all its components, **has created an ecosystem of universal access, learning and stimulation, improved and compliant ECD infrastructure, qualified and competent ECD practitioners, healthy learners and empowered caregivers (including parents) who are able to sustain the investments (financial and human capital) made by the Trust between 2019 – 2022.**

The **construction and renovation of 88 ECD structures** in these areas represent fundamental transformation in the quest to improve access to ECD services to children 0-5 in largely impoverished areas.

However, the sustainability of the ECD programme requires close analysis and commensurate action. Although the range of interventions, such as supporting compliance with DBE/DSD registration requirements, ensuring that ECD practitioners are adequately qualified, elevating the role of local government in ECD and strengthening partnership, **the sustainability of the current investment needs to be further investigated and packaged to ensure long-term survival and impact.**

The impact of the 2019-2022 Strategic Plan is summarised in numbers:



82% achievement of performance targets.



5569 new children accessed ECD services.



6376 children received balanced and nutritious meals.



R63 739 796 spent on improvement of ECD infrastructure.



88 ECD infrastructure built and/or renovated.



73 ECD centres supported and registered as partial care.



58 children with disabilities accessed ECD services.



405 day mothers/playgroup facilitators recruited and trained.



258 day mothers/play group facilitators received stipends.



474 ECD practitioners trained.



143 ECD centres received learning materials.



211 ECD centres provided with PPE.



258 ECD practitioners received stipends.



191 ECD centres received funding for operational costs.



327 food gardens implemented at ECD centres.

The impact of the 2019-22 Strategic Plan has to be evaluated within the context of an operational environment significantly disrupted by the Covid-19 pandemic.

It is common knowledge that the pandemic resulted in **enormous strain on the healthcare system, rampant economic crisis, and food insecurity, inadequate shelter, increasing unemployment, social marginalisation and upheaval.**

The Trust had to suspend some of the planned outputs outlined in the 2019-2022 Strategic Plan due to Covid-19 lockdown regulations. Some of these key interventions included the **training of practitioners, provision of learning materials as well as the execution of awareness campaigns.**

Whilst we acknowledge the remarkable performance and impact of the ECD programme in Nellmapius, Nquthu and uMsinga, we would like to make the following **recommendations with the view of strengthening some aspects of strategy implementation and operations.** Detailed submissions are made in the relevant section of this report.

Recommendations:

1. Provide JAM porridge to funded and non-funded ECD centres in Kwa-Zulu Natal given that the levels of poverty in areas where the ECD programme is being implemented remain high and the fees paid by parents are grossly insufficient to cover the costs of nutritious meals for children.
2. Consider expanding the scope of the training and capacity building for practitioners to include disciplines such as entrepreneurship, business management, leadership, business plan and proposal writing.
3. Develop succession plan to create a pipeline of leadership, management continuity and internal capacity.
4. Commission the development of sustainability strategy and indicators for the ECD programme

5. Invest in evidence-based research to inform alternative models of delivery of ECD services.
6. Conduct a review of training and capacity building interventions to ensure that they are standardised and aligned to emerging global best practice in the ECD sector.
7. Strengthen information management system through a central repository to support effective knowledge management and reporting

In engaging with the Trust internal stakeholders, it became very clear that the implementation of the ECD programme has unearthed and distilled important lessons. A few deserve mentioning.

- Formal partnerships provide a better framework for collaboration, task allocation, scope management, resource sharing and institutionalised accountability.
- Effective programme execution requires adequate human capital and enabling tools of trade
- The “revolving door” phenomenon amongst ECD practitioners is a permanent feature within the ECD sector. It needs to be anticipated and factored into programme design.

1. INTRODUCTION

Assupol Community Trust (the Trust), is a registered public benefit organisation in terms of section 30 of the Income Tax Act of 1962. It was established pursuant to the scheme for the demutualisation of Assupol Life for the benefit of communities in geographical areas in which a substantial number of insurance group scheme members reside at the time of demutualisation.

The purpose of the Trust is to benefit designated communities in a non-profit, charitable manner with an altruistic philanthropic intent. In broad terms, the goal of the Trust is to contribute towards universal access to quality early childhood Development (ECD). This is achieved through the following strategic objectives:

1. To improve access to children between 0-5 years in Nellmapius, uMsinga and Nquthu by 2022.
2. To improve the quality of ECD services in Nellmapius, uMsinga and Nquthu by 2022.
3. To facilitate compliance with basic standards of registration, health and safety in line with the Children's Act no 38 of 2005 and Municipal by-laws in ECD facilities in Nellmapius, uMsinga and Nquthu by 2022.
4. To promote good governance, partnerships and stakeholder relations in the City of Tshwane and Umzinyathi District Municipality.
5. To advocate for models that accelerate universal access to ECD

The Trust issued a Request for Proposals (RFP) to suitably qualified service providers to express an interest in conducting an impact evaluation study “to provide the Trust and its stakeholders with an independent reflective assessment of (its) work” over the period of implementation of the Strategic Plan of 2019 to 2022. The aim is to “ensure that the next strategy builds on lessons learned from the implementation of the Trust’s strategic objectives

Broadly, the scope of work was:

- To assess progress against the objectives and outcomes of the strategic plan.
- To assess the financial and operational effectiveness of the Trust to deliver on its strategy.
- To provide recommendations to strengthen delivery of the strategy, including financial and resource requirements.

More generally, the purpose of the impact evaluation was to assess project design (Strategic Plan 2019-2022), its implementation and achievements.

Nape Consulting was expected to assess **impact, effectiveness, efficiency, sustainability and possible replication of implemented activities, achievement of planned results, programmatic and financial performance.**

The implementation and impact of the 2019-22 Strategic Plan have to be evaluated within the context of an operational environment significantly disrupted by the Covid-19 pandemic.

It is common knowledge that the pandemic resulted in **enormous strain on the healthcare system, rampant economic crisis, and food insecurity, inadequate shelter, increasing unemployment, social marginalisation and upheaval.**

The ECD sector was not spared from this unprecedented phenomenon in recent memory. The Trust 2020/2021 Annual Report comprehensively documents the impact of the pandemic on the ECD sector. These include the fact that:

- Parents stopped paying fees, resulting in ECD centres unable to generate revenue, pay practitioners and operational costs.
- Children were unable to access ECD services and consequently became reliant on parents to meet their developmental needs.
- The levels of hunger increased amongst children ordinarily enrolled in ECD centres.
- Covid-19 placed enormous compliance responsibilities on ECD centres, practitioners, day mothers and playgroup facilitators, including monitoring of body temperatures on regular basis, taking extra precautions with hygiene, handling learning materials differently and safe distances to prevent infections.
- Job losses for both parents and care givers resulted on the notable decrease in the number of children in ECD centres. It is important to point out that in line with the easing of lockdown restrictions and regulations, the level of enrolment gradually improved.

The Trust had to suspend some of the planned outputs outlined in the 2019-2022 Strategic Plan due to Covid-19 lockdown regulations. Some of these key interventions included the **training of practitioners, provision of learning materials as well as the execution of awareness campaigns.**

Similarly, children's opportunity to learn was severely disrupted. According to the reports received by the Trust, **a) parents and caregivers, especially in Kwa-Zulu Natal, were not equipped to stimulate their children, and b) some parents did not have access to radio and television – which are important platforms for teaching and learning.** This resulted in the majority of children lagging behind in development and learning.

However, the pandemic did create a momentum for the strengthening of partnerships. The Trust notes that “partnerships and stakeholder relations became stronger, and the sharing of information amongst stakeholders and other organisations became critical in ensuring a fair distribution of resources to all who were in need”.

2. CONTEXTUAL ANALYSIS

The Trust aims to contribute to the **National Development Plan (NDP) vision 2030**, with a specific focus on ECD. It aligns with the view that is articulated in the NDP that quality ECD services, especially for the most vulnerable, is a sustainable and cost-effective way of ensuring optimal development of children.

One of the Board of Trustees remarked that “this sector does not seem to attract critical resources from government and the private sector. We need to prioritise this area and ensure that our children are properly developed”.

The NDP (2012) enjoins government to make ECD a top priority measure to improve the quality of education and long-term prospects of future generations. Dedicated resources should be channelled towards ensuring that all children are well cared for from an early age and receive appropriate emotional, cognitive, physical development and stimulation.

The most recent and authoritative study on the state of ECD sector was undertaken by the Department of Basic Education (DBE) in partnership with the LEGO Foundation. The study entitled **The ECD Census (2021)**, made very instructive findings. These include the following:

- 60% of early learning programmes (ELPs) are urban, 40% are rural.
- 1.6m children are enrolled in ELPs.
- 40% of ELPs are fully or conditionally registered
- 42% of programmes are not registered with DSD
- 16% are in the process of registering
- 33% of ELPs stated that they receive a subsidy from DSD
- 69% indicated that fees were the main source of funding.

- 4% relied on donations
- 60% of ELPs have flush toilets.
- 52% of ECD practitioners have an ECD qualification at NQF level 4-9
- 27% underwent a relevant skills programme
- 22% do not have any relevant qualification
- 77% provide meals for learners

Within the context outlined above, the Trust took a strategic decision to contribute to the implementation of numerous policy interventions directed at improving access to quality ECD services in South Africa. The most notable policy published since 1994 has been the **National Integrated Early Childhood Development Policy 2015**.

The policy acknowledges that government has a responsibility to create conditions for the realisation of the right of every infant and child to develop “his or her potential to the maximum and extent possible, to become physically healthy, mentally alert, socially competent, emotionally sound and ready to learn – cognitively, socially, emotionally, physically and psychologically – to their full potential”.

It further sets out a framework for transformation of early childhood development service delivery in South Africa, in particular to address critical gaps and to ensure the provision of a comprehensive, universally available and equitable early childhood development services.

The purpose of the policy is to:

- Ensure the universal availability of, and equitable access to, early childhood development services through a national integrated system which is embedded within a coherent legal framework that identifies, enables and compels the fulfilment of early childhood development roles and responsibilities of relevant role players;
- Establish the organisational and institutional arrangements necessary to lead, plan for, implement, co-ordinate and monitor the provision of early childhood development and support;
- Ensure the provision of adequate public funding and infrastructure for sustainable universal availability of, and equitable access to, quality comprehensive early childhood development services, and;
- Establish appropriate monitoring, quality assurance and improvement systems to secure the provision of quality early childhood development services and outcomes to young children in South Africa.

The long-term goal is to achieve a “full comprehensive age and developmentally stage appropriate quality early childhood development programme, available and accessible to all infants and young children and their caregivers”. National Integrated ECD Policy (2015)

The policy directs that the following ECD services and support must be publicly provided:

- Parenting support and capacity development.
- Child-centred social security.
- Free birth registration.
- Health care.
- Food and nutritional support.
- Safe and affordable day care for children where parents are absent.
- Early learning support and services.
- Protection from abuse, neglect and exploitation.
- Play and recreational facilities.
- Inclusive and specialised services for children with disabilities.
- Early childhood development information.

The Trust strategic thrust aligns to government policy priority in ECD in that there is “overwhelming scientific evidence (that) attests to the tremendous importance of the early years of development and to the need for investing resources to support and promote optimal child development from conception. Lack of opportunities and interventions, or poor-quality interventions, during early childhood can significantly disadvantage young children and diminish their potential for success”. National Integrated ECD Policy (2015).

The policy asserts that the science is conclusive: investment in ECD yields lifetime development returns for the child, his or her family and society. Access to ECD has significant positive impact on a) the mental health and physical health of children and adults b) school enrolment, retention and performance; c) a stronger economy; d) inequality; e) poverty; and f) a safer and more inclusive society.

In relation to specific areas supported by the Trust, the policy articulates the following:

2.1. Nutrition at ECD Sites

The government commits to ensuring that by 2030, all infants and young children enjoy healthy physical growth, are well nourished and enjoy sustained access to nutritious food. It advocates a comprehensive multi-sectoral national strategy for children from birth until the years before they enter school aimed at eliminating stunting and malnutrition, reducing obesity and preventing hunger and food insecurity”

The objectives are:

- To increase access of infants and young children to adequate and nutritious food;
- To improve the knowledge of caregivers of infants and young children regarding good nutrition practices.

2.2. ECD Practitioners Training

Regarding skills and qualifications of practitioners, the policy strives to ensure that all caregivers, child-minders and practitioners across the continuum of early childhood development services have the knowledge, skills, infrastructure and materials necessary to provide quality support for children's early learning and development.

2.3. ECD Infrastructure Improvement

In respect of ECD infrastructure, the policy seeks to ensure that:

- There are secure, safe and accessible play, recreational, library and cultural facilities that are both inclusive and age and development stage appropriate in all communities, especially poor communities and under-served rural and informal urban communities.
- The design and development of play, recreation, library and cultural facilities programmes comply with universal principles of design to be accessible to infants and young children with disabilities.
- Local municipalities and the Department of Human Settlements make adequate provision in their human settlements, town planning and budgeting processes to secure universal availability and equitable access to play, library, recreational and cultural facilities.

2.4. ECD Compliance and Governance

The Children's Act No.38 of 2005 defines safety, quality norms and standards for ECD programmes. The 2015 ECD policy further expands these by making provision for the registration and control of safety and quality of services by child-minders.

It defines the role for local municipalities in:

- the accreditation and registration of child-minders with local municipalities to ensure the provision of safe, quality early childhood development services.
- developing differentiated norms and standards, which are appropriate to different services and programmes.

- ensuring management, oversight and support capacity, where necessary, with relevant departments and spheres of government to ensure implementation of the national early childhood development quality control and improvement system.

Further, the policy recognises the role of local government in ECD as articulated in the Municipal Systems Act No. 32 of 2000 and the Children’s Act No.38 of 2005. These pieces of legislation direct local government to:

- Provide basic services, including water and sanitation to communities.
- Develop policies and by-laws governing childcare facilities, including child minder services.
- Guide municipal planning, spatial development, including providing, and regulating land used for childcare facilities and for safe and adequate play and recreational facilities.

In conclusion, the policy provides a **framework for the regulation of the necessary partnerships** to ensure non-government organisations (**both profit and non-profit**), **support the realisation of government’s national integrated childhood commitments** and that all **services provided comply with government commitments**. It further stipulates “all responsible role players are required to commit to, and align their policies, laws, programmes and budgets to achieve the common national integrated ECD vision, goals and objectives.

3. METHODOLOGY

In determining whether the ECD programme in Nellmapius, uMsinga and Nquthu contributed to delivery on the primary objectives outlined in the Trust’s 2019 -2022 Strategic Plan, Nape Consulting **conducted both qualitative and quantitative assessment** of project outputs.

Broadly, the qualitative assessment involved the determination of the extent of benefits to recipients through in-depth interviews with key informants/respondents. This allowed us to broaden the scope of the assessment to explore the complexity of the intervention programme as well as an opportunity to triangulate different perspectives.

The quantitative assessment involved the **gathering of data to compare and quantify the achievements of performance targets**. The primary purpose was to **perform a before and after assessment** of progress and impact in respect of indicators outlined in the work plans for the period 2019 -2022(Please refer to Appendix A).

Specifically, the evaluation was conducted using desktop reviews, interviews (phone/in-person/MS Teams) and field visits. The data gathering process consisted of semi-structured interviews, focus group sessions and key informant interviews.

The table below represents the cross-section of key informants and stakeholders that participated in the impact evaluation study.

Name of Province	Stakeholder Description	Number of Participants	Data Gathering Method
KwaZulu-Natal (Nquthu)	ECD Beneficiaries	32	Focus Group
KwaZulu- Natal (uMsinga)	ECD Beneficiaries	35	Focus Group
Gauteng	ECD Beneficiaries	24	Focus Group
Gauteng	Inter-departmental Technical Task Team Smartstart Tlou Nayler Architects Early Care Foundation City of Tshwane (Building Control) Motheo Training Institute Trust City of Tshwane (Environmental Health) LMJ	8	Focus Group
Gauteng	Trustees Ms Taurai Muranda Ms Zibuyile Mbambo Mr Tebogo Malatji	3	In-depth Individual Interviews (MS Teams)
National	Assupol Community Trust Staff: Dr Vuyelwa Nhlapo (CEO) Ms Mmemme Makane-Sibanda(Programme Manager Gauteng) Ms Fundiswa Molefe	3	In-depth Individual Interviews (MS Teams)

	Programme Manager – KZN) Mr Chumani Maki (M & E Specialist)		
Kwa-Zulu Natal	Local partners Mr Skhumbuzo Shabalala (Nquthu Local Municipality) Ms Nompilo Ngcobo (Department of Education Mr Thokozani Nyandeni (Nquthu Local Municipality) Ms Zamajobe Sithole LETCEE)		Key respondent questionnaires

The study was implemented in three (3) distinct but complementary phases:

Phase One

- Consulted Assupol Community Trust CEO, Monitoring, and Evaluation Specialist to seek consensus on the scope of the impact evaluation study.
- Reviewed The Trust Strategic Plan 2019 -2022.
- Reviewed Work plans /Operational Plans for the period 2019 -2022.
- Established a small evaluation steering committee to provide technical support for the study, including but not limited to, compiling information.
- Developed and secure approval of data gathering instruments.

Phase Two

- Conducted individual key informants interviews (Chairperson of the Board of Trustees, CEO, Project Managers, M & E Specialist)
- Conducted focus group sessions with the ECD stakeholders and 92% of ECD centres supported in Nellmapius, uMsinga and Nquthu (All ECD centres were invited to participate in the focus group sessions).
- Conducted site visits to a sample of supported ECD Centres in Nellmapius, Msinga and Nquthu.
- Conducted focus group sessions with key strategic partners in Nellmapius, Nquthu and uMsinga (representatives from relevant municipalities, DSD etc)

Phase Three

- Produced a draft Impact Evaluation Study Report.
- Submitted and presented the draft report to the Trust’s management for review and input.
- Finalised the Impact Evaluation Report
- Submitted the final Impact Evaluation Study Report.

4. FINDINGS

4.1. General Findings

Overall, there is overwhelming evidence to support the finding that the work of the Trust has significantly impacted children 0-5 in the designated areas, namely, Nellmapius, Nquthu and uMsinga. Over the period under review, **5569 children were able to access centre based and non-centre based ECD services.**

The ECD intervention programme, in all its components, **has created an ecosystem of universal access, learning and stimulation, improved and compliant ECD infrastructure, qualified and competent ECD practitioners, healthy learners and empowered caregivers (including parents) who are able to sustain the investments (financial and human capital) made by the Trust between 2019 – 2022.**

4.2. Relevance

Within the context of huge disparities in respect of access to educational opportunities, the Trust’s overall intervention represents the most potentially impactful and singular intervention that carries the possibility of transforming the lives of young children. In the words of the Chairperson of the Trust, Ms Taurai Muranda, “to make an impact in the life of the child 0-5 is very important. Give every child a lasting chance and correct foundation”.

The strategic thrust of the Trust remains relevant and is substantively aligned to the broad policy objectives of government and the envisaged socio-economic outcomes. As the Chairperson further noted, “the areas that we are focussing on are adequate and sufficient”.

“The Trust has managed to bring together relevant stakeholders that have a huge role to play in changing the view of the importance of ECD in rural areas like Nquthu and uMsinga. More people are now acknowledging that ECD is important for the holistic development of the child” Nomcebo Zamajobe Sithole, Programmes Manager, Little Elephant Training Centre for Early Education (LETCEE).

4.3. Effectiveness

The programme in Nquthu, uMsinga and Nellmapius was implemented with a great degree of efficiency. Although it is important to note that there is varying degree of success regarding the different phases of implementation in designated areas, there is demonstrable evidence that there has been progressive improvement in the execution of interventions, particularly those that relate to infrastructure (new builds and renovations). It is clear from both the strategy and programme management, that emerging learning from the previous phases was clearly incorporated in subsequent interventions.

Despite challenges peculiar to Nellmapius, including but not limited to security of tenure, ECD infrastructure on private property, “consent use approvals” and the inadequate co-operation from the City of Tshwane, the programme was still executed effectively. However, there is no doubt that these challenges presented and continue to pose strategic risk to the efficient and sustainable implementation of planned ECD interventions.

Based on the challenges encountered in implementing the Nellmapius programme, one of the key respondents suggested that perhaps the Trust should focus on areas where it is able to deliver and realise immediate impact. The proposition did not find widespread favour amongst other respondents. In fact, the Chairperson of the Trust responded as follows, “I understand the sentiment, but the Trust deed directs us to work in those areas because of the value arising out of the demutualisation. We have to persevere. I do not believe that you abandon a project because it is difficult”.

This view was supported by another respondent who said the following:

“We need to be as equitable as possible. We have to adopt a rights-based approach to our work. Working in both urban and rural areas provides us with an opportunity to derive lessons and develop models that work”

4.4. Efficiency

One of the most notable successes of the programme has been the deployment of financial resources to achieve set performance targets. Comparatively speaking, **the average unit cost of R 600 000 – R800 000 to build a new ECD centre is remarkably competitive.**

As one local government official observed, “ACT uses minor resources to build compliant ECD centres. I would recommend that the municipalities learn a lot from ACT”

Similar structures built by government cost almost triple the amount invested by the Trust. Therefore, **the prudence demonstrated by management in allocating, deploying and monitoring the deployment of resources must be commended.** The net result of the cost-

efficient utilisation of resources is that the Trust is able to “stretch the rand” and redirect resources to other equally deserving intervention areas.

Most of the key respondents acknowledged the role played by the Trust personnel in discharging some responsibilities. “The officials are well trained to communicate with stakeholders. They have demonstrated that through the engagements with Amakhosi and municipal leaders”.

4.5. Impact

The impact of the Trust’s interventions in Nellmapius, uMsinga and Nquthu is indisputable. This is corroborated by both the physical and tangible review of outputs as well as anecdotal accounts of primary beneficiaries. In particular, **the construction and renovation of 88 ECD structures in these areas represent fundamental transformation in the quest to improve access to ECD services to children 0-5 in largely impoverished areas.**

“Through the help from ACT, most of our ECD centres in Nquthu showed some great improvements in terms of infrastructure, where mud structures were used. Children are now safe and secure with structures built by ACT. All the worries about learners being at the risk of falling into pit toilets are over now” Ngcobo Nompilo, Senior Education Specialist (ECD),
Department of Education (KZN)

The training of ECD Practitioners, has enormously improved the quality of teaching and learning at both centre-based and non-centre based sites. The practitioners expressed significant levels of confidence and competence in delivering occupationally relevant and age-appropriate ECD content. The progression is notably easy to track based on baseline assessments that were conducted before the respective training and the enrolment of learners.

4.6. Sustainability

The sustainability of the ECD programme requires close analysis and commensurate action. Although the range of interventions, such as supporting compliance with DBE/DSD registration requirements, ensuring that ECD practitioners are adequately qualified, elevating the role of local government in ECD and strengthening partnership, the sustainability of the current investment needs to be further investigated and packaged to ensure long-term survival and impact.

5. SPECIFIC FINDINGS

5.1. Awareness Campaigns

During the period under review, the Trust convened awareness campaigns in Nellmapius, Nquthu and uMsinga to profile the need for children 0-5 years to access quality ECD services. As previously indicated, this performance target was equally impacted by the advent of the Covid-19 pandemic.

The Portfolio of Evidence (POE) indicates that five (5) awareness campaigns were implemented during the period under review. Management has reported in other documents that six (6) campaigns were executed. The difference in the reported figure is attributable to the absence of corroborative evidence, in the form of attendance register that could be presented for review and validation.

Whilst the non-submission of evidence relating to this key performance indicator (KPI) is insignificant in the broader scheme of things, it highlights the need to create and maintain a robust, credible and comprehensive information management system to preserve and store performance information.

5.2. New children accessing ECD services in Nellmapius, Nquthu and uMsinga

As recorded in other parts of this report, the Trust contributed immensely in improving access to ECD services for children between 0-5 years. Building on a 2019 baseline of 4740 children accessing ECD services in the targeted areas, **the Trust was able to record a phenomenal increase in the number of children, rising to almost 5569 by the end of February 2022.**

This is despite the fact that there was a significant drop in the number of children accessing ECD sites during Covid-19 lockdown and the fact that it was practically impossible to collate the necessary data during this period.

As the Trust Annual Report 2021/22 notes, “as a result of the closure of the ECD facilities during the lockdown and suspension of activities like awareness campaigns, gains achieved in the previous years were significantly lost, impacting negatively on the achievement of this objective”.

However, as the lockdown restrictions were gradually eased, particularly in the latter part of 2021, the Trust observed, “67% rise in attendance over the previous year, though this is measured of a base lowered considerably by Covid-19. An interesting component of this increase (related) to non-ECD centre attendance. A number of parents and particularly of children with disabilities, prefer to enrol their children in smaller, more intimate environments, such as with day mothers, who typically look after around six children or with playgroup facilitators, who look after 10-15 children” Trust Annual Report 2021/2022.

5.3. Children with disabilities accessing ECD services

One of the most enduring legacy of apartheid has been the exclusion of people with disabilities from mainstream social and economic life of society. Cognisant of this historical injustice and the need to promote equitable access to ECD services, the Trust took a strategic decision to pay specific attention to children with disabilities.

In total, **58 learners with disabilities were targeted to receive ECD services. This output was achieved** during the period under review and is fully supported by submitted POE.

5.4. Day mothers/playgroup facilitators recruited

In delivering on the strategic objective of promoting universal access to ECD services, the Trust implemented non-centre based ECD interventions through the recruitment and training of day mothers and playgroup facilitators. The original plan was to recruit and train 405-day mothers and play group facilitators. As at the end of February 2022, **405-day mothers and playgroup facilitators were recruited and trained.**

“The Trust initiated a day mother model and playgroups as part of non-centre based ECD model in order to increase access to ECD services particularly for those children who could not be accommodated in the ECD centres”. When fully implemented, the scope and nature of interventions include **parent support programmes, outreach programmes, playgroups, child minders, toy libraries and mobile programmes.**

5.5. Day mothers and playgroup facilitators paid stipend

Covid-19 lockdown and attendant regulations placed enormous financial and emotional strain on the day mothers and playgroup facilitators. Given that this category of caregivers do not receive any subsidy from government, the payment of stipends during this period mitigated livelihood hardships occasioned by the lockdown restrictions. **The Trust paid an amount of R774 150 to day mothers and playgroup facilitators during this period.**

Apart from the stipends acting as stopgap measure for day mothers and playgroup facilitators, the secondary benefit has been that the nucleus of the community of practice was strengthened during this period to withstand external economic shocks, and foster continuity beyond the Covid-19 lockdown restrictions.

5.6. Toy libraries established in Nellmapius, Nquthu and uMsinga

The Trust included a deliverable on toy libraries as part of KPIs in the 2019 Strategic Plan. Given that toy libraries require physical exchange of learning materials and objects, the Trust decided to suspend delivery on this KPI given the restrictive Covid-19 operational environment.

Accordingly, the Trust did not initiate or establish any toy library during the period under review. However, this deliverable has been prioritised for subsequent years of strategy implementation. This will hopefully optimise existing interventions aimed at maximising access to ECD services for both centre and non-centre based initiatives.

5.7. Database of children with disabilities developed.

A database of 58 children with disabilities was developed. Based on the pro-active identification of the children, a targeted intervention programme was designed and implemented. Consequently, these children were linked to centre-based and non-centre based ECD sites.

5.8. Non-funded ECD centres supported for operational costs as part of Covid-19 Relief Plan.

Covid-19 significantly impacted the implementation of the 2019-2022 Strategic Plan. “The Trust responded to the impact of Covid-19 on the ECD centres by ensuring that their operational expenses were covered in the form of relief. The Trust targeted to pay operational costs to 197 unfunded ECD centres in Nellmapius, uMsinga and Nquthu.

Based on empirical assessment of the situation on the ground, the Trust **supported operational costs for 191 non-funded ECD centres instead of the planned 197. Remarkably, six ECD centres in KwaZulu Natal became fully registered and qualified to receive funding from DSD.**

The Covid-19 relief was a strategic and necessary intervention. It kept most of the non-funded ECD centres afloat. This decision assisted in building institutional resilience as well as protecting some of the investments already made. It enabled the ECD centres to achieve meaningful compliance to realise the broad intend of full registration.

5.9. ECD practitioners supported with stipend as part of Covid-19 Relief Plan.

Staying with the Covid-19 theme and associated implications, it became very clear that the prolonged lockdowns impacted negatively on the livelihoods of ECD practitioners. The absence of a coherent government plan to deal with the emerging situation became very

apparent. **The Trust paid stipends to 258 ECD practitioners as part of Covid-19 Relief Plan.**

In as much as the payment of stipends was to alleviate short-term financial challenges, the medium to long-term benefit has been that the Trust was able to contribute towards the retention of ECD practitioners within the sector. Most principals commended the Trust for taking this decision as it demonstrated the “human face” of partnerships and mutual co-existence.

5.10. ECD practitioners, including day mothers and playgroup facilitator’s trained/capacity building.

In line with the strategic objective of improving the quality of ECD services, the Trust has invested substantial resources in **improving the qualifications of practitioners, day mothers and playgroup facilitators** as well as providing **training that will enhance the institutional capacity of ECD centres.**

Between 2019 -2022, **474 ECD practitioners acquired NQF Level 4 ECD qualification** (Further Education and Training Certificate: Early Childhood Development- Qualification ID 58761) and Classroom Practice Workshops conducted by Training and Resources in Early Education (TREE)

The content of the National Qualifications Framework (NQF) ECD Level 4 Training included

- Communication Literacy.
- Mathematical Literacy.
- Second Language literacy.
- ECD learning programme design and the learning environment in ECD playroom.
- Optimal health, safety and care in the provision of ECD services.
- Facilitating holistic development in the ECD playroom.
- Working with families and communities to support ECD.

As part of strengthening, the institutional capacity of the ECD centres, the practitioners and supervisors received training in **NPO Governance, General Management, Financial Management, Community Development, Resource Mobilisation and Conflict Resolution.** The National Development Agency (NDA) conducted these training workshops. LETCEE also facilitated training of **playgroup facilitators.** The practitioners have also received **training in toy making** from recycled materials to maximise learning resources.

The formal training in ECD has significantly enhanced the capacity of practitioners to render quality ECD learning programmes – leading to improved cognitive and physical stimulation of children. According to practitioners, their self-confidence and “marketability” have enormously been enhanced by the qualifications that they have acquired.

Improvements in practitioner training are anticipated to contribute to positive impact in the overall educational levels in targeted communities.

In the focus groups, most of them have attested to the difference in the quality of content and learning methodologies imparted during the training programme supported by the Trust.

In amplifying the need to revisit content, some of the key respondents have proposed that some of the areas mentioned below need to form part of the core curriculum. These include:

- Psycho-social training
- Mathematical games
- Kindergarten poetry

Indoor games Artwork, including painting and beadwork. The training and related capacity building interventions undoubtedly resulted in multiplier impact in terms of content knowledge, personal and professional development.

5.11. ECD staff screened in Nellmapius, uMsinga and Nquthu

Within the context of the protection and safeguarding of children, the Trust resolved to screen ECD staff in supported areas. The purpose of the screening was to take preventative measures to mitigate the possibility of harm, neglect, abuse and exploitation of children.

Specifically, the screening involved undertaking criminal background checks to establish if any ECD staff had any convictions for an offence involving children/and or offence involving violence, dishonesty, illegal substances, indecency and any other conduct that was contrary to the values of the centre

During the period under review, **428 out of a planned target of 1414 ECD staff were screened in Nellmapius, uMsinga and Nquthu.** The deviation is primarily explained by the fact that during the Covid-19 lockdown restrictions, this activity was put on hold as a reasonable measure of limiting the transmission of the virus. This activity was reinstated towards the end of 2021.

5.12. Food gardens established in Nellmapius, uMsinga and Nquthu

Between 2019 -2022, the Trust had planned to **establish 285 food gardens in uMsinga and Nquthu**. Evidence reveals that this performance target was exceeded. **During the period under review, 327 food gardens were established in the targeted areas.**

The over performance is largely attributable to the partnership with the Expanded Public Works Programme (EPWP) in KZN which resulted in the identification and establishment of more food gardens.

5.13. Children fed and developing well (JAM Porridge)

The provision of balanced and nutritious meals is a fundamental requirement for the healthy growth of children. Apart from providing each ECD centre with start-up seedlings to grow own food, the Trust appointed and partnered with Joint Management International (JAM) to provide a corn-soya blend porridge supplement (JAM porridge). Each bag of 25kg can feed approximately 500 children.

According to JAM, each 50 grams of porridge is able to meet 75% of the child's micro and macro daily nutrient requirements. It consists of potent and fortified supplements including added vitamins and minerals. Apart from meeting the child's dietary requirements, the porridge improves the cognitive abilities and energy levels of children

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Between 2019 -2022, the Trust **supported 6376 children out of the planned target of 4790 from 81 ECD centres and 13-day mothers**. This is indeed a remarkable achievement given that most children come from very poor households and that JAM porridge was, in most instances, the only nutritious meal that children would have access to during the day.

There are competing views regarding the approach of the Trust in respect of providing financial support for the procurement of JAM porridge for both funded and non-funded ECD centres. The first contention is that given that the Trust operates within limited financial constraints, extending financial support to all centres may not represent the most frugal deployment of resources. This is further supported by the fact that funded ECD centres receive subsidy from government.

On the other hand, there is a compelling proposition that given that parents are unable to pay fees, subsidy disbursements are often delayed and that the overall amount is in any event insufficient to cover the full costs of running an effective ECD centre, the Trust runs the risk of reversing the gains achieved in contributing to healthy and balanced growth of children.

5.14. ECD centres supplied with learning materials.

Most ECD centres from Nellmapius, uMsinga and Nquthu received indoor and outdoor learning equipment as part of overall support from the Trust. The equipment consisted of educational toys, safe and durable outdoor playing facilities, indoor playing mats and fantasy “gadgets” such as stoves and cooking utensils.

In some centres, DSD and other partners provided outdoor playing equipment, tables, chairs, mattresses and blankets.

In total, **143 ECD centres received learning materials**. However, it is important to point out that this activity was suspended in 2020, as there were no children in earmarked ECD sites.

5.15. ECD centres supported towards full registration through new built and renovations

The improvement of ECD infrastructure represents one of the most tangible outcomes of the Trust’s programmatic interventions. During the period under review, **the Trust invested R63 739 796.00 in the construction and renovation of 88 ECD Centres in Nellmapius, Nquthu and uMsinga**. Typically, the new infrastructure consists of fully equipped two or three classrooms, an office, sick bay, kitchen, storeroom, and ablution facilities. Further, improvements include fencing and water tanks.

“Through infrastructure improvement, we facilitate and support ECD centres to meet norms and standards required to enable them to register with DSD, and eventually get funding from government” ACT Annual Report (2020)

The Trust contracted LIMA in July 2017 to implement an Infrastructure Improvements Project for ECD centres in uMsinga and Nquthu. The intervention focussed on delivering “appropriate infrastructural solutions” for 20 ECD centres in uMsinga and a further 20 centres in Nquthu. The total allocated budget was R15 189 510.

According to the LIMA Close-Out Report, “the process involved developing a range of suitable products, undertaking infrastructural assessments of the sites, infrastructure implementation, quality control and project commissioning”

The improvements can be categorised as follows:

Infrastructure Type	Description
New Builds	Classrooms (1-3), office, kitchen, and storage space in compliance with NHBRC, DSD ECD Infrastructure Guidelines (Norms and Standards) and inputs from the Environmental Health Practitioners (EHPs).
Renovations	Major and minor repairs, including floor screeds, window repairs, new doors and locksets; and roof fixing.
Water and Sanitation facilities	Suitable toilets, wash hand facilities (tippee-taps) and Jojo tanks.
Health and Safety	Fencing of entire ECD facility and waste pits, first aid and fire equipment.
Play Equipment	Outdoor play equipment.

LIMA constructed 12 New Builds in Nquthu and six (6) in uMsinga respectively. The unit design was a modular steel portal with a moveable partition system between the classrooms. The remaining 22 ECD sites required minor to major renovations. 14 ECD centres were renovated in uMsinga and the other eight (8) in Nquthu respectively. The report notes that “generally, the centres in Nquthu were in a worse condition prior to the intervention than uMsinga centres. This resulted in more new builds being required in Nquthu than in uMsinga. In addition, the centres in Nquthu typically had more attendance figures than uMsinga centres”.

The remaining structures were completed during phase two (2) of the infrastructure improvement programme.

Similarly, 15 ECD centres were earmarked for renovation in Nellmapius. The infrastructure improvement initiative encountered enormous challenges. These included municipal by-laws, security of tenure, as well as disputes between “facility owners” and contractors.

Overwhelmingly, the ECD centres appreciated **the infrastructure improvements** undertaken by the Trust. Generally, this was viewed as a practical expression of the Trust “investing in the future”. In summary, the principals and programme staff of the Trust expressed the following with regard to infrastructure improvements:

- The infrastructure improvements intervention enabled 73 ECD sites to achieve full registration.

- The new builds and renovated sites provided improved safety and security for children.
- Improved sanitation immensely contributed to observable positive hygiene practices amongst children.
- The improvements directly led to an increase in the enrolment of children, with some centres oversubscribed and exceeding permissible number of children as per their certification as partial care facilities.
- According to practitioners, the additional classrooms and age-appropriate separation of children yielded enormous benefits in the delivery and outcomes of learning programmes.
- Based on interviews with committee members, the new and renovated centres created renewed awareness of the importance of ECD in various communities.
- The project fostered better collaboration and co-operation between Environmental Health Practitioners (EHPs) and key stakeholders involved in infrastructure improvements.

The infrastructure improvement programme has resulted in 73 centres considered fully compliant, receiving the required health and safety certificates and registered as partial care institutions in line with the Children’s Act 38 of 2005.

5.16. ECD centres meet minimum requirements for registration

One of the Trust’s key strategic objective is to “facilitate compliance with basis standards of registration, health and safety in line with the Children’s Act 38 of 2005. Consequently, the Trust planned to assist 48 ECD centres to meet minimum requirements for registration.

5.17. ECD centres with ceiling boards installations in KZN

During its routine monitoring process, the Board of Trustees took a decision to install ceiling boards at the new and renovated ECD centres in KZN. Initially the ceiling boards were not installed as part of stretching the rand to cater for the bare minimum compliance requirements. It is commended that the Trust going forward has included installation of ceiling boards as part of the infrastructure improvement in the designated communities.

Over the past 24 months, **ceiling boards were installed at all 40 centres in uMsinga and Nquthu.**

5.18. ECD centres provided with PPE

The Covid-19 pandemic and the associated lockdown restrictions significantly impacted the operations of both centre-based and non-centre based ECD sites. The Trust noted that “the Covid-19 standard operating procedures and guidelines for the re-opening of the ECD centres stated that teachers and learners must have sufficient PPE. The unfunded ECD centres could not comply with Covid-19 health and safety standards because of their inability to afford the necessary PPEs. The Trust committed to support ECD centres, day mothers and playgroups in Nellmapius, uMsinga and Nquthu with PPE in line with DSD guidelines”

The Trust **supported 211 ECD centres with PPE** in Nellmapius, Nquthu and uMsinga. The range of support included procurement of **291 body infrared thermometers, disposable latex gloves, water soluble sanitisers, bar soaps, bleach, dishwashing liquid, masks, disposable paper towels, cleaning cloths disinfectants and nap sack sprayers.**

The supported centres were equally monitored for compliance to Covid-19 regulations.

5.19. Tool for monitoring compliance with DSD SOPs developed

Monitoring and evaluation (M&E) are an integral part of the Trust administrative capacity. Acknowledging that DSD has been the lead department in policy development, legislative oversight and support for the ECD sector, the Trust adapted the DSD tool on compliance monitoring to ensure uniformity and standardisation in data gathering and tracking of performance.

5.20. Project Steering committees meetings held as per annual schedule

Project Steering Committees (PSCs), established in terms of the Municipal Systems Act 32 of 2000 are an important oversight mechanism to foster joint planning, communication and reporting on programme performance.

Although the Trust **planned to convene 14 PSC meetings in Nellmapius, Nquthu and uMsinga, only five were convened.** The primary reason for this deviation is that the political and management instability at the City of Tshwane made it impossible to establish a PSC. All PSC meetings were convened and held in KwaZulu Natal.

5.21. Memorandum of Understanding (MOUs) signed with partners

Partnerships play a pivotal role in supporting the Trust to execute on its mandate. During the period under review, **seven MOUs were signed with a range of critical stakeholders, particularly in KwaZulu Natal.** These stakeholders include: Umzinyathi District Municipality,

Nquthu Local Municipality, the provincial DSD, the provincial DOH, NDA, Smartstart, and Participate, Envision, Navigate (PEN).

Broadly, the partnerships with the stakeholders enabled the Trust to deliver on some of the key outputs, with some costs carried by the implementing partners.

These partnerships were not an ad-hoc creation but a deliberate action based on the partnership strategy developed and approved during the period under review. Obviously, it is important moving forward, that the partnerships continue to be reviewed and maintained for impact and sustainability.

5.22. ECD sites effectively participating in ECD governing structures as a voice of local communities.

Governance and advocacy are central to the Trust's development philosophy of collaborating with communities. The Trust initiated Local ECD Committees as a strategic choice to amplify 'the voice of communities of Nellmapius, uMsinga and Nquthu on the Trust's Board. They comprised of six members (6) in each of the three (3) areas and they participated in the Trust's annual general meetings where they had voting rights"

The Trust **attended over 98 meetings as part of its continued support of and participation in local ECD structures.** These included ECD fora, PSCs as well as inter-departmental task teams comprising of government and non-governmental representatives.

5.23. Annual General Meetings (AGMs) conducted

Since commencement of the ECD intervention programme in KwaZulu Natal, the Trust has convened AGMs as an institutional platform for fostering effective governance, communication and knowledge exchange. **Since 2019, three (3) AGMs have been convened.**

5.24. Assupol Community Trust ECD Delivery Model developed and approved

The Trust commissioned the development of an ECD Delivery model as strategic support to improve planning, execution, monitoring and evaluation of interventions. A comprehensive document, with standard operating procedures (SOPs) and tools was developed and approved during the period under review.

The model was presented in various platforms as part of knowledge exchange and sharing of best practice. However, the Trust could not be expected to have control over the adoption and utilisation of concepts, procedures and tools advocated by the model.

5.25. Twenty (20) ECD centres piloting Grade R Childhood Education Model in the City of Tshwane

This performance target was not realised owing to the onset of Covid-19, which fundamentally disrupted the physical provision of ECD services. This target has since been reviewed to align with other practical considerations of delivering quality ECD services.

6. CONCLUSION

The ECD programme implemented by the Trust in Nellmapius, uMsinga and Nquthu has significantly enhanced access to ECD services for children 0-5 years. The improvement in the quality of services has resulted in demonstrable increase in the number of children enrolled at the supported centre-based and non-centre based sites.

The return on the Trust's social investment is evident. Empirical information and anecdotal evidence point to a results orientated social intervention that was carried out with precision, dedication and empathy.

"I think through determination and being goal achievement orientated, the Trust stood strong even during Covid-19 pandemic period in supporting the implementation of interventions in its identified ECD centres in Nquthu and uMsinga through day mothers and ECD trainees to conduct services. Also, the fact that its Board members availed themselves and they were visible on the ground in serving the area" Ngcobo Nompilo, Senior Education Specialist (ECD), Department of Education.

The ECD programme continues to be relevant. It elevates the strategic priority of building human capital that contributes to the development of our country. It is a seminal input towards reducing poverty and inequality in South Africa.

7. RECOMMENDATIONS

7.1. Provide JAM porridge to funded and non-funded ECD centres in Kwa-Zulu Natal given that the levels of poverty in areas where the ECD programme is being implemented remain high and the fees paid by parents are grossly insufficient to cover the costs of nutritious meals for children.

Based on the Trust's own observation, "the porridge provides 75% of the total daily nutrients intake required by each child, which means that even children from poor households will receive the majority of the nutrients they require."

The Trust needs to strike a balance between creating “dependency” as well as demonstrating responsiveness to the real concerns of its primary stakeholders.

7.2. Consider expanding the scope of the training and capacity building for practitioners to include disciplines such as entrepreneurship, business management, leadership, business plan and proposal writing.

The sustainability of the Trust social investment in Nellmapius, Nquthu and Msinga is largely dependent on individual and institutional capability to lead, attract and retain a cohort of competent practitioners who share the same aspirational values of improving universal access of children 0-5 to quality ECD services.

Given the changing landscape of ECD centres evolving from being purely charitable institutions to being, in some cases, businesses, it is important to equip practitioners with skills that will position the ECD centres and themselves for this new environment. This is an investment into the future.

Practitioners should be able to independently mobilise resources to enhance sustainability of their ECD enterprises. Therefore, the Trust should consider the proposed recommendation as part of a broader strategy of community empowerment as well as preparing the ECD centres for eventual exit

7.3. Develop succession plan to create a pipeline of leadership, management continuity and internal capacity.

Whilst it is indisputable that the Trust has delivered impactful interventions in targeted communities, largely due to effectiveness of the current leadership, it cannot be presumed that this will continue along the same line in the future.

Therefore, it is critical for the Trustees to institute a skills and competency audit within the Trust with the view of developing a leadership pipeline and succession plan that will take the entity forward beyond the term of the current CEO.

As one respondent remarked, “the difficulty with having a good person like her is that she may potentially leave very big shoes to fill. We need to assess the internal skills base and ensure that the organisation continues to have sufficient institutional memory”.

The Trust may consider a range of options over the next three (3) years including study assistance to improve the skills base, structured mentorship and coaching programme for

earmarked incumbents as well as going to market to identify a suitable successor if an internal candidate cannot be secured.

7.4. Commission the development of sustainability strategy and indicators for the ECD programme

The most recurrent theme during the impact evaluation study has been the key stakeholder views regarding the sustainability of the Trust's investment in Nellmapius, Nquthu and Msinga.

Whereas the issue of sustainability is uppermost on the minds of various stakeholders, there is limited evidence of a comprehensive attempt to develop an integrated strategy that is contextually relevant and flexible.

The Trust needs to define for itself what sustainability looks like (outcome), outline performance measures and critical success factors.

Various proposals have been put forward as possible interventions that can enhance the sustainability of the ECD programme. These include:

- Effective partnerships with municipalities, leveraging on legislative mandate to support the ECD sector, particularly on ongoing infrastructure maintenance.
- Formalise co-funding, training and development as well as technical assistance relationships with responsible government line departments.
- Collaboration with other funding agencies, which provide financial support to the ECD sector.
- Partnership with the National Lotteries Commission.
- Creation of income generation enterprises to support ECD interventions as a “public good”.
- Dedicated assistance in the form of an employee (Partnerships and Resource Mobilisation Officer) employed by the Trust to support ECD centres to mobilise funding from other sources.

Sustainability of the ECD programme is a very strategic issue. It requires dedicated investigation, clear roadmap, and specific role definition, collectively defined, and owned outcomes.

7.5. Invest in evidence based research to inform alternative models of delivery of ECD services

There is widespread acknowledgement that the priority intervention areas identified by the Trust continue to be relevant and aligned with the policy directives of government. The introduction of non-centre based interventions, including mobile toy libraries, is a welcome innovation.

However, the Trust has an opportunity to investigate global best practice in the provision of ECD services, particularly from countries that are considered pathfinders in this field, such as Finland as suggested by one of the respondents.

The harvesting of leading research in this area will undoubtedly position the Trust as a thought leader that is able to influence the trajectory of provision of ECD services in the country. This is a forward-looking approach, albeit uncharted territory, which may yield positive social dividend in the future. This is not a far-fetched proposition as the Trust is already considered a model implementation agent in the provision of solid cost competitive ECD infrastructure.

7.6. Conduct a review of training and capacity building interventions to ensure that they are standardised and aligned to emerging best practice in the ECD sector.

In engaging with various training providers, it became evident that the lack of standardisation introduces unique dimensions in the quality of training provided to ECD practitioners, day mothers and playgroup facilitators. Although this diversity may in itself be a major strength, it is crucial to harmonise content so that participants are exposed to the same knowledge and practices. The fact that most of the training is accredited is not a sufficient safeguard. We are all aware of ECD practitioners who attended ECD Classroom Practice training offered before joining the programme in Nellmapius, Msinga and Nquthu.

7.7. Strengthen its information management system through a central repository to support effective knowledge management and reporting

Whilst the Trust has discharged its mandate with remarkable distinction, the reported performance could have been enhanced if relevant supporting documents were stored properly and readily available.

The archiving of organisational data and information in different places does not optimise knowledge management and reporting within the organisation.

It is therefore, recommended that the **area of information management becomes a priority key performance area for the Monitoring and Evaluation Specialist.**

8. LESSONS LEARNED

8.1. Formal partnerships provide a better framework for collaboration, task allocation, scope management, resource sharing and institutionalised accountability.

All key respondents have commended the Trust staff for the steadfast approach to creating meaningful and mutually beneficial relationships. This was particularly evident in Kwa-Zulu Natal.

The implementation of the ECD programme went “relatively smoothly” in Kwa-Zulu Natal because of the relationship, which was forged with the Umzinyathi District Municipality, Nquthu and Msinga local municipalities respectively. All stakeholders appreciated the sense of ownership of the programme and committed financial and non-financial resources to scale-up interventions. As Nomcebo Zamajobe Sithole further noted, “Assupol Community Trust was able to bring together relevant people with the same goal in one room to be able to work together to achieve it. The buy- in from municipalities, DSD, DBE and ECD forums made it possible to support the implementation of ACTs interventions”.

The enormous challenges encountered in implementing the programme in Nellmapius are a direct consequence of the absence of institutionalised relationships and lack of demonstrable political will.

8.2. Effective programme execution requires adequate human capital and enabling tools of trade

The progression in the implementation of the various phases of the ECD programme clearly indicated the need to strengthen internal capacity for programme design, implementation and oversight.

The improvements in the quality of interventions is largely attributable to the employment of more and qualified project officers and other personnel. The purchasing of project vehicles has assisted in improving the quality and frequency of monitoring.

The net impact of this internal capacity building has seen better outcomes in the delivery of ECD interventions.

8.3. The “revolving door” phenomenon amongst ECD practitioners is permanent within the ECD sector.

The Trust has invested considerable resources in the training of practitioners. One of the most notable developments in the ECD sector is the mobility of practitioners as soon as they have been trained.

“Rotation of ECD practitioners is a South African challenge therefore, the Trust has accepted that this constitutes an inherent risk within the operational environment” noted Dr Vuyelwa Nhlapo, the Trust CEO.

Both the Chairperson of the Trust Ms Taurai Muranda as well as Mr Tebogo Malatji, a Trustee postulated the most instructive views on this matter. The latter noted that even if practitioners move within and amongst ECD centres, “training is not a lost investment. It is an investment in communities where they are. We are all pursuing the same objectives of improving access to quality ECD services”.

The lesson learned is that the Trust must continue to provide targeted and quality training to ECD practitioners. In as much as there are temporary setbacks in terms of high turnover and change of professional career, the Trust must continue to invest in the ecosystem of developing and enhancing ECD skills for the future.

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