

THE IMPLEMENTATION CHALLENGES OF THE INTEGRATED EARLY  
CHILDHOOD DEVELOPMENT (IECD) APPROACH AT EARLY CHILDHOOD  
DEVELOPMENT CENTERS IN WINDHOEK, NAMIBIA

A THESIS SUMMITTED IN FULL FULFILLMENT OF THE REQUIREMENTS  
FOR THE DEGREMASTERS OF EDUCATION BY RESEARCH  
(EARLY CHILDHOOD DEVELOPMENT)  
OF

THE UNIVERSITY OF NAMIBIA

BY

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## **ABSTRACT**

Like any other developing country in Africa and globally, Namibia is challenged with delivering Early Childhood Development (ECD) services as well as implementing the Integrated Early Childhood Development (IECD) approach. More importantly, various studies have indicated that for Namibia to obtain maximum benefits of Early Childhood Development, it is imperative that investment in human capital commences in the early years of child development. Hence, the need to invest in ECD is imperative. Due to the rapid incursion of people into urban areas with the hope of employment opportunities, Windhoek, the capital city has the highest and fastest population growth of all towns in Namibia. Moreover, people of reproductive age mostly migrate from rural areas to towns for employment opportunities and enhanced living standards. It is imperative to note that approximately half of the population in Windhoek live in informal settlements. Consequently, this has exert pressure on ECD service delivery regarding infrastructure, resources, and capacitated educators. Importantly, this has rendered a number of ECD centers potential risky areas of operation for young children as they scarcely receive the Integrated Early Childhood Development benefits.

This study explored the implementation challenges of the Integrated Early Childhood Development (IECD) approach at early childhood development centres in Windhoek, Namibia. In addition, a qualitative research design, with a phenomenological approach was employed. The data was collected over six weeks in selected ECD centres in Windhoek suburbs and settlements. A non-participatory observation was also conducted at the same ECD centres. More importantly, the study employed purposive sampling to select ECD centres and participants who matched the criteria of five years

or more of experience in ECD service delivery in their specific settlements and locations. Moreover, data was collected through observation by means of an observation checklist and interviews adopting semi-structured interview guides. Heidegger's interpretive phenomenological approach was adopted to analyse the data by establishing themes. The study revealed that there were major disparities amongst ECD centers regarding equity and quality of ECD service delivery, infrastructures, materials, as well as level of educarers/caregivers qualification. Equally important, numerous ECD service providers lacked knowledge about the IECD policy document and its approach. The study's findings further revealed that the children of affluent parents attended well-resourced ECD centers, with caregivers who were well-equipped to deliver the IECD curriculum. Despite the challenges, it is worth noting that the ECD service providers contributed to children's holistic development, at times without formal knowledge or training. The study concludes that for improved and satisfactory IECD service delivery, there is an urgent need for resource mobilisation and coordination at national, community, and centre levels. Furthermore, it is also imperative to adopt the inter-sectoral approach for well-coordinated programmes and sufficient funding. Finally, the Namibian nation should embrace the slogans: "Thrive by five" and "Make Every Child's First Step, the Right Step".

*Keywords: early childhood development, integrated early childhood, educarers, caregivers, service delivery.*

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## DEFINITION OF KEYWORDS

The definition of keywords and terms enables the reader to connect and comprehend the direction of the study and the context in which the terms are employed. The table below presents the definition of keywords and terms employed frequently in the study.

| No | Keyword/Keyterm                    | Definition                                                                                                                                                                                                                                                                                                                                                                     |
|----|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1  | <b>Caregiver</b>                   | A caregiver is an individual who provides care, support, and assistance to someone in need, such as a child, elderly person, or someone with some sort of disability. In the context of this study, a caregiver is an individual who takes care of children and performs activities that are geared to develop children holistically at an ECD center (Merriam-Webster, n.d.). |
| 2  | <b>Community</b>                   | A community refers to a group of people who live near each other and share common interests, morals, values, and goals. They often interact and work together to address or plan local issues and improve the well-being of its members (Oxford English Dictionary, n.d.).                                                                                                     |
| 3  | <b>Early Childhood Development</b> | Early Childhood Development (ECD) refers to the physical, cognitive, social, and emotional development of children from birth to around eight years of age. It encompasses various aspects, including education, health, nutrition, and caregiver support (Ministry of Gender Equality and Child Welfare, 2007).                                                               |
| 4  | <b>ECD manager</b>                 | An ECD manager is an individual who is responsible for overseeing the daily operations, administration, and management of an Early Childhood Development center or facility.                                                                                                                                                                                                   |
| 5  | <b>ECD owner</b>                   | An ECD owner refers to an individual or organisation that owns and operates an Early Childhood Development center or facility, providing various services and programs for young children.                                                                                                                                                                                     |
| 6  | <b>Educarer</b>                    | An educarer is a professional or specialised person who combines the roles of an educator and a caregiver, providing both educational and caregiving support to young children (Ministry of Gender Equality and Child Welfare, 2007).                                                                                                                                          |
| 7  | <b>Guardian</b>                    | A guardian is an individual who is legally appointed to take care of and make decisions on behalf of a child or someone who is unable to do so by himself or herself. They are responsible for the child's welfare and protection (Oxford English Dictionary, n.d.).                                                                                                           |

|    |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|----|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 8  | <b>Implementation</b>                                | Implementation refers to the process of putting a plan, policy, or program into action. It involves effecting the necessary steps and activities to achieve the desired outcomes or goals (Oxford English Dictionary, n.d.).                                                                                                                                                                                                                                                                                                        |
| 9  | <b>Integrated Early Childhood Development (IECD)</b> | Integrated Early Childhood Development (IECD) refers to a comprehensive approach that combines various aspects of child development, including health, nutrition, education, and social support. It is meant to ensure optimal growth and advancement of developmental areas (domain) of a child such as emotional, social, physical and cognitive during the early years of a child's life. (Ministry of Gender Equality and Child Welfare, 2017).                                                                                 |
| 10 | <b>Inter-sectoral approach</b>                       | Inter-Sectoral approach refers to the interaction, communication and collaboration amongst different sectors or fields in addressing a specific concern or problem. It involves breaking down silos and promoting cooperation and coordination between sectors to achieve common goals. In this study context system used to identify steps geared towards achieving more integrated early childhood development (IECD) system, which simply means moving from a 'multi-sectoral' to an 'inter-sectoral' approach (Woodhead, 2014). |
| 11 | <b>Multi-sectoral approach</b>                       | Multi-sectoral approach refers to the participation, involvement and collaboration of multiple sectors or areas of expertise in addressing a specific subject or problem. It recognizes that complex problems often require input and coordination from various sectors, such as health, education, social welfare, and government agencies (Woodhead, 2014).                                                                                                                                                                       |
| 12 | <b>Parent</b>                                        | A parent is an individual who has either biologically or legally given birth to or raised a child. Parents have the legal custody of a child, and they are responsible for the child's care, upbringing, and overall well-being. In the context of Namibian African communities, a parent can be someone who is not biologically or legally given the responsibility of raising a child, but still takes care of and provides for the needs of the child (Oxford English Dictionary, n.d.).                                         |
| 14 | <b>Playroom</b>                                      | A playroom is a designated space or room that is specifically designed and equipped with toys, games, and activities to promote play and stimulate a child's imagination, creativity, and growth (Oxford English Dictionary, n.d.).                                                                                                                                                                                                                                                                                                 |
| 15 | <b>Policy</b>                                        | A policy is a set of rules, guidelines, or principles established by an organisation, company, institution, or government to guide decision-making and actions in a particular area or field. It serves as a statement of intent and is usually implemented                                                                                                                                                                                                                                                                         |

|    |                     |                                                                                                                                                                                                                                                                                         |
|----|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|    |                     | through procedures or protocols (Oxford English Dictionary, n.d.).                                                                                                                                                                                                                      |
| 16 | <b>Stakeholders</b> | Stakeholders are individuals or groups who have a vested and bestowed interest or are affected by a particular issue, policy, activity or program. They can include individuals, organizations, communities, government agencies, and other entities (Oxford English Dictionary, n.d.). |

Table 1: Definition of keywords and terms employed in the study.

## ACRONYMS AND ABBREVIATIONS

|         |                                                                       |
|---------|-----------------------------------------------------------------------|
| CoW     | City of Windhoek                                                      |
| ECD     | Early Childhood Development                                           |
| ECE     | Early Childhood Education                                             |
| EMIS    | Education Management Information System                               |
| ETSIP   | Education and Training Sector Improvement<br>Programme                |
| IECD    | Integrated Early Childhood Development                                |
| GRN     | Government of the Republic of Namibia                                 |
| MBEC    | Ministry of Basic Education and Culture                               |
| MDG     | Millennium Development Goal                                           |
| MGECW   | Ministry of Gender Equality and Child Welfare                         |
| MGEPECW | Ministry of Gender Equality, Poverty Eradication and<br>Child Welfare |
| MHAI    | Ministry of Home Affairs and Immigration                              |
| MoEAC   | Ministry of Education, Arts, and Culture                              |
| MoHSS   | Ministry of Health and Social Services                                |
| MRLGH   | Ministry of Regional, Local Government and Housing                    |
| NDP5    | Fifth National Development Plan                                       |
| NAC     | National Agenda for Children                                          |
| NGO     | Non-Governmental Organisation                                         |
| NQA     | Namibia Qualification Authority                                       |
| NIECD   | National Integrated Early Childhood Development                       |
| NIED    | National Institute for Education and Development                      |
| SDG     | Sustainable Development Goal                                          |

|        |                                                                    |
|--------|--------------------------------------------------------------------|
| SOS    | Save Our Souls                                                     |
| UNICEF | United Nations Children’s Fund                                     |
| UN     | United Nation                                                      |
| UNDP   | United Nations Development Programme                               |
| UNESCO | United Nations Educational Scientific and Cultural<br>Organization |
| UNAM   | University of Namibia                                              |
| WASH   | Water, Safe and Hygiene                                            |
| WHO    | World Health Organisation                                          |

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I am genuinely and honestly humbled by my supervisor, Dr. Cynthia Kaliinasho Haihambo, for her patience, contribution, and guidance, and for every possible role she fulfilled in enabling me to finish this thesis. It is my greatest honor and privilege to work with somebody so persevering, conversant and understanding.

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I dedicate this thesis to my children, Dorian Tangeni Daniel, Donovan Tileinge Daniel, and Darlene Iyaloo Daniel. Their patience and love, despite my absence and frustration due to study pressure, will forever be treasured. Their childhood memory and upbringing inspired me to find passion and craving in early childhood development and children in general.

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## DECLARATION

I, **Indileni Ndeshipanda Daniel**, hereby declare that this study of Masters Degree titled: The Implementation Challenges of the Integrated Early Childhood Development (IECD) Approach at early childhood development centers in Windhoek, Namibia, is my work and it is a true reflection of my research, and that this work, or any part thereof has not been submitted for a degree at any other institution.

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Indileni Ndeshipanda Daniel

October 2025

Date



## **CHAPTER 1: INTRODUCTION AND OVERVIEW**

### **1.1 Introduction**

As point of departure, this study explored the implementation of Integrated Early Childhood Development (IECD) approaches, and challenges experienced at Early Childhood Development Centers in Windhoek, Namibia. Moreover, the study was conducted in Windhoek's ECD centers in the Eastern suburbs, Katutura, and the Informal settlements of Okuryangava in the Khomas region.

It is imperative to note that this chapter consists of nine (9) sections. It commences with an introduction to the chapter, followed by back ground information, the problem statement as well as the aims and objectives of the study. Furthermore, the chapter underscores the significance of the study, explains the definition of the terms employed in the study and concludes with a summary of the key points as discussed in the chapter. The following is an outline of the sections:

### **1.2 Background of the Study**

The Namibian Constitution (1990) in Article 15 states that children are entitled to be protected from economic exploitation or any interference to their education, health, or whatsoever that can be harmful to their physical, mental, spiritual, moral, and social development. Based on this, it is imperative that community members should ensure that children do not become subjects and victims of economic exploitation. The responsibility of caring for and protecting every Namibian child from economic adversity is entrusted to every Namibian by the Constitution. Furthermore, the constitution implies that children may not be exposed to anything that might negatively affect their health and well-being, be it physical, mental, spiritual, moral, and social

development. The IECD approach requires a collaborative approach where children's basic physical needs for health, food, and protection are fulfilled. This study focused on children aged zero to four (0-4) years as ascribed in the current Namibian ECD policy.

In 1994, an Inter-Ministerial Task Force was established by the Ministry of Regional and Local Government and Housing (MRLGH) and the Ministry of Basic Education and Culture (resultsMBEC) with the aim to create a National ECD Policy to support a broad spectrum of ECD programs for young children and their families (Penn, 2008). Moreover, the Namibian government continues to demonstrate progress through the establishment of a task force to solve ECD's challenges and empower the communities. The Ministry of Gender Equality and Child Welfare (2007) contends that there was a need at district level to capacitate the Community Activators and Community Liaison Officers of the Ministry of Regional, Local Government and Housing (MRLGH) on how to render support to community-based ECD programs. In 1994, members from MRLGH and MBEC attended training in Johannesburg, to be trained as trainers of trainers (Penn, 2008). This resulted in a *cadre of trainers* within the country, including Early Childhood Development Officers. These Officers of the Ministry of Basic Education and Culture (MBEC) and Ministry of Regional, Local Government and Housing (MRLGH) were tasked to prepare Regional Councils and Community Activators responsible for educating parents and mobilising communities in local authority councils and at community level. This was implemented to enhance early childhood development strategies.

According to the National Integrated Early Childhood Development Policy (2007), early childhood constitute children in the age group of zero to eight (0-8) years of

which five to eight (5-8) years are in schools. Further more, these children resort under the jurisdiction of the Ministry of Basic Education while zero to five (0-5) resort under the Ministry of Gender Equality, Poverty Eradication and Social Welfare (GEPEWS).

It is imperative to note that this study focused on the age category of zero to five (0-5) years which resort under the Ministry of Gender Equality, Poverty Eradication and Social Welfare. Equally important, the term integrated early childhood development (IECD) is often misunderstood, because numerous programmes still focus on center-based services (Ministry of Gender Equality and Child Welfare, 2017). Integrated Early Childhood Development (IECD) focuses on children's holistic development aspects that include cognitive, emotional, social, and physical development. Moreover, these aspects are influenced by environmental and biological factors which can have a positive or negative impact on the child's development (Ministry of Gender Equality and Child Welfare, 2007). More importantly, IECD includes providing young children with an enhanced development in life, which requires a synergistic approach where their basic physical needs for health, food, and protection are fulfilled, as well as their psychosocial needs for care, interaction, exploration, affection, and stimulation (McDonald & Thorne-Lyman, 2017).

It is evident that for many years, the early childhood development service delivery in Namibia has been fragmented and uncoordinated (Hartinger et al., 2017). In addition, in terms of the IECD approach and services, there is limited data available on what the children receive and whether those services include various developmental areas as stipulated in the IECD policy. The term 'early childhood' is further defined as the period of a child from conception up to eight years (United Nations Educational

Scientific and Cultural Organisation, 2021). Notably, this is the period where children grow and flourish in life, hence the need for all key services to be offered at this stage. Moreover, the term ‘development’ is defined as the occurrence of competence from simple to multifaceted, which refers to the process of change through which the child masters more complex levels of moving, thinking, feeling, and interacting with people and objects in the environment (Ministry of Gender Equality and Child Welfare, 2007). In general Early Childhood Development (ECD) is defined by developmental theorists as the gradual emergence and development of sensory-motor, cognitive, language, and social-emotional capacities in young children aged zero to eight (0 - 8) years (Kamara et al., 2018a). In addition, the 2011 National Population and Housing Census of Namibia indicated that only 13% of children aged zero to four (0 – 4) years were registered in ECD programmes (National Planning Commission, 2017).

The Ministry of Gender Equality and Child Welfare, (2007) further points out that in 1994 pre-primary education which is for children five to six years old (pre-grade one) was shifted from the Ministry of Education to the Ministry of Women Affairs and Children Welfare (MWACW) as it was then known, now known as Ministry of Gender Equality, Poverty Eradication and Social Welfare. Moreover, in 1996, a national policy on Early Childhood Development in Namibia was developed, supporting the existence of Early Childhood Education (ECE) (Mwamwenda, 2014). The policy was revised in 2007 and was amended to an Integrated Early Childhood Development (IECD) Policy.

Historically Anglicans, Catholics and Lutherans missionaries introduced community-based ECE Centers. These missionaries were later supported and complimented by other organisations such as SOS Children’s Village and the Red Cross. In addition,

NGOs, individual community members and private organisations also provided ECD services (Mwamwenda, 2014). The Ministry of Gender Equality and Child Welfare (2007) indicates that prior to and immediately post-independence of Namibia, there existed great inequality in government provision of education in general and, education for children in the pre-grade one level in particular.

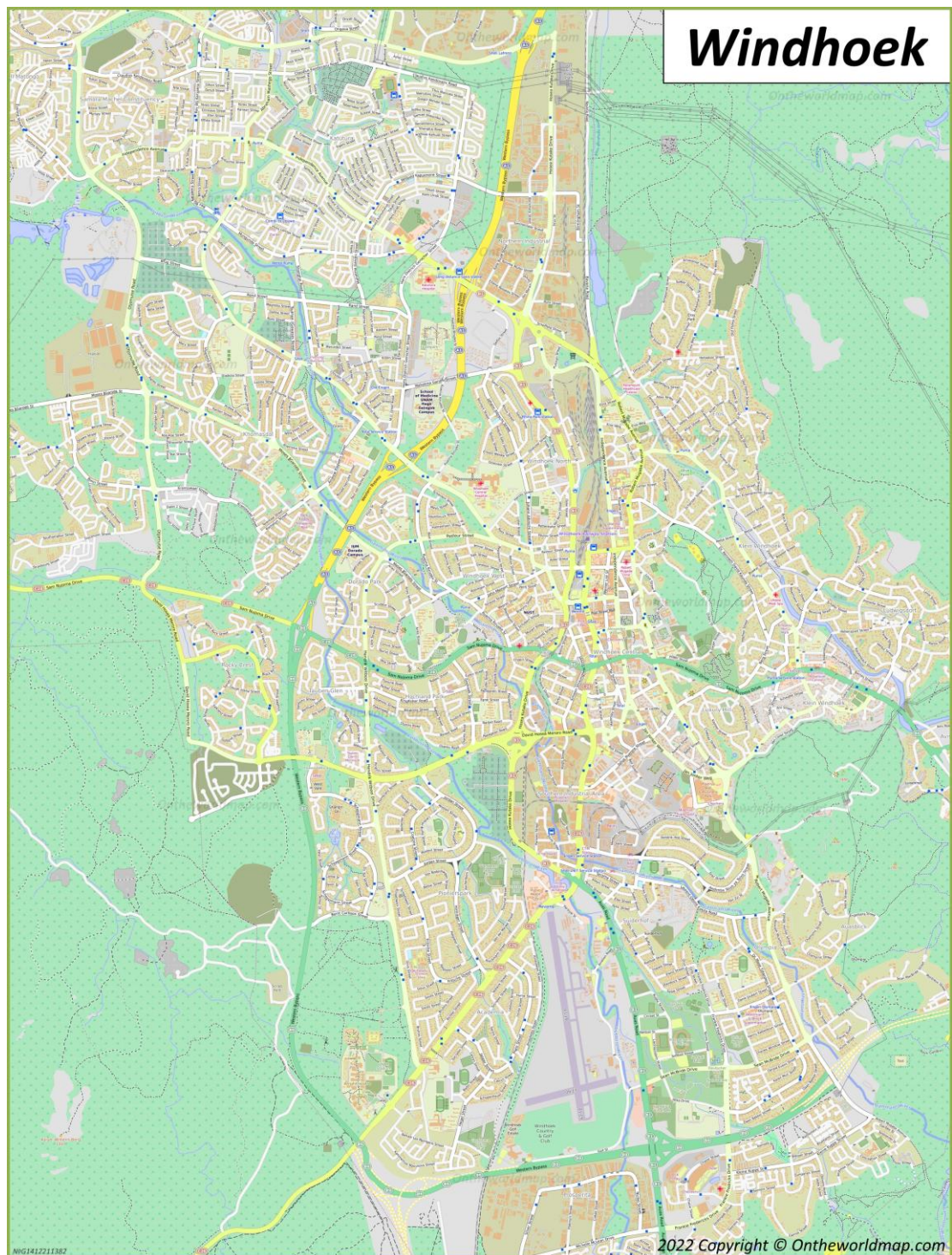
The National Integrated Early Childhood Development (Ministry of Gender Equality and Child Welfare, 2007: p.5) defines Integrated Early Childhood Development (IECD) as “an approach used to effectively coordinate priority actions at policy, institutional and implementation levels to ensure the fulfillment of the rights and the well-being of young children, including those from poor and vulnerable backgrounds, and their families”. By implication, the policy emphasises the critical role that IECD programmes and activities can fulfill in child development (Ministry of Gender Equality and Child Welfare, 2007). It is imperative to note that IECD encompasses all qualities of children’s holistic development of areas including a child’s cognitive, social, emotional and physical development (Ministry of Gender Equality and Child Welfare, 2017). Hence, Integrated Early Childhood Development can be defined as an approach employed to effectively coordinate important actions at policy, institutional, and at implementation levels to ensure the success of the rights and the safety of children, including those from poor and vulnerable circumstances, and their families (Ministry of Gender Equality and Child Welfare, 2007).

[illegible]

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Figure 2: Map of City of Windhoek



Source: <https://ontheworldmap.com/namibia/city/windhoek/>

### **1.3 Statement of the Problem**

UNICEF Namibia (2015) reported that for a long time, the early years of child development for many Namibian children were characterised by poverty, malnutrition, disease and lack of opportunities to play and learn the skills needed to excel and perform well in primary school. Moreover, these social economic factors can contribute negatively to many young children's development, in particular those in disadvantaged communities such as informal settlements, rendering them deprived of quality holistic development. The unequal and inadequate ECD facilities and service provision in Windhoek is a cause of serious concern and a violation of children's rights to education and development (UNICEF, 2017).

Through the Decentralization Act of 2000, the City of Windhoek (CoW) has been involved in the early childhood development activities within the boundaries of the City of Windhoek. Importantly, such involvement has led to the establishment of the Early Childhood Development section in 2005, within the Department of Community Services. It is currently known as the Department of Economic Development and Community Services. In 2007 this Department developed the City of Windhoek's ECD. Since the implementation of the national IECD policy in 2007, which was accompanied by training of caregivers/educarers and communities, the ECD section office within the Department of Economic Development and Community Services of the City of Windhoek continued to observe that many ECD centers continued to resort to the conventional ECD delivery approaches which emphasised numeracy and literacy. Other equally important developmental aspects and needs such as health, nutrition, affection, stimulation, care and exploration seem to be neglected. These



observed practices indicated a gap between the managerial level (macro-system) and the community level (micro- and meso-systems). It is imperative to note that the IECD approach requires well- coordinated services as well as to divert from a multi-sectoral to inter-sectoral approach in order to maintain a single center of coordination. Moreover, if early childhood educarer/caregivers are not provided support to offer ECD services, all investments in the IECD policy development, which is globally accepted to be the best foundation for child development, will be futile.

The IECD policy states that:

IECD is rooted in a human rights approach to development; it views the child holistically and all dimensions of survival, growth and development as being mutually inter-dependent; it targets communities, parents and caregivers as well as children; IECD promotes an integrated, multi-disciplinary and inter-sectoral approach; it targets communities, parents and caregivers as well as children and it promotes equity and other non-discriminatory practices amongst others (Ministry of Gender Equality and Child Welfare, 2007).

It is imperative to note that the researcher was a member of the City of Windhoek team that was tasked with inspection and ensuring compliances of ECD delivery in the city. Notably, the researcher observed that the fundamental challenge was that caregivers seemed to remain fixed into the silo operation, the traditional methods of ECD delivery as opposed to the IECD approach. Equally important, although sufficient research on ECD status exists, following an extensive search of papers and literature, there were limited studies on the implementation of IECD policy and approaches. The researcher considered it rather meaningful to explore the experiences of caregivers and the variables that impede the implementation of the IECD approach despite the multiple

efforts and investments made into the establishment and implementation of the IECD policy. The study findings offered recommendation to policy makers, implementers, and stakeholders on effective and alternative coordination and policy implementation strategies. That government has s fundamental responsibility to care for children in order to create an enabling environment for ECD centers to proliferate.

#### **1.4 Aim of the Study**

This study sought to explore the experiences and challenges experienced by Early Childhood Development (ECD) providers and educarers in implementing the National Integrated Early Childhood Development Policy and approaches at ECD Center level in Windhoek, Namibia.

#### **1.5 Research Questions**

The main research questions are:

1. What are the experiences of Windhoek ECD providers and caregivers regarding the IECD provision?
2. How do ECD providers in Windhoek implement the IECD approach at ECD Centers?
3. What are the challenges experienced by ECD service providers in Windhoek in implementing the IECD policy?
4. What support do ECD providers and caregivers need in order to align their services to the expectations of the IECD Policy?

## **1.6 Significance of the Study**

More importantly, this study gathered evidence of current practices, challenges, approaches, experiences and perceptions of ECD practitioners on the implementation of the IECD policy in Windhoek. The study might raise the awareness of IECD practitioners about their responsibilities in the implementation of the IECD policy in early childhood development centres. Moreover, the study may also provide fundamental data to the Ministry of Gender Equality and Child Welfare (Policy makers), Local Authority (Municipalities) and Regional Council, as well as IECD training institutions regarding the practices and challenges of IECD practitioners in implementing or delivering IECD services. The findings may, therefore, inform policy and decision makers on effective and suitable IECD implementation strategies and approaches. It may also contribute significantly to the body of knowledge in the field of early childhood development and education in general. Furthermore, the study may provide profound understanding of the intersectoral approach regarding IECD implementation. Furthermore, this study may contribute to the insufficient body of knowledge on IECD delivery in Namibia and suggests alternative strategies to mitigate the existing impediments to IECD implementation. More importantly, this study may also enlighten and guide researchers and ECD students on topics of interest that might require further research. Finally, this study may be valuable to the Namibian government in contributing strategies to coordinate, monitor and spearhead IECD service provisions and programmes at implementation level in Windhoek as well as other towns.

### **1.7 Limitations of the Study**

The researcher had several limitations, which included disruptions in the conducting of interviews due to the COVID-19 pandemic. It was a challenge to have access to ECD centers as owners and parents feared exposure of their children to the virus. In addition, this qualitative research adopted a phenomenological design. Based on this type of design, one of the main limitations for this study was that it was limited in terms of its population, because it focused on selected ECD centers in selected constituencies in Windhoek only. Secondly, it was possible that some participants might have felt intimidated by the researcher based on her position in the City of Windhoek as the Head of the ECD section, consequently this might have had a negative impact on their expressions and behaviour and subsequently on the trustworthiness of the data. Importantly, participants were assured that the research was solely for study purposes. The researcher ensured the participants that her position at the City of Windhoek did not endanger ECD practitioners. Moreover, the researcher constantly ensured participants of her professional integrity. Furthermore, the researcher invested in establishing centers before commencing the data collection process.

It is imperative to note that the researcher was cognisant of fault lines engendered by her position (which include seeing and hearing what you know already and not listening and observing as an outsider). More importantly, the researcher was cognisant of the language dynamics (avoiding the language of authority and assuming that of a learner) and therefore entered the field as a scholar who needed to learn from the experienced service providers in the field.

## **CHAPTER 2: LITERATURE REVIEW AND THEORETICAL FRAMEWORK**

### **2.1 Introduction**

In Chapter 1, the contextual framework of the study was presented with emphasis on the need to understand the implementation challenges of the IECD approach at ECD centers as experienced by ECD owners and caregivers/educarers in Windhoek's selected areas. This chapter presents a comprehensive review of related literature that informed this study as well as the related theoretical framework. The first section addresses the literature review linked to the phenomenon being examined, and the second section of this chapter explores the theories that were selected to guide this study in response to the research questions. Equally important, the literature review assists in discovering what other researchers have done and what need to be discovered regarding the phenomenon. Moreover, the literature review aims to confirm whether a gap exists in the literature, particularly in the field of ECD and IECD policy implementation approach in Namibia.

This review entails the discussion of the following: The Historic background and the origin of Early Childhood Development; the Global perspective and legislative framework of Early Childhood Development in an African Context, Namibian IECD legislative and Policy Frameworks; the ECD context and implementation status in Namibia. In order to underpin the findings of this study, a number of theories were extrapolated to interpret the experiences and approaches of the participants, as well as to position the study within the IECD approaches and theoretical context.

## **2.2. Historic Background and the Origin of Early Childhood Development**

It is imperative to comprehend the history of ECD in order to conceptualise of what is currently happening as well as to guide and direct the future of ECD policy development and approaches at center level. Importantly, this has also enabled the researcher to link the literature to the research questions. Literature indicates that ECD has a long history, with discussions tracing back to ancient Greece, where philosophers like Plato in “The Republic” engaged in such discourse (Murphy, 2015). The historical work like “Lawrence Stone, The Family, Sex and Marriage in England 1500–1800” as cited by Cunningham (1995) are related to the periods of childhood. Moreover, historiography assumed children were raised in nuclear families similar to the contemporary context, thus influencing theories in the 16<sup>th</sup> century and beyond (Cunningham, 1995). It is imperative to note that formal education was scarcely available, primarily to nobility and clergy, partly due to limited access to printing which impeded mass information dissemination (Black, n.d.). This implies that the limited access to ECD centres for all and inequality in the provision of ECD services and education has existed for a long period. This study focuses on IECD implementation and approach, which is mainly focused to establish the experiences and challenges experienced by ECD center owner, manager and caregivers/educarers in different residential areas. Notably, an urgent and concerted effort is long overdue to address these unequal opportunities to quality child development and education universally.

This lack of accessibility to ECD services meant most children received no preparation and development for formal schooling, resulting in high failure rate in schools as well as an increase in illiteracy. Reading and writing skills were mainly confined to clergy, scholars, and the upper classes (Black, n.d.). Later on it was more to affluent families

who often engaged tutors to instruct their children in subjects like Latin, classical literature, and religious studies. Conversely, many children were directed toward learning trades or skills through apprenticeships (Cunningham, 1995). Furthermore, during this period, there was no standardised curriculum, leading to a wide variance in the subjects taught and the way children were treated in ECD centers. Hanawalt (1993) opines that she investigated the challenges experienced by medieval London children and acknowledges education's limitations, in particular for socio-economically disadvantaged children, highlighting the influence of disparities on educational opportunities. The socio-economic situation of family seems to be a determining factor to the type and level of early childhood development and education each child will receive. For the purposes of this study on the historical context of ECD, the focus narrows to six (6) key ECD historical figures: Martin Luther, John Locke, Friedrich Wilhelm Froebel, Maria Montessori, Jean Piaget, as well as John Dewey. There are limited studies conducted on the history of IECD approach and implementation, in particular at policy implementation. Although the focus of this study is on the experiences, approaches and challenges encountered by ECD owners, managers and ECD educarers/caregivers of IECD approach, it is critical to examine the literature of the ECD foundation and curriculum methods of the past. The following section present short summaries on each of the above educational and historical theorists:

### **2.2.1 *Martin Luther***

Martin Luther's influence on early childhood development is a fascinating topic that has been explored by various academics. Androne (2014) contend that the role of Luther's ideas and beliefs in forming early childhood education has been discussed in several sources.

A study conducted by Androne (2014) compared Luther's educational views to those of other 16<sup>th</sup>-century reformers who are often ignored. His work underscores Luther's originality in education and the influence of the reformation on Western European public education. While Luther was primarily a religious reformer, his theological work aimed to reach the masses of children by teaching them literacy which was his greatest legacy. Moreover, Martin Luther further emphasised the essence of *nurturing* and *guiding* children in their formative years, considering them as *malleable vessels* that need proper care and education to make them better (Harran, 2004). The term *malleable vessels* implies that children are flexible containers that can easily be shaped and molded in the way it deems fit. This study recognises that the approach of ECD caregivers can influence the level of development of children at ECD centers. Hence, these formative years form part of the window of opportunity for children to be identified at the right age.

### **2.2.2 John Locke**

Locke (1632 – 1704), a British philosopher, teacher, and physician, profoundly motivated enlightenment political thought and left a significant influence on early childhood development. He elucidates on the concept of “*tabula rasa*”, where he explained that children are born as blank slates or white paper and their experiences shape their growth. Moreover, he laid the foundation for understanding early childhood as a critical period for learning (Androne, 2014, p. 75). This notion supports the notion that early childhood development is significantly influenced by the environment and experiences as children learn and through interaction. Conversely, the question remains: how effectively can this be implemented?

Gianoutsos (n.d.) supported the view on the concepts of learning, which emphasises on individual learning and parental involvement. There is no doubt that parents are



imperative and fundamental strongholds to each and every child's development. Equally important, children are unique beings, hence learning content and delivery needs should cater for individual children. In addition, the children's family background and experiences establish their foundation and parental involvement fulfills a key role in this initial stage and throughout the development of the child. Hence it is imperative to reiterate that this study focuses on the practices and experiences of ECD educarers/caregivers and links these notions to existing literature and theories.

### **2.2.3 Friedrich Wilhelm Froebel**

Being the Father of the "*Kindergarten*," Froebel's influence on Early Childhood Development (ECD) featured in numerous articles (Spodek, n.d.). Froebel's Kindergarten Curriculum method was extremely innovative, because as a former gardener he perceived children as seeds of potential, ready to blossom into their fullest form. Froebel's play-based learning, hands-on activities, and interdisciplinary approach, are like a direct response to the philosophy of Pestalozzi, acting as a foundation for modern early childhood education (Spodek, n.d.). Froebel's methods are extensively adopted in numerous ECD centers till today. It is indeed a fact that children learn through play and by doing. These are some of the key components of the Integrated Early Childhood Development (IECD) approach.

### **2.2.4 Maria Montessori**

Maria Montessori's profound contributions to early childhood development derived from modest beginning and would go on to have a great impact on ECD globally. Moreover, it only took Montessori two years from her discovery that children are naturally curious (Mooney, 2013). It is worth noting that some ECD caregivers tend to practice the Montessori approach, without knowledge of the historical background

and the motive behind the method (Mooney, 2013). Her method can best be described as “freedom within limits” as young children are not granted stringent schedules to follow, but are allowed to exercise their curiosity to its limits.

More importantly, the Montessori approach explores individualised learning, hands-on experiences, and the development of children's executive functions. Mooney (2013) stipulated that these methods encourage independent and focuses on the child. This was evident in one of the ECD centers observed for this study. One major lesson from the Montessori approach is that child development requires well-qualified and motivated ECD practitioners to be able to establish systems and methods that will enable children to develop holistically.

#### **2.2.5 Jean Piaget**

Scholars from a variety of sources have extensively examined Jean Piaget's significant contributions to the early history of early childhood development. In addition, Piaget was a student of Montessori and thus learned from her theories. In a similar manner to Dewey, he understood that children must learn by doing, especially by playing, and not mere memorisation (Mooney, 2013). This means that Piaget wanted learning to be an activity that allowed for children to be fully engaged in an action, using their senses and body to learn, not merely their mind. Piaget's theory of holistic development is imperative for every child. More importantly, children's activities need to be inclusive and directed toward the holistic development of every child. He also proposed a theory of cognitive development that identified distinct stages through which children progress as they develop their ability to think and reason (Lourenço, n.d.).

### **2.2.6 John Dewey**

Dewey (1986) as cited in Mooney (2013) outlines his educational philosophy emphasising experiential learning, active engagement, and real-life integration. More importantly, his concepts established the foundation for progressive education and hands-on learning in early childhood context. As an influential American philosopher, psychologist, and educator, Dewey significantly influenced education and early childhood development (Mooney n.d.). Furthermore, Experiential learning, which emphasises hands-on engagement and relevance, promoted learning by doing, as earlier indicated by Montessori and Froebel's philosophies. It is imperative to note that ECD activities should promote the notion that children learn through play.

Dewey (1986) postulates that in education, prioritising engagement, critical thinking, and meaningful learning experiences are imperative. Moreover, Dewey's contributions remain transformative, and continue to form education, especially in early childhood development contexts. During data collection for this study, problem solving through games and toys was also accentuated through interconnected knowledge demonstrated by some of the ECD owners and educarers at ECD centers.

## **2.3 Global Perspective and Legislative Framework**

Early Childhood Development (ECD) is a global and critical phenomenon that has been recognised and addressed by various legal frameworks. Moreover, ECD is considered a very pertinent stage in human life that encompasses the period from conception to the age of eight. (Milner et al., 2019). It is recognised universally as a foundation phase that profoundly influences a child's holistic development. More importantly, the global perceptions and angles on ECD have emerged, emphasising the significance of early years in developing a child. The Sustainable Development Goals and Global Strategy for Women, Children and Adolescents' aim to ensure that

every child has the opportunity to thrive, or reach their best developmental potential (Milner et al., 2019). Furthermore, the legal framework aims to ensure optimal development and well being of children through early childhood development (ECD) programs and policies. This global perspective on child development is also supported by numerous studies and reports. The United Nations Convention on the Rights of the Child (UNCRC, 1989) establishes the legal framework for child development globally. It recognises the right of every child to an optimal development and sets the foundation for ECD policies and programs. The SDGs, particularly Goal 4 on quality education, emphasises the importance of early childhood education and development as a fundamental right and key component of sustainable development (Milner et al., 2019).

The World Bank highlights the financial and social benefits of investing in early childhood development and calls for global action to prioritise ECD programs and policies (Engle et al., 2011). The deferral and skeptical perception on the high return on ECD investment by the state, pose challenges to IECD practitioners and many might lack the necessary resources to implement IECD effectively. As Milner et al., (2019) further indicates that the Center on the developing child, provides evidence-based research and resources on early childhood development to inform policies and programs globally. These suggestions and quotations reflect the global premise on child development, accentuating the legal frameworks and goals that prioritise ECD as well as emphasise the essence of providing children with a nurturing and supportive environment for their holistic development. Furthermore, WHO, UNICEF and World Bank as reported in UNICEF (2022) points out that time to accelerate implementation for early child development indicates unprecedented global policy support, including the Nurturing Care Framework, into action is now. More importantly, it compels

evidence-informed guidance about how to implement ECD programmes at national and regional scale (Milner et al., 2019). It is imperative to note that implementation research should understand impact at a much larger scale, over longer time period as well as cost- effectiveness data to be entrenched.

Furthermore, nurturing Care Framework, (NCF) provides a policy framework to support these ambitions (Milner et al., 2019). Delaying in finding a home for ECD and implementing IECD in Namibia is a failure for the country as whole and ignorance of Sustainable Development Goals (SDG) in regards to ECD. Improved measurement is imperative for accelerating and tracking progress towards the Sustainable Development Goals related to early child development (ECD).

Conversely, most literature on early child development metrics focused more on challenges in assessing key findings. In addition, much of the research on ECD focused more on the difficulties involved in measuring and evaluating the outcomes of ECD intervention. This requires a definition of ECD interventions and target population with available data, either for all children in a given age group or to target based on child development status and risk factors (Milner et al., 2019).

UNESCO (2021) reports that inclusion should be a primary commitment from early childhood. The aims of the current study underscore the importance of inclusion, equality and equity in the Early Childhood Development Sector in Namibia.

## **2.4 Early Childhood Development in African Context**

Africa is a diverse region of ethnicities, chiefdoms, kingdoms, empires, and democracies, thus there is no exact universal standard of what education was like in

Africa. The ancient Egyptians for example may have been the first civilisation to grant children an education, mostly as scribes (*writing down information by hand*) (Herbst & Robinson, 2002). Moreover, there was no centralised and standardised curriculum for most of the African continent (Baten & Alexopoulou, 2022). Skills were diverse, encompassing activities like dancing, farming, wine making, cooking, herbal medicine, and craftsmanship that were essential. Storytelling was also an educational tool. In addition storytelling, oral traditions were amongst various methods and avenues employed to convey history, norms, and values (Murphy, 2015). It is imperative to note that children in Africa mostly learned through imitation by observing their parents' older siblings (Hymer, 1969). This type of education and child rearing might still be evident in many Namibian rural regions, villages and farms.

Although many African countries experienced similar situations in establishing ECD and education systems in general, there are some noticeable differences and experiences. For example, the Early Childhood Education in Ethiopia commenced in 1900 for the French Children, whose parents were railway workers and consultants in the country. Conversely, ECD services in Ethiopia was intended for the affluent families in Addis Ababa (Mwamwenda, 2014). This entails that ECD service provision has always been characterised by inequity of being more for pro-rich. Furthermore, on the same notion, in Addis Ababa the French introduction of ECD was followed by the English, and Germans schools intended for affluent families in Addis Ababa (Mwamwenda, 2014). By 1971, a pilot project of Early Childhood Education in major towns commenced, administered by Swedish and American Peace Corps Volunteers under the Ministry of Community Development and Social affairs affluent families in Addis Ababa. Those responsible for schools were missions, private organisations and

the Ministry of National Community Development and Social Affairs. The Ministry of such schools were in urban areas, and there were hardly any in rural areas (Mwamwenda, 2014).

This suggests that the introduction of Christianity paved the way for colonialism in Africa. Evangelical awakening in the 18th century led to Protestant missions, driven by opposition to slavery while Catholic missions gained momentum after the French Revolution, becoming independent of states (Cappelli & Baten, 2021). The teaching of Christianity that paved way for colonialism and slavery did not exclude Namibia. Although the effects of colonialism and slavery were detrimental, it also introduced formal ECD services, which was a positive development and deed. This can be contemplated as both a disguise and a blessing at the same time.

Contrary to the above position, a study by Cappelli and Baten (2021) demonstrated that colonial education systems positively impacted numeracy in Africa. Moreover, colonial ECD services and schooling efforts to legitimise power and economic opportunities, accelerated the spread of education and increased numeracy (Cappelli & Baten, 2021).

Between the 1950s and 1990s, African countries gained independence, rebuilding education systems, combining traditional and modern elements. The experience of Namibia in building ECD and the whole education system was done in the same fashion of continuing and improving where colonisers ceased. Donor agencies and global development conversations emphasised education for human capital development like those from the UN and UNICEF (Cappelli & Baten, 2021).

The Ministry of Education was involved in the administration of Early Childhood Education. More importantly, the turning point in Early Childhood Education commenced in 1981 with organisations as it focused on Primary School education (Cappelli & Baten, 2021). Based on the above information and sources, the challenge for ECD to have a department in government has been coming a long way. It is evident that countries reckoned it challenging to allocate a permanent home for ECD (UNICEF, 2020). This is evident because there is no ECD owned by the government.

## **2.5 Namibia's ECD Historical Background Legislative and Policy Framework**

### ***2.5.1 Pre-colonial Era's ECD historical background and legislation***

During the pre-colonial era in Namibia, formalised early childhood development programs and policies were lacking. Moreover, early childhood development and childcare was primarily the responsibility of families and communities. Children learned essential skills and knowledge through informal methods, such as observation, imitation, and participation in daily activities (Matengu et al., n.d.). The focus was on transmitting cultural values, traditions, and survival skills within the community. It is imperative to note that during the pre-colonial era, various indigenous tribes inhabited Namibia, each with its own systems of governance and laws. These laws were primarily based on customary practices and oral traditions (Shibata, 2005). The legal framework during this period was distributed, with each tribe having its own rules and regulations to govern its members. The Awambos, Kavangos, Himbas, Hereros, San, and Damara tribes, among others, had their own social structures and methods of resolving conflicts.



Shibata (2005) contends that during the pre-colonial era Namibia, had no strong central state for a majority of its history, thus no formalised early childhood development programs and policies existed. More importantly, early Childhood Development was primarily the responsibility of families and communities. Children learned important skills and knowledge through observation, imitation, story telling and participation in daily activities (Shibata, 2005). The focus was on transmitting cultural norms, values, traditions, and survival skills within the community. That implies that the legal framework and policy guidelines during this period was decentralised, with each tribe having its own rules and regulations to govern its members. The children learned through training and watching their parents and helping with chores. Formal education did exist, but there is no written records of it (Shibata, 2005).

Subsequently in the year 1805, the London Missionary Society initiated its involvement in Namibia, venturing northward from the Cape Colony. Their efforts led to the establishment of Bethanie in 1811, a town located in the southern outskirts of Namibia (Shibata, 2005). It is very challenging to confidently state and elucidate exactly how ECD functioned during the pre-colonial time in Namibia, because it was not documented. Moreover, history and culture was passed from one generation to the other orally and observationally of practices and understanding of various practices. It was only as and after the 19<sup>th</sup> century progressed and European powers commenced the contentious scramble for Africa, aiming to partition the African continent among themselves, that the interest of Europeans, primarily led by Germany, gravitated towards Namibia (Shibata, 2005). Shibata (2005) delves into a very interesting story about Namibia's ECD where missionaries fulfilled a leading role as the catalyst for ECD in Namibia.

### ***2.5.2 Colonial Era's ECD Historical Background and Legislation***

Namibia was colonised by Germany from 1884 to 1915 and thereafter by South Africa until its independence in 1990. During the colonial era, the ECD landscape in Namibia was heavily influenced by the policies and practices of the colonial powers (Mokopakgosi & Cohen, 1996). In addition, early childhood development was not a priority, and resources were primarily allocated to the education of the colonisers' children. The education system was segregated, with limited access to quality education for indigenous Namibians, including young children (Shibata, 2005). This signifies that ECD services and provision was considered as a second option and not a priority.

The German colonial government implemented a legal framework that aimed to control and exploit the indigenous population. Moreover, the laws enacted during this era were often discriminatory and oppressive, seeking to dispossess indigenous people of their land and resources (Mokopakgosi & Cohen, 1996). The Indigenous Peoples Protection Ordinance of 1908 was one of the significant legislations during this time, which aimed to regulate the relationship between the indigenous population and the colonial authorities (Mokopakgosi & Cohen, 1996).

Under German Colonial rule (1884 to 1915) westernised education was not widely accessible to the local African population. Moreover, the German colonial authorities primarily focused on providing education to European settlers and their families. This led to a significant disparity in educational opportunities between the colonisers and the indigenous people (Mokopakgosi & Cohen, 1996). A significant focus was placed on instructing colonial subjects in the German language.

Christian missionaries and their affiliated institutions predominantly orchestrated the education of Africans in South-West Africa (Now Namibia). This circumstance can be traced back to a time preceding German authority over the region when missionary clergy affiliated with the German Rhenish Mission ventured into the area to propagate the Christian faith (Government of the Republic of Namibia, 2001). Importantly, the primary objective of the missionaries; educational aim was the transformation of Africans to Christianity

Later in 1915, when Germany lost its colony to South Africa the apartheid systems were implemented officially in 1948. It divided the population into four racial groups: White, Black, Indian, and Coloreds similar to those implemented within South Africa itself and white population were favored, while indigenous black population were marginalised and oppressed. Moreover, Shibata (2005) opines that in 1953, the government introduced Bantu Education, segregating education along racial lines and ECD was not excluded. Different racial groups had separate ECD centers, schools, universities, and facilities. Authoritarianism, rote learning, and corporal punishment were common in schools, especially for people of colour.

### ***2.5.3 Post independence Era's Historical Background and Legislation***

After gaining independence in 1990, Namibia commenced on developing its own ECD legislative and policy framework. In addition, the government recognised the importance of early childhood development in building the foundation for lifelong learning and holistic development. Furthermore, plans were implemented to expand access to quality early childhood education and care services. The Namibian

Constitution, adopted in 1990, guarantees the right to education, including early childhood education (Government of the Republic of Namibia, 1990).

The Ministry of Gender Equality and Child Welfare, along with other relevant ministries, has been responsible for formulating policies and implementing programs related to early childhood development (Government of the Republic of Namibia, 2001). Moreover, the government has emphasised the importance of holistic development, including health, nutrition, education, as well as protection, in early childhood programs. Various initiatives, such as the Namibian Early Childhood Development Program, have been implemented to improve the quality and accessibility of ECD services across the country.

Namibia obtain its independence from South Africa in 1990. The post-independence era brought significant changes to Namibia's legislative and policy framework, including early childhood development (ECD). Equally important, the Constitution of Namibia, adopted in 1990, serves as the highest law of the land and offers a comprehensive framework for human rights and democracy. It guarantees various rights, including the rights of children and the protection of their interests (Government of the Republic of Namibia, 1990). Regarding the ECD legislation, the Education Act of 2001 as well as the ECD policy of 1996 are the important laws and guidelines that aim to provide quality education for all children, including those in the early childhood phase.

This act recognises the importance of early childhood development and emphasises the necessity for appropriate educational programs and services for young children

(Government of the Republic of Namibia, 2001). Moreover, the Child Care and Protection Act of 2015 was enacted to safeguard the rights and wellbeing of children in Namibia. This act recognises the importance of early childhood development and includes provisions for the protection and care of young children, including their physical, emotional, and cognitive development (Government of the Republic of Namibia, 2015).

Moreover, the post-independence legislative improvements and development reflect the government's obligation to providing a supportive framework for early childhood development in Namibia. Nonetheless, challenges such as inadequate resources and access to quality services still exist, entailing ongoing efforts to strengthen the ECD sector (Kamara et al., 2018b).

The context of this study was to further explore the approaches that provided cost effective and holistic development as well as promote the rights of children. According to the Namibia's commitment to ensuring children's right to education, the across-the-board implications for its Integrated Early Childhood Development (IECD) and it's Policy Framework need to be realised. Hence, the rationale for this study to explore IECD implementation experiences, challenges and approaches at ECD centers in Windhoek, Namibia. Sadly Namibia's ECD service provision is unfortunately only under the auspices of individual and private companies.

Although, the Namibian government's alignment with the Constitution's principles underscores its commitment to nurturing a well-educated and empowered citizens, essential services for the nation's sustainable development and growth are still lacking. (Government of the Republic of Namibia, 1990). The United Nations (UN) and its

affiliated organisations such as the European Union (EU) fulfill a significant role influencing and shaping Early Childhood Development (ECD) initiatives in Namibia since independence till present (Republic of Namibia, 2017).

**Figure 3.** ECD desired outcome and strategies by 2022



Source: 5<sup>th</sup> Namibian Development Plan (NDP5), p. 56

## 2.6 IECD Policy Implementation in Namibia

Since the independence of Namibia in 1990, early childhood development has been in discussion and several platforms were created in order to place ECD on the priority of the government's agenda. Moreover, despite all the plans to enhance ECD delivery in Namibia, the initiatives for ECD support continued to be referred to as uncertain, thin

and the social and government structures fragile (Pence, et al., 2004). For a long time, Namibia has experienced highly skewed, income distribution and resource allocation, whereby the high learning institutions receive the highest government budget allocation and the ECD sector the least. Consequently, this has negatively affected most of the disadvantaged communities and the delivery of early childhood development (Kamara, et.al, 2018).

Many of the shortcomings and challenges concerning IECD implementation in Africa are related to the capacity of individuals and organisations. Moreover, the ECD progress in Namibia is instable. At one point ECD in Namibia was found encouraging, progressive and coorporative. This progress is demonstrated with evidence of work occuring and foundation for future work being established. Despite the hard work, several years later, it became evident that much of the promising work conducted has vanished (Pence, et al., 2004). While there has been a notable increase in the registration of community-based ECD centers in Windhoek, many early childhood development caregivers are experiencing a number of impediments such as: lack of knowledge of the IECD policy, poor understanding of the IECD curriculum and lack of financial support (Naanda & Engelbrecht, n.d.).

A study conducted in Mauritius, Ghana and Namibia revealed that individual ministries and NGOs continued to make significant contributions to ECD. In the case of Namibia, despite the ECD policy that has been drafted, no coordinated plans were implemented (Pence, 2008). UNICEF (2015) reported that for a long time, the early years of child development for many Namibian children are characterised by poverty, malnutrition, disease and lack of opportunities to play and learn the skills needed for



excelling and perform in primary school. These socio-economic factors can contribute to many young children especially those in disadvantaged communities, be deprived of quality holistic development.

Pence (2008) postulate that Namibia's high rate of dropout and grade repetition in primary school seems to be linked to the lack of standardised ECD services which are imperative in enhancing holistic development in children. Moreover, the importance and critical role ECD plays in promoting the Developmentally Appropriate Practice (DAP) model which the World Bank recommended to Namibia, will be a necessary requisite. To promote the DAP model of ECD, a holistic approach which meets all the needs of a child from conception to two years of age (the first 1000 days) up to school age going of seven (7) is emphasised. Furthermore, it also viewed as a prerequisite for coping as well as succeeding formal schools (UNICEF, 2015). The Report of the National Integrated Early Childhood Development Conference (2018) indicates that over the last few years, significant progress was achieved in the legal and institutional framework. Equally important, the National Integrated Early Childhood Development Conference (2018) further states that the achievements in terms of legal documents which amongst others include the Child Care and Protection Act of (2015), the IECD policy (2007), the development of ECD Center standards (2012), the introduction of subsidies for ECD caregivers in the most vulnerable communities (2012), production of advocacy and teaching materials and a curriculum for three and four year olds articulated with the Pre-primary curriculum (2013).

While Namibia has made significant progress in developing policies and other legal framework for Early Childhood Development, challenges persist in effectively

implementing the IECD policies (Barreto et al., 2017). In support to that, UNICEF (2015) indicates that the success of an integrated ECD should create an ideal and fertile ground to reduce the gender, social and economic inequality. Moreover, challenges in the provision of quality services, which incorporate health, education, social protection and safety, especially in marginalised, poor communities are still evident. In this regard, the need to revisit plans; change strategies, and set realistic benchmarks are needed. Republic of Namibia (2017) reported that 43% of children under the age of five in low and middle income countries are at risk of poor developmental outcomes of stunting and poverty.

The Director of Community Empowerment in the Ministry of Gender Equality and Child Welfare (MGEWC) at a 2018 ECD conference outlined that at National Education Conference of 2012, the government identified that the formalisation of ECD hinges on the investment of the public funds to enforce the necessary legislative and regulatory framework and institutional capacity and that the MGEWC and the MoEAC must work out a collaborative plan for the execution of recommendation in collaboration with other stakeholders to enhance coordination management and development of ECD. For this to occur, total commitment from central government is needed for ECD provision if allocated sufficient resources. (Ministry of Gender Equality and Child Welfare, 2018). In addition, Naanda and Engelbrecht (2008) indicated that ECD centres benefit financially from parents and communities other than from the government.

The Integrated Early Childhood Development (IECD) delivery could positively impact children's future physically, cognitively, emotionally as well as socially. It is

true, that IECD is a significant building block toward productive and responsible citizenry, a notion supported by the Namibian constitution (Kamara et al., 2018a). Kamara et al (2018) further stipulated that in attempt to address that, Namibia has adopted IECD as a prerequisite to successfully provide quality primary school education.

## **2.7 Theoretical Framework**

Various theories support ECD as an imperative concept for a child's holistic development, hence these theories were deemed suitable to underpin this study. In addition, literature reflects on the historical education theorists and philosophers whose theories are still essential and relevant in today's ECD programmes and service delivery. Historically, researchers in the context of Early Childhood Development (ECD) and Integrated Early Childhood Development (IECD) in particular, have developed several theoretical frameworks to guide research and practice in the dominion of ECD. It is important to note that the Implementation of Integrated Early Childhood Development policy and approaches often draws from various theories and frameworks in child development, education and policy implementation. There are many theories, but for the purposes of this study, the two theories adopted to inform this study's research problem of challenges and experiences of IECD service providers are: 1. Inter-Sectoral Integration Theory and 2. Ecological System (Bio-ecological conceptual Model)

### **2.7.1 *Inter-Sectoral Integration Theory***

Integrated Early Childhood Development (ECD) policy implementation refers to the harmonisation, coordination and collaboration among different sectors or agencies involved in child development, including health, education, nutrition, and social services. More importantly, it acknowledges that a child's holistic development is

influenced by various factors and requires a multidisciplinary approach (Engle et al., 2011). The Inter-Sectoral integration is a system employed to identify steps directed towards achieving a well- integrated early childhood development (IECD) system, which simply means moving from a ‘multi-sectoral’ to an ‘inter-sectoral’ approach. This is done effectively by engaging different sectors and different age groups with a holistic comprehension of human development (Woodhead, 2014). Furthermore, the inter-sectoral approach is suited for this study as it will assist and form the base of identifying services required at each level of development or age phase. The age phases are as early as conception, pregnancy, 0 -2 years, 3 – 5 years and 6 years. Woodhead (2014) further explained that a Bio-ecological conceptual model is a systematic and supportive starting point for IECD on a holistic and multi-sectoral ECD. This is imperative and relevant to this study, because it will enable the researcher to identify steps to be implemented in order to move towards achieving a more integrated ECD. Moreover, this can range from the coordination of the programmes and collaboration system change and reform. It can also identify potential and open entry points and delivery platforms for Integrated Early Childhood Development in Namibia. Woodhead (2014) contends that Integrated ECD systems is also meant to identify steps towards achieving more integrated ECD systems. In other words moving from ‘multi-sectoral’ to ‘inter-sectoral’ and effectively covering different sectors and age phases within a holistic understanding of human development.

The statement above affirms that employing ECD high on the agenda is imperative for every country and Namibia is not exempted. More importantly, engaging other stakeholder is necessary to develop policy and other national documents that promotes ECD that is relevant. Woodhead (2014) opines that while ECD was not

explicitly addressed as a Millennium Development Goal (MDG), the UN Secretary General's Report to the General Assembly, 2010, recognised ECD as imperative to their achievement: The Millennium Development Goals (2005 – 2015) and the Sustainable Development Goals (2015) were closely interconnected in their impact on the rights of the young child. UN (2010) as cited in Woodhead (2014) reports that poverty, maternal- and child survival, nutrition, health, protection from violence, abuse and exploitation, gender equality, and human development have short and long-term impacts for the rights of young children, with implications for future generations, as poverty cycles are reproduced. Moreover, The statements above indicate that ECD in Namibia needs to become integrated and well-coordinated. This approach will avoid duplication of efforts as well as a need for scarce resources. The Inter-Sectoral Integration approach needs to consider the following crucial key points:

Firstly, the holistic development of policy development should be considered. Secondly, it encourages collaboration between different sectors and agencies; this may involve sharing information, resources, as well as expertise. More importantly, this is encouraged for the private and inter-ministerial sectors (UNICEF, 2022). Lastly, Inter-sectoral integration allows for early identification and intervention in areas where a child may need support, leading to better long-term outcomes (Engle et al., 2011). In the IECD policy implementation context, inter-sectoral integration theory promotes a coordinated approach to child development. Moreover, it ensures that children receive comprehensive support that addresses their physical, cognitive, social, as well as emotional needs.

### ***2.7.2 Ecological Systems (Bio-Ecological Conceptual Model) Theory***

The Ecological Systems theory, also known as the Bio-Ecological Conceptual Model, developed by Urie Bronfenbrenner (1979), and revised in 1994, is a development

theory that underscores the impact of a child's environment and the communications within that environment on their development (Fisher & Lombardi, 2025). Moreover, the authors postulate that the child is at the center of the ecological system. According to the Ecological Systems theory, a child's development is influenced by various systems, including the microsystem (*immediate environment such as family, school*), mesosystem (*interactions between different microsystems*), exosystem (*indirect influences of social settings*), and macrosystem (*cultural context and societal values*) and chronosystem(*historical events and life transitions*) (Mary & Antony, 2022). With the Integrated Early Childhood Development (IECD) approach and policy implementation, this theory outlines several crucial aspects of child development.

Sofni Indah Arifa Lubis et al. (2024) contend that further policies should be designed that children's development is shaped by their interactions with various environments, including their family, community, as well as cultural context. Moreover, the bio-ecological model (Bronfenbrenner, 1994) accentuates the need for a holistic approach to child development, where policies address not only educational needs but also the broader ecosystem in which children are implanted (Woodhead, 2014) The bio-ecological model (ibid) underscores the need for a holistic approach to child development, where policies address not only educational needs but also the broader and increasingly complex ecosystem in which children are embedded—including factors such as poverty, caregiving environments, climate change, as well as digital technology (Fisher & Lombardi, 2025) Moreover, the authors contend that policymakers should consider the interconnectivity of different systems and how changes in one system can influence a child's development. It is imperative to note that various systems, including the microsystem, mesosystem, ecosystem, as well as macrosystem, influence a child's development.

The Ecological Systems (Bio-Ecological Conceptual Model, Bronfenbrenner, 1979; 1994) theory encourages policymakers, stakeholders, as well as ECD service providers to consider the ecological systems in which children grow and learn and to construct policies that enhance the quality of these environments for the benefit of children's holistic development (Woodhead, 2014).

Studies have indicated that interventions based on an ecological systems approach, such as integrated ECD policies, positively affect children's cognitive, social, emotional, as well as physical development (Engle et al., 2011). By considering the various systems and their connections, integrated early childhood development approaches and policies can extensively address young children's complex and interrelated needs. In conclusion, the Bio-ecological Systems theory provides valuable background for understanding the manifold systems that influence a child's development. IECD policies informed by this theory aim to create a well-coordinated and supportive environment that addresses the diverse needs of young children.

## **CHAPTER 3: RESEARCH METHODOLOGY**

### **3.1 Introduction**

This chapter outlines the research methodology adopted for the study, including the research design, approach, sampling strategy, data collection methods, data analysis techniques, as well as ethical considerations. More importantly, the methodology ensures that the study effectively explores the lived experiences of Early Childhood Development (ECD) center owners and caregivers in implementing the Integrated Early Childhood Development (IECD) policy of 2007.

### **3.2 Research Design**

This research sought to gather data regarding the implementation challenges and experiences of the IECD approach from various ECD centers. This study employed a qualitative research method with a phenomenological design to explore the lived experiences of Early Childhood Development (ECD) center owners as well as caregivers in implementing the Integrated Early Childhood Development (IECD) policy. Moreover, qualitative research is appropriate for studies that seek to understand participants' perceptions, experiences, and meanings attached to specific phenomena (Creswell et al., 2016). A phenomenological design, in particular, focuses on recording individuals' lived experiences to gain a profound comprehension into how they interpret and navigate their realities (Creswell, 2012 & Groenewald, 2004). This approach allows the study to uncover the underlying challenges, motivations, and strategies ECD stakeholders adopt in different socio-economic settings.

A phenomenological approach within qualitative research is valuable when describing and interpreting participants' experiences regarding a particular phenomenon (Clark & Creswell, 2015). Given that this study investigated the implementation of the IECD



policy from the direct experiences of caregivers and center owners, a phenomenological approach ensured that their voices were central to the analysis. This aligns with Creswell (2016), who posits that qualitative research, particularly phenomenology, provides rich, in-depth insights that cannot be captured quantitatively.

By adopting this research design, the study aims to comprehensively understand the real-life challenges and successes of ECD centers across different socio-economic backgrounds. It also allows for identifying policy gaps and areas for improvement, ensuring that findings contribute to academic discourse and practical policy recommendations.

### **3.3 The Research Paradigm**

The term research paradigm refers to the worldview that directs the research in a field of study. The many types of research paradigms maintain different views on ontology (what reality is) and epistemology (how we find out about reality) (Creswell, 2012). Therefore, a paradigm is a set of expectations or beliefs about important aspects of experience, which provides ascent to a particular worldview. Moreover, it addresses fundamental assumptions taken on belief, such as theories about the nature of reality (ontology), the relationship between known and unknown (epistemology), and assumptions about methodology (Creswell et al., 2016). Furthermore, the word paradigm could serve as a lens or organised standard by which reality is interpreted. It represents “the abstract beliefs and principles that shape how a researcher perceives the world and how s/he interprets and acts within that world” (Khatri, 2020, p. 136). This profoundly demonstrates how imperative it is for any researcher to comprehend the nature and the discipline behind his/her study, which will direct the choice of the

appropriate and suitable paradigm. This is essential because the paradigm could determine the methodology employed to answer a particular research question. In research, five basic categories classify research paradigms: positivism, interpretivism, feminism, critical, and post-positivism paradigm (Kivunja & Kuyini, 2017).

The two dominant research paradigms in social science are interpretivism and positivism. These paradigms have diverse perceptions on how knowledge is constructed and the nature of reality (Clark & Creswell, 2015). Moreover, the positivism paradigm separates the researcher from the findings. The difference between the two paradigms is that the interpretivism paradigm underscores subjectivity and the researcher's participation in the research process, while the positivist paradigm focuses on objective reality. It is imperative to note that both research paradigms acknowledge the existence of reality.

This study adopted a social science stance as it explored the human behavior of participants in their standard settings. Equally important, the study sought to gain a profound comprehension of the experiences and challenges experienced by ECD providers in implementing the IECD policy and approach at the ECD Centers in Windhoek. The researcher, therefore, adopted the interpretivism paradigm for its relevance to this study. Subsequently, interpretivism adopts a relativist ontology in which a single phenomenon may have various interpretations rather than a truth determined by a measurement process (Clark & Creswell, 2015). Moreover, relativist ontology underscores comprehending and valuing the diverse perspectives and experiences of individuals involved in the study (Creswell, 2007 as cited in Lan, 2018). Interpretivist epistemological theory posits that reality is formed through interactions

between the participants and the researcher and is constructed on the perception and experiences of the phenomenon (Snelson, 2016). For this study, the researcher interacted with participants and gained a profound understanding of their perceptions and experiences regarding their IECD approach at ECD centers. It is imperative to note that each human being has different views about matters, and every researcher has a perception of the reality of a particular subject. Lather (1986) cited in Kivunja and Kuyini (2017), indicates that a research paradigm fundamentally reflects the researcher's beliefs about the world that s/he lives in and wants to live in.

Therefore, this study employed a qualitative research design with a phenomenological approach because the researcher recognized that reality is subjective and socially constructed. More importantly, it would acknowledge that interpretations of the challenges and approach of ECD service providers may vary based on cultural, social, and individual factors. Practically, with an interpretivism perspective, researchers wish to gain a profound comprehension of the phenomenon and its complexity in its unique context instead of attempting to generalise the basis of understanding for the whole population (Creswell, 2007 as cited in Lan, 2018). In this study, the researcher sought to comprehend the IECD approach implementation experiences and challenges of ECD educarers/caregivers and ECD owners/managers at ECD centers.

The choice of interpretivism is also based on what Creswell (2016) posits, that the interpretivism approach is employed in most of qualitative research conducted in the social sciences; it is established on the existence of numerous realities rather than a single reality, hence this is an early childhood development study (Lan, 2018). Furthermore, the selection of interpretivism was based on the assumption that human behaviour is complex and cannot be predicted by predefined probability (Creswell,

2016). The study sought to gauge participants' views on the IECD approach experiences and challenges in a center setting.

Ultimately, this study was underpinned by an interpretive approach because the researcher views the social world from the participant's perspective and considers the participant's perception of the world (Lan, 2018). Hence, an interpretive approach depends upon the participant's and the researcher's views of reality. They ascribe meaning to the world around them, and to understand that meaning the researcher has to interpret their own worlds of reality while interacting with the outer world around them (Khan, 2014). Ultimately, both the participants and the researcher had different views on the implementation of IECD approach at ECD centers based on their experiences and cultural view of the phenomenon.

### **3.4 Population and Sampling**

#### **3.4.1 Population**

The population of this study consisted of 300 ECD centers in Windhoek's Western suburbs, Katutura, and informal Settlements. They are privately owned, and their names range from Early Childhood Development Center, Pre-Primary, Kindergarten, Creche, and Daycare. Moreover, the community, churches, non-governmental organisations, private- and, civil society organisations, and private schools owned and operated ECD centers. The government does not own any of these ECD centers. The ECD center owners are principals, center managers, coordinators, headteachers, as well as center owners. The childminders are generally called teachers, educarers, aunties, and caregivers.

### **3.4.2 Sampling**

Sampling in qualitative research involves selecting a small group of key informants who can provide profound insights into the phenomenon under study (Clark & Creswell, 2015). This study employed a homogeneous purposive sampling technique appropriate for selecting individuals with common characteristics and experiences relevant to the research focus. As Creswell (2016) explains, homogeneous purposive sampling ensures that participants belong to the same subculture or group, providing a comprehensive understanding of a particular phenomenon. More importantly, this study's sampling strategy was designed to identify participants with direct experience in implementing the Integrated Early Childhood Development (IECD) policy at the center level.

Moreover, the study purposefully selected six participants: three ECD center heads/owners and three caregivers/educarers with a minimum of five years of working experience in ECD settings. Additionally, the selected ECD centers have been operational for at least five years to ensure institutional stability, knowledge, and experience in implementing early childhood programs. The centers were selected from three socio-economic settings in Windhoek: Western suburb (predominantly middle- and upper-class residents), Katutura (primarily low-income earners), as well as Okuryangava's informal settlement (mostly unemployed and low-income earners). This selection ensured the study covered diverse perspectives on ECD service delivery across different economic contexts.

Since phenomenological research prioritises in-depth exploration of lived experiences, small, non-random samples of information-rich cases are preferred (Khan, 2014). The six ECD practitioners were selected based on their extensive work experience,

ensuring they had sufficient knowledge and familiarity with ECD service delivery's challenges, strategies, and realities. In addition, the selection of centers was also based on their resourcefulness and socio-economic context, ensuring representation from different backgrounds and allowing for meaningful comparisons. This sampling approach enabled the study to generate rich, detailed narratives, providing valuable perceptions into the practical implementation of the IECD policy within varied ECD contexts.

### **3.5 Data Collection Methods**

#### ***3.5.1 Research Instruments***

In line with the qualitative, phenomenological, and interpretive research design and approaches, it was deemed appropriate to employ observation and interviews to yield in-depth data. Creswell (2014), as cited in Almalki (2016), opines that researchers need to question themselves about the knowledge claims and theoretical viewpoints that they are contributing to any research.

**Semi-structured interviews** were conducted to allow participants to express their views openly while enabling the researcher to probe deeper into emerging themes. Moreover, interviews were audio-recorded with participants' consent to ensure accuracy and allow for follow-ups if necessary (Clark & Creswell, 2015).

Observations were conducted at the three selected ECD centers to record real-time interactions, resource availability, and the IECD policy implementation approach. More importantly, observing the centers in their natural settings provided a contextual understanding of the challenges experienced by practitioners (Almalki , 2016).

The researcher employed an observation checklist and as well as an interview- guide. The observation checklist focused on structure, facilities, playroom environment, infrastructure, play-learning materials, curriculum, feeding programmes, activities, safety, health, as well as other services available. It was also employed to observe and record caregivers' and children's behaviors as well as teaching and learning approaches. Moreover, the interview-guide for caregivers focused on their understanding of the IECD concept, identification and service provision of children with special needs, challenges experienced in delivering IECD, and learning. The researcher employed structured observation to identify the predetermined categories developed in the observation checklists to record predetermined actions and behaviors (Wisdom & Creswell, 2013). Face-to-face interviews with semi-structured open-ended questions were conducted, followed by further probing and clarification. The adoption of semi-structured interviews permitted the researcher to be focused while simultaneously allowing participants to provide reflections as well as granting them freedom to discuss the different aspects of the phenomenon under study.

### ***3.5.2 Data Collection Procedures***

After obtaining an Ethical Clearance certificate from the UNAM Research Ethic Committee Office, the researcher sought the authorisation of ECD owners of the identified ECD centers to conduct the study at their ECD centers. Thereafter, appointments were secured with selected participants to explain the envisaged study. A letter was written to the ECD center heads, owners, and participants to seek for their permission. The aspects of the purpose of the study, anonymity, and confidentiality were explained in the letters. These letters were written so that the researcher could obtain research permission and consent from participants prior to data collection.

### **3.5.3 Data Analysis**

This study employed Heidegger's interpretive phenomenological approach to analyse data. This method facilitated the process of comprehending how the researcher created meaning out of the participants' perceptions of the IECD policy (Khan, 2014).

### **3.6 Validity and Reliability**

From the onset of this study, it is imperative to note that the concept validity in qualitative research is different from the validity in quantitative research (Wisdom & Creswell, 2013).

The concept of validity differs significantly from its application in quantitative research (Wisdom & Creswell, 2013). While validity in quantitative research is concerned with the generalisability and measurability of findings, qualitative validity focuses on ensuring that the findings truly reflect the realities and experiences of participants in their natural contexts. To establish the trustworthiness of this study, the researcher ensured credibility, confirmability, transferability, dependability, and authenticity in data collection and analysis (Clark & Creswell, 2015).

Creswell (2016) asserts that validity in qualitative studies is achieved through systematic observations and procedures to ensure accuracy and consistency in findings. In line with this, the researcher employed multiple strategies to enhance the study's credibility. Equally important, observations and interviews were conducted in the participants' natural settings (ECD centers) to ensure authentic responses. The interviews were audio-recorded to enable follow-ups and verification, minimising the risk of misinterpretation. Moreover, this method ensured that the data remained accurate and reflective of participants' lived experiences, aligning with the study's



phenomenological approach. The researcher also employed triangulation, using multiple data sources to validate findings and enhance the study's reliability.

### **3.7 Research Ethics**

Ethical considerations are central to qualitative research, particularly in phenomenological studies, which profoundly engage with participants' personal experiences (Khan, 2014). Given the sensitive nature of qualitative inquiry, researchers must take additional precautions to protect participants' rights, privacy, and well-being. This study adhered to strict ethical guidelines to ensure confidentiality, informed consent, and ethical integrity throughout the research process.

Prior to data collection, the researcher obtained ethical clearance from the University of Namibia's Research Ethics Committee, ensuring that the study met institutional and professional ethical standards. Moreover, participants were fully informed about the study's purpose, procedures, and rights, including the voluntary nature of their participation and their right to withdraw at any time without consequence. Participants' identities were anonymised adopting unique codes (e.g., CM2 or CG1) instead of personal names to ensure confidentiality. Additionally, all interview transcripts, recordings, observation notes, and photographs were securely stored and will be retained for at least one year after the study's completion to maintain research integrity.

It was imperative that participants signed a consent form acknowledging their understanding of the study and willingness to participate. The researcher also assured participants that their responses would be used strictly for academic purposes and future research. Furthermore, all cited sources were properly acknowledged to uphold

research ethics regarding intellectual honesty and academic integrity. By adhering to these ethical principles, the study ensured that participants' rights and dignity were safeguarded while producing credible and ethically sound findings.

## **CHAPTER 4: PRESENTATION, DISCUSSION AND INTERPRETATION OF DATA**

### **4.1 Introduction**

This chapter presents the study results from the semi-structured interviews as well as observations with the participants at the ECD centers. The first section of this chapter describes the profile of the participants. The second section presents the data from interviews conducted with ECD caregivers and owners, and the third section discusses the findings. Moreover, the fourth section presents the findings from observations. It is imperative to reiterate that the study sought to explore the implementation experiences and challenges of the IECD approach at ECD centers in Windhoek, Namibia. The following research questions informed the study:

1. What are the experiences of Windhoek ECD providers and caregivers regarding IECD provision?
2. How do ECD providers in Windhoek implement IECD policy in their early childhood development center settings?
3. What are the challenges experienced by ECD service providers in Windhoek in implementing the IECD policy?
4. What kind of support would ECD providers (owners and educarers/caregivers) need in order to align their services to the expectations of the IECD policy?

The researcher generated data through interviews and observations, which were analysed thematically which enabled the researcher to describe the participants' 'lived experiences.'

## **4.2 Demographic Profiles of the Participants**

The sample of this study consisted of six (6) participants. These participants were drawn from the three selected centers. Moreover, the demographic profile covers items such as respondents' ages, the location of ECD centers, the teaching experience of ECD caregivers, and the owners' or managers' management or ownership experiences. This study deemed it fit to collect demographic data of these participants in aspects such as age, number of years they had spent in ECD centers working with the children, as well as their respective role.

Table 2: Profile of ECD owners/managers interviewed

| Participant | Gender | Age | Qualification                        | Years of Experience | Role          |
|-------------|--------|-----|--------------------------------------|---------------------|---------------|
| CM1         | Female | 49  | Grade 12 only                        | 20 years            | Owner/manager |
| CM2         | Female | 36  | Grade 12 and NIED ECD Certificate    | 14 years            | Owner/manager |
| CM3         | Female | 58  | Standard 10 and NIED ECD Certificate | 18 years            | Owner/manager |

Table 3: Profile of ECD caregivers/educarers interviewed

| Participant | Gender | Age | Qualification                                                      | Years of Experience | Role               |
|-------------|--------|-----|--------------------------------------------------------------------|---------------------|--------------------|
| CG1         | Female | 32  | Grade 12 and NAMCOL Certificate in ECD                             | 9 years             | Caregiver/Educарer |
| CG2         | Female | 24  | Grade 10 and capacity building Certificate of the City of Windhoek | 6 years             | Caregiver/Educарer |
| CG3         | Female | 32  | Grade 12 and NAMCOL Certificate in ECD                             | 12 years            | Caregiver/Educарer |

Tables 2 and 3 present a summary of the profile of the ECD owners/managers and ECD caregivers/Educарers from Windhoek's selected ECD centers. In addition, the demographic data collected indicates that the ECD owners are all above 36 years old and the caregivers are all 32 years old and younger. More importantly, this data indicates that all ECD owners and caregivers are females. Participants had six (6) to

20 years experience of working with children. The academic qualifications for ECD owners and educarers, ranged from Grade 12 as well as a combination of Grade 12 with an ECD certificate.

## 4.3 Findings from ECD Interviews

### 4.3.1 Emerging Themes from the Data.

**Table 4: Themes and sub-themes**

| Number                                                                                                                       | Theme                                                           | Sub-Theme                                                                                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. What are the experiences of Windhoek ECD providers and caregivers about the IECD provision?</b>                        |                                                                 |                                                                                                                                                                                                                        |
| 1.                                                                                                                           | Experiences of ECD Service Provider                             | <ul style="list-style-type: none"> <li>• Inspiration from Children</li> <li>• Encouraging and easy to work with more minor children,</li> <li>• Making a Difference in a Child's Life</li> <li>• Motivation</li> </ul> |
| <b>2. How do ECD providers in Windhoek implement the IECD approach in their early childhood development center settings?</b> |                                                                 |                                                                                                                                                                                                                        |
| 2.                                                                                                                           | Information and capacity in ECD practices                       | <ul style="list-style-type: none"> <li>• Personal upscaling through reading and attending training,</li> <li>• Browsing and utilizing Internet resources</li> <li>• Reading books and watching videos</li> </ul>       |
| 3.                                                                                                                           | Approach to curriculum training, daily routine, and activities, | <ul style="list-style-type: none"> <li>• Access to curriculum and training,</li> <li>• Sources of curriculum and other learning materials,</li> <li>• Daily activities and routines.</li> </ul>                        |
| 4.                                                                                                                           | IECD policy training and implementation,                        | <ul style="list-style-type: none"> <li>• IECD approaches and policy implementation,</li> <li>• Knowledge and understanding of IECD Policy</li> <li>• <i>Training and experience of IECD implementation</i></li> </ul>  |
| 5.                                                                                                                           | Assessment of children's development and progress               | <ul style="list-style-type: none"> <li>• Formal observations and recording of children's progress,</li> <li>• Informal observation of children's development,</li> </ul>                                               |

| <b>3. What challenges do ECD service providers in Windhoek face in implementing the IECD policy?</b>                                                     |                                                       |                                                                                                                                                                                                                                                                                                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6.                                                                                                                                                       | Children with special needs                           | <ul style="list-style-type: none"> <li>• Identification of children with special needs,</li> <li>• Support for children with special needs,</li> <li>• Treatment of children with special needs,</li> <li>• Inclusivity of children with special needs in activities,</li> <li>• Training in psychosocial support</li> </ul> |
| 7.                                                                                                                                                       | Impact of the Covid-19 pandemic on ECD centers        | <ul style="list-style-type: none"> <li>• Yearning for teaching and interacting with Children</li> <li>• Emotional impact of Covid-19</li> </ul>                                                                                                                                                                              |
| 8.                                                                                                                                                       | Parental involvement in center activities,            | <ul style="list-style-type: none"> <li>• Active Participation in School Events</li> <li>• Sharing of the center programme and children's progress report</li> </ul>                                                                                                                                                          |
| 9.                                                                                                                                                       | Challenges and Barriers to ECD service provision      | <ul style="list-style-type: none"> <li>• Time Management, Caregiver Coordination, and Parental Engagement,</li> <li>• Factors affecting parental involvement</li> <li>• Insufficient art activity materials</li> <li>•</li> </ul>                                                                                            |
| <b>4. What kind of support would ECD providers (owners and educarers/caregivers) need to align their services to the expectation of the IECD policy?</b> |                                                       |                                                                                                                                                                                                                                                                                                                              |
| 10.                                                                                                                                                      | Support needed and expectations                       | <ul style="list-style-type: none"> <li>• Financial Support from government and Stakeholders,</li> <li>• Professional Development through studying and skills up scaling through training,</li> <li>• Need to Professionalize ECD</li> </ul>                                                                                  |
| 11.                                                                                                                                                      | Additional comments and final word on the way forward | –                                                                                                                                                                                                                                                                                                                            |



#### **4.3.1 Theme 1: Experiences of ECD Service Providers**

*Question 1: What are the experiences of Windhoek ECD providers and caregivers regarding the IECD provision?*

In this question, all the participants were motivated and eager to explain what inspired them to become educators/caregivers. All three educators/caregivers narrated the experiences that motivated them to choose Early Childhood Development as a career. Understanding the motivations behind their decision to work with young children was essential for comprehending the dedication and passion these caregivers brought to their roles. In addition, by investigating their reasons and aspirations, the researcher gained insight into the transformative impact they sought to have on the lives of the children they cared for. To view this from Namibian cultural and social aspects, caregivers often perceived their roles as part of a more significant cultural responsibility to care for the most vulnerable (Shifotoka et al.,2021). Furthermore, this was imperative since it enabled the researcher comprehend the variables that influenced people to become caregivers and ECD owners. Through deliberation, the broader theme of Experiences and Approaches was identified, consequently, four sub-themes emerged from theme one. These themes were, inspirations from children, encouraging, easy to work with small children and making a difference in children's life and motivation. According to UNICEF Namibia (2020), caregivers who considered their work valuable to communities' well-being were more motivated. This sense of giving back to the community can be a key motivator, in particular in a context where support for children and vulnerable populations is profoundly valued.

#### **4.3.1.1      *Inspiration from Children***

One of the participants, CG1, expressed the following regarding her motivation and inspiration:

“Um, what inspired me were basically the children because my dream is always to help the children ever since I was a small girl. I always wanted to help the children and be their inspiration”(CG1).

The ECD educarer/caregiver expressed her motivation and passion for her work, which was deeply rooted in her interactions and connections with the children they cared for. Moreover, the caregiver's inspiration derived directly from the children they worked with; that inspiration has been a lifelong dream for her. The passion and dedication of ECD caregivers provided here were evident in their daily attendance at the center, where they create nurturing environments for the children.

#### **4.3.1.2      *Motivation and Finding Young Children Easy to Work With***

The educarers/caregivers indicated that young children encouraged them. Over time, they fell in love with younger children in their care. To further outline the experiences of the ECD educarers/caregivers in implementing IECD policy, a caregiver expressed the following:

“Ok, let's say it's the way I started. OK, let me say when it comes to ECD, I think it's easier to work with younger kids, because, that's why I chose ECD. It's easier to work with smaller kids because they understand you well and they are easy to discipline and it's good to work with small kids.”(CG 2)

The reasons provided by CG2 for their preference was aligned with the sub-theme Encouraging and Easy to work with more minor children. Moreover, the caregiver indicated that smaller children understand them well, which suggested that communication and interaction with young children were more forthright, encouraging, and practical. Additionally, she reported that younger children were easy

to discipline, implying that managing behavior and creating a structured environment was less challenging with this age group. This caregiver's expression might also suggest that they found fulfillment and satisfaction in their interactions with this age group. This appreciation indicated a positive attitude towards the unique aspects of working with young children.

#### **4.3.1.3      *Making a difference in a child's life***

Participants two and three referred to as CG2 and CG3 expressed the following:

(CG3)

“To make a change in one child's life every single day.” CG2. "You know it's so nice to see them develop they coming in January so vulnerable and at the end of the year you see how the child has grown in your care. So, that for me, it is just a big milestone to see them grow." (CG3)

Both participants expressed their deep satisfaction and fulfillment in witnessing the children's developmental progress. The following response attests to that: "it is so nice to see them develop," . The response above indicates CG3's natural joy and appreciation for being a part of the children's growth journey. She has also indicated how they receive the children when they are vulnerable, which underscores the vulnerability of young children when they initially enter the ECD centers. It is imperative to note that this vulnerability accentuates the significance of the caregivers/educarers' role in providing a safe and nurturing environment for the children to flourish.

When posed the same question, participant CM1 responded:

“I think it is just my passion. I am always upgrading and implementing new things. Yeh, my staff already knows that I love to change and improve and so on” (CM1).

The center owner/manager was encouraged by her love for children and passion for child development. More importantly, her creativity and willingness to improve the circumstances of the children, characterised her as a resourceful person.

#### **4.3.1.4      *Motivation for Becoming ECD Owners***

When ECD owner/manager participants were questioned about the reasons that motivated them to become ECD center owners, all three participants' motivation to become ECD center owners stemmed from their personal experience as parents looking for centers for their children as well as becoming frustrated when they were unable to find an appropriate location or facility to enroll their children.

“It was in the year 2000, when I was looking for a school for my child. All the places I saw, I thought to myself, I can not leave my child there, I cannot leave my child there. So I searched for so long, and eventually I took her to one lady's house where she did it in the backyard.” (CM1).

The response above indicates that CM1, a center owner, could not find an appropriate facility for their child. Furthermore, the concerns for the quality of education and care provided at other places she visited compelled her to act. On the other hand, CM2 responded to the same question as follows:

“I saw that small children move around in the community where I live, and those who go to school or kindergartens travel long distances to Babilon, Okahandja Park, and Kilimanjaro. This was a huge challenge for parents and guardians” (CM2)

The response above indicates that respondent CM2 recognises the gaps in the education system, specifically in ECD service provision or available options for their child's education and care. Moreover, this ECD owner is likely motivated by her love and compassion for children. She aimed to provide a better alternative for these often-neglected children. Furthermore, CM1 expressed the following:

“Yeh, I suppose we just accepted things over the years. But generally I think, they should, like they said 1000 days is very important in a child's life. If they could just focus more on that, I think it could change more children's lives. To leave children, especially in rural areas and only put them in Grade 1 is not good. I think it is a lot of pressure on children and it put a lot strain on children.”(CM1)

Both ECD owners, CM1 and CM2, understand the importance of ECD and the well-being of children. Sullivan and Brumfield (2016) reveal that the science and the statistics indicate that to improve nutrition during the first 1,000 days must be part of any strategy to ensure optimal child development, shrink inequalities, and enable future generations to live healthier. CM1 stressed how vital the first 1000 days are, similar to what some experts believe (Sullivan & Brumfield, 2016). After all, these actions can allow for the vital molding of children.

#### ***4.3.2 Theme 2: Being informed and capacitated in ECD practices***

*Question 2: How do ECD providers in Windhoek implement the IECD approach in their early childhood development center settings?*

In response to the question above, participants expressed how they kept themselves capacitated as part of their regular approaches. Early Childhood Development is dynamic, with new research and best practices emerging continually. This theme underscores the importance of caregivers' plans to stay informed and updated with the latest developments in the ECD domain. Equally important, by exploring the methods they employ to enhance their capabilities, such as attending workshops, engaging in professional networks, and seeking ongoing education, caregivers are committed to provide the best care for young children. Three sub-themes that emerged from theme two of being informed and capacitated in ECD practices were personal upscaling through reading and attending training, browsing and utilising Internet resources, reading books, as well as watching videos.

##### ***4.3.2.1 Personal upscaling through reading and attending training***

Personal upscaling and reading allow one to explore a wide range of topics and stay informed about the latest research and trends in early childhood development. This self-directed learning is imperative, and the initiative and dedication to enhance one's

skills and professional expertise are paramount. Educators and caregivers seem to be more self-driven in their approaches, as evidenced by the following response:

“By doing my best and reading a lot about the children, mostly in the magazines. Sometimes I see books about kids and get training from the center and workshop. We sometimes get in-house training.”(CG1).

In the response above, the educator/caregiver describes her proactive approach to personal and professional development in the field of ECD. Moreover, the caregiver indicates that she engages in personal reading to enhance her understanding of children. More importantly, she reads extensively, primarily magazines and books about children. Reading provides valuable information to the caregivers so that she stays relevant and develop age-appropriate practices for effective service delivery. Furthermore, the caregiver also acknowledges the support she receives from the ECD center where she is employed. The center provides her with training opportunities, including workshops and in-house training sessions. This formal training enables her to stay updated on best practices, policies, and approaches related to early childhood development. All in all, the caregiver's commitment to personal reading and willingness to participate in center-provided training indicates a strong desire to continuously improve her knowledge and skills in the field of ECD.

Additionally, the training provided by the ECD center complements the caregiver's reading efforts. Workshops and in-house training sessions likely cover specific topics relevant to the center's curriculum, policies, and the Integrated Early Childhood Development (IECD) approach. Equally important, this formal training ensures that the caregiver aligns her practices with the center's guidelines and national standards for ECD. By combining personal reading with formal training, the caregiver becomes well-equipped to provide high-quality care and education to the children under her

supervision. Moreover, the combination of self-driven learning and structured training from the center contributes to the caregiver's growth as a professional. It supports the overall development and well-being of the children in her care.

#### **4.3.2.2      *Skills enhancement through reading books and watching videos***

When participants were questioned on how they capacitate themselves, reading books and watching videos seem to be the most effective strategies for continuous learning and staying up-to-date with the latest research, trends, and best practices in ECD. Moreover, as early childhood development continues, caregivers and ECD service providers must continuously expand their knowledge and skills to provide high-quality care and education to young children, hence remain relevant in the ECD field. One of the ECD educators/caregivers expressed the following:

“Maybe only read books. We also watch videos and things” (CG2).

The educator/caregiver indicated that he reads books to acquire information and insights related to early childhood development (Republic of Namibia, 2017). More importantly, reading books can provide extensive knowledge on various topics, including child development, age-appropriate teaching methods as well as behavior management strategies.

The other source of information the caregiver indicated was watching videos to complement his learning process. Videos can be valuable tools for visual learning, providing practical demonstrations of teaching activity techniques, playroom management strategies, as well as other aspects relevant to working with young children. Moreover, by reading books and watching videos, the caregiver adopts a multifaceted approach to professional development. He seeks to broaden his

understanding of ECD by accessing information through different mediums, catering to different learning styles and preferences. The caregiver's willingness to engage in these learning activities reflects his dedication to improving their practice and serving the children under their care more effectively. By leveraging various learning resources, the caregiver can enhance his capacity to create a nurturing and stimulating environment for young learners (Republic of Namibia, 2017).

#### **4.3.2.3      *Browsing and utilising Internet resources***

Regarding question 2, the use of technology is imperative in today's world, since it allows anyone in any field or profession to access a wealth of information on various aspects, and ECD is no exception. Moreover, the use of the Internet can provide trending and new developments in ECD best practices, including age-appropriate activities, teaching strategies, play activities, behavior management techniques, as well as child development milestones (Nuugwedha, 2014). The Internet provides a convenient and efficient means to stay informed and updated on best practices and relevant research in the field. The following response expressed this notion:

“Since I am now in a new age group, it was a big challenge for me. It's the first time, so now, with the Internet, you can't fail. So when we want to do activities, I go Google or read even the modules or they always give you additional sources to read. So since I like to read, I will always have books and read, and I always go browse, especially those that give you additional resources, then I always go back and read, not always, but whenever I feel that I need to read something and the internet is a good source.” (CG3)

In the response above, the caregiver highlighted the use of Internet resources to address the challenges they face when working with a new age group of children. The response indicates the caregiver's proactive approach to seeking information and support through online platforms and sources (Acronyms & Summary, 2019). Moreover, the caregiver underscores the importance of the Internet as a valuable resource,



particularly when facing new challenges. The participant describes employing search engines like Google to find information related to the specific needs of the children in their new age group. Additionally, the respondent reported accessing modules and additional resources provided to them, likely by the ECD center or organisation, to enhance knowledge and understanding of the age group. Furthermore, the caregiver's passion for reading is evident in the desire to explore additional resources provided. This curiosity and eagerness to learn contribute to the professional development and growth as an early childhood educator. The ability to adapt and acquire knowledge through online sources allows the caregiver to develop effective teaching methods and provide quality care to the children they serve.

#### **4.3.3 Theme 3: Curriculum training, daily routine and activities**

*Question 2: How do ECD providers in Windhoek implement IECD policy in their early childhood development center settings?*

Curriculum and training explore the crucial aspects of educational programs and the training provided to Early Childhood Development caregivers which fulfills an imperative role in IECD implementation. Moreover, comprehending the curricular framework and the training initiatives that equip caregivers with the necessary skills and knowledge is paramount to ensuring high-quality care and development opportunities for young children (Acronyms & Summary, 2019).

This 3 examined methodologies, content, and effectiveness of training programs, focusing on the dedication and expertise required to nurture the minds of the young children. Furthermore, to ensure better coordination management and development of ECD services in Namibia, the IECD allocates roles and responsibilities to the core ministries involved in the development of children. The MoGECW spearheads

initiatives aimed at children aged zero to four (0-4) years. MoEAC is accountable for services to children aged 5-8 years. The MoEAC is also responsible for pre-primary education, as well as the training and curriculum development for pre-primary level. More importantly, this could direct and guide the ECD service providers on the approaches and programmes to implement. In addition, receiving training on the curriculum is fundamental for caregivers to effectively implement the established educational program and provide high-quality learning experiences to the children. The training equips the caregivers/educarers with the necessary knowledge, skills, and comprehension of the curriculum's objectives, ensuring that they can support the children's development effectively (Acronyms & Summary, 2019).

Moreover, at the foundation of any ECD center lays a well-designed daily routine, carefully curated to foster the holistic development of young children. More importantly, Theme 3 investigates the structure of the ECD daily activities, including playtime, learning experiences, meals, and rest periods. By comprehending the concept and activities planned for the children, provide valuable insights into how ECD caregivers create nurturing environments that lay the foundation for a lifetime of learning and growth. The following sub-themes emerged from Theme 3: Training on the curriculum, Sources of curriculum and other learning materials, as well as Daily activities and routines.

#### **4.3.3.1      *Access to curriculum and training***

The sub-theme of access to curriculum and training explores the crucial aspects of educational programs and the training provided to Early Childhood Development Educarers/caregivers. Nuugwedha (2014) defines early childhood education curriculum as a multilevel process that encompasses what happens in early childhood

education playroom each day. Moreover, it replicates the philosophy, goals, and objectives of early childhood. Understanding the curricular framework and the training initiatives that equip educarers/caregivers with the necessary skills and knowledge is paramount to ensuring high-quality care and development opportunities for young children. Regarding the question of curriculum and training received, both CG1 and CG2 responded affirmative to the question.

“Yes, how we have the date for the day. It always expects it's a planning...”(CG1)

“Yes, for one week from SPEC” (CG2)

Both participants reported having a written document that outlines the daily schedule or plan for the day (named daily program). The response above suggests that there is a structured plan or curriculum in place that guides the daily activities and routines in the ECD center, even though the respondent's response was not very refined. More importantly, this written document serves as a planning instrument, ensuring that the educarers/caregivers have a refined outline of the activities and learning experiences they will provide to the children throughout the day. In addition, CG2 confirmed that training was received on the curriculum or educational program called SPES. Receiving training on the curriculum is imperative for caregivers to effectively implement the educational program and provide high-quality learning experiences to the children. More importantly, the training equips the caregivers with the necessary knowledge, skills, and comprehension of the curriculum's objectives, ensuring that they can support the children's development effectively (Nuugwedha, 2014).

#### **4.3.3.2 Sources of curriculum and other materials**

The question posed on how they acquire the curriculum and other materials, participants expressed the following:

"We get it from Head of Departments (HODs), the center creates its own curriculums."(CG1)

“When I came to the center, it is the one everyone was using.” (CG3)

“I’m currently used to follow the Letterland for literacy and phonic. When I came to the Centre there is I don’t know we should call it a regular curriculum, but we are following that according to the themes...”(CG3)

CG1 reported that curriculum materials is received from the Head of Departments (HODs) or other relevant authorities. The phrase "the center creates its own curriculums" suggests that the ECD center has the flexibility to tailor and adapt the provided materials from donors to suit the specific needs and goals of the center. In addition, CG3 in particular indicated that a curriculum was received upon joining the ECD center. She also discovered that the curriculum in use was similar to what was used by other centers or widely adopted in the ECD field. Moreover, the educator/caregiver further explicitly expressed the use of a specific phonic and literacy programme being adhered to and referred to it as Letter land in the ECD center. Letter land is a phonics-based educational program designed to teach young children letter sounds, blending, and reading skills through engaging and interactive methods. This implied that the participant was familiar with the curriculum's structure, content, and methodologies and used it as a foundational framework to guide the children's language and literacy development (Source?). In addition, this suggests that the Letter land component might be integrated into a broader curriculum framework that includes thematic units and activities aligned with the children's developmental needs and interests. The information provided by CG1 and CG3 indicated that ECD centers use their curriculum. The centers seem to operate independently regarding curriculum provision, training to curriculum provision, training, as well as usage. This can be a disadvantage to the centers located in the informal settlements and low-income suburbs.

#### **4.3.3.3      *Routine for Daily Activities***

Responding to research Question 2 on how the ECD providers in Windhoek implement IECD in their early childhood development settings.

The daily routine came out, and it is key and critical for every center, and it is key to be embedded in the children's minds while young. That will, in the end, culminate them into responsible and law-abiding citizens. On the question of daily routine and activities an educator expressed the following:

“Okay, if they come in the morning um, we have our breakfast. So after the breakfast, uh we go for the potty training...” (CG1)

In the above response the respondent describes the morning routine at the ECD center. The mentioning of having breakfast indicates the importance of providing a nutritious start of the day for the children. The subsequent activity of "potty training" demonstrates the caregivers' efforts in assisting the children with personal care and toilet training, which is a crucial component of early childhood development. Moreover, the continuation of the daily routine beyond this point suggests that caregivers undertake additional activities and tasks to ensure a structured and engaging start to the day for the children. Contrary to CG1's center routine and activities, CG2 starts their morning routine by singing and praying, as indicated below:

"With the morning devotions, we first start to sing Christian songs with the children and then pray together with the children. From there they go to classes and do free play before we start our lessons." (CG2)

The response above indicates the morning devotional routine at the ECD center. The caregivers engage the children in singing Christian songs and praying together, setting a positive and spiritually nurturing tone for the day (Nuugwedha, 2014). "Free play" also signifies the importance of unstructured playtime, allowing the children to explore, socialise, and foster creativity before formal and structured activities

commence. This might also indicate that nutrition does not fulfill much of an important role here. This might have been contributed by the location and the socio-economic status of the community this center serves. It might also indicate lack of knowledge and understanding of nutrition. On the other hand, CG3 expressed the preparation of the playroom.

"OK, when we come to the center, we are two teachers in our playroom. The ones that are here first will always set up the classroom in the morning because you have to be there first before the kids, so we usually do not set up the tables there is not enough space..." (CG3)

The response above indicates that the educator/caregiver provides insights into the preparation and arrangements facilitated in the morning before the children arrive as part of the morning routine. The attention to creating an organised and conducive learning environment for the children is imperative. She also suggests the practical challenges that Educators/caregivers might experience while arranging the learning environment, emphasising the importance of resource management in an ECD setting.

#### **4.3.4 Theme 4: IECD Policy Training and Implementation**

*Question 2: How do ECD providers in Windhoek implement IECD policy in their ECD center settings?*

By examining the implementation methods tailored to the IECD approach, valuable insights are provided into the practices that foster an environment where children thrive and grow into well-rounded individuals. The sub-themes are: IECD approaches and policy implementation, knowledge and understanding of IECD Policy as well as *training and experience of IECD implementation.*

#### **4.3.4.1 IECD Approaches and Policy implementation**

The IECD policy and approach is designed to provide a holistic and integrated approach to early childhood development, encompassing health, nutrition, education, as well as social protection. This approach is crucial for educarers/caregivers and ECD managers/owners to provide comprehensive and practical support to young children's overall development. The participant expressed the following:

“I remember that policy, but I cannot recall”. (CG1)

The vague understanding of the IECD approach and policy may result from various reasons such as inadequate or lack of information or insufficient training, a lack of ongoing reinforcement, or a limited opportunity to apply the approach in their day-to-day practice. For this service to continue, it is imperative to sensitise legislative and policy-making bodies to formally support the ECD centers in implementing IECD policies and programs (Atashbahar et al., 2021). It is also possible that the caregiver may not have had access to comprehensive information on the IECD policy or resources approach to comprehend the principles and methodologies of the IECD approach. An unrefined understanding of the IECD approach can impact the caregiver's ability to fully implement it in their interactions with the children and families. Similarly, CG2 expressed the following negative response:

“No, I don’t know” (CG2)

When the respondent indicated that they had no understanding of the IECD approach or policy, it suggested that they may not be familiar with the principles, methodologies, and goals of this integrated approach to early childhood development as stipulated by the IECD policy. This lack of understanding can have implications for practice and the ability to provide holistic support to young children.

The IECD approach underscores the importance of addressing multiple aspects of early childhood development, such as health, nutrition, education, and social protection, in a coordinated and integrated manner as indicated on the inter-sectoral integration approach theory (Atashbahar et al., 2021). By not understanding this approach, caregivers may forfeit opportunities to provide comprehensive support. Moreover, they may focus on isolated and traditional aspects of a child's development rather than addressing the interconnected nature of different developmental domains. Sadly, children might not benefit from this intervention. Hence, training sessions, workshops, and ongoing professional development opportunities can enable caregivers comprehend the approach, to implement it effectively in their daily interaction with children and families.

#### **4.3.4.2      *Knowledge and understanding of IECD Policy***

The Educarers/caregivers and three ECD owners/managers had no knowledge about the IECD Policy as no manuals were provided to them. Moreover, a comprehensive knowledge of this policy is imperative for ensuring compliance, consistency, as well as adherence to the best practices in the field. Through exploring the level of familiarity caregivers have regarding the IECD policy, it will enable them to gain a profound comprehension of the dedication to providing an enriching as well as nurturing environment for young learners. Three participants expressed the following:

“I cannot recall that, sorry. No!” (CG1)

“There is no copy” CG2.

“Do not know” CG3

When educarers/caregivers indicated that they did not know the IECD policy, it suggested they were not familiar with the policy, guidelines, or principles outlined in the IECD framework. Moreover, this lack of knowledge can have implications for the caregiver's practice and ability to align their approach with the overarching goals and



objectives of the IECD policy. This might be due to lack of information regarding the distribution centers operated by the Ministry responsible for Early Childhood Development.

The IECD policy typically encompasses a comprehensive approach to early childhood development, addressing health, nutrition, education, and social protection for young children (Republic of Namibia, 2017). In addition, regular communication, workshops, and access to policy documents can enable caregivers become acquainted with the principles and guidelines outlined in the IECD approach. More importantly, by doing so, caregivers can effectively align their practices with the policy and provide holistic support to the children's development and well-being. A participant expressed the following regarding ECD:

“Only ECD” (CG2).

The phrase "Only ECD" suggests that the caregiver's expertise and understanding are primarily focused on early childhood development, which might be specialised in this area. Moreover, it indicates that the participant had limited knowledge regarding ECD. . The participant is likely well-versed in child development theories, age-appropriate teaching strategies, and approaches to fostering early learning and growth. Possessing knowledge limited to ECD can be advantageous in the context of working with young children since it allows caregivers to deeply comprehend the developmental milestones and individual needs of the children in their care (Republic of Namibia, 2017). Conversely, caregivers need to continue expanding their knowledge beyond ECD to incorporate broader aspects of child development and education as per the policy guideline. It is imperative to note that while specialised knowledge in ECD is imperative, comprehending how early childhood education connects to later stages of

development and schooling can provide caregivers with a more comprehensive perspective on continuing learning.

#### **4.3.4.3      *Training and experience in IECD implementation***

Training and experience fulfill imperative roles in the successful running of ECD centers and the implementation of IECD policy. Unfortunately, as reported by CM1 and CM2, they could not receive proper formal training. Instead, they had to receive informal training independently and gain access to literature resources in their own time. The two center owners responded as follows:

“No, I have just done my own research, just self education...”(CM1)

“No training received.”(CM2).

Regarding training, there is no formal training, as indicated in the responses of CM1 and CM2, both respondents indicated that they have not received any formal training on how to implement the Integrated Early Childhood Development (IECD) policy or approach as per policy (Early Childhood Development and Education in Namibia, 2012). Even the participants who received training, it was hands-on with the children and not on policy implementation.

The ECD owners received some kind of training as indicated by CM3 below:

“Yeah, we were trained to work in the ECD centers, and the children...” (CM3).

The response above indicates that the participants received training. Moreover, this training was only specialised to children and not on how to run and manage the entire center or handle the logistics as well as implementing the guiding legal documents such as the IECD policy. Furthermore, accessibility to the IECD policy and training programs significantly impact the quality of care offered to children in Early Childhood Development centers. This sub-theme focuses on the training, experience

and availability of policy documents and training opportunities, examining the challenges as well as opportunities for caregivers to access the resources they need to enhance their skills and knowledge. Identifying impediments as well as potential solutions can pave the way for more equitable and effective Early Childhood Development practices.

More importantly, owning a copy of the IECD policy is imperative for both ECD owners and caregivers, as it enables them align their practices with national and international standards and ensures that they provide high-quality care and education to the children and families they serve. Moreover, the policy serves as a valuable resource to comprehend the government's vision for early childhood development and the role caregivers fulfill in achieving those objectives.

To address this issue, ECD centers and organisations can facilitate access to copies of the IECD policy for their caregivers. More importantly, regular training sessions and workshops focusing on the policy's principles and implementation can also enable caregivers become more familiar with the guidelines and integrate them into their daily practices. Moreover, the MGEPSW needs to establish distribution centers for important national documents and sensitize ECD service providers through various media.

#### **4.3.5 Theme 5: Assessing children's development and progress**

*Question 2: How do ECD providers in Windhoek implement IECD policy in their early childhood development center settings?*

Assessing children forms part of IECD implementation at the center level. Moreover, observation, monitoring and assessing children's development is integral to identifying their strengths and areas that require support. This theme examined the methods and instruments caregivers employ to monitor children's progress, identify developmental

milestones, and assess their overall well-being (Woodhead, 2014). This crucial aspect of Early Childhood Development ensures that interventions are tailored to meet individual needs and that children are provided the best possible opportunities to thrive and reach their full potential. The following sub-themes emerged: Formal observations and recording of children's progress, Informal observation of children's development, Monitoring, and individual children support.

#### **4.3.5.1      *Formal observations and recording of children's progress***

This formal observation and recording method enable the caregiver to monitor individual children's learning and development over time and tailor their support accordingly. Moreover, by documenting the children's progress and challenges, the caregiver gains valuable insights that inform their planning, teaching strategies, and overall approach to fostering a nurturing and supportive learning environment. One caregiver/educator in response to the question on observation and recording children's progress expressed the following:

“Like me, I have a diary that I always record. If I write down like I write down the date, this is my personal diary. I write down the date, generate down Raven rainbow color identification, then I teach the kids how to identify the colors of the rainbow. Then I ask them so the kids can name the colors or write down very good excellent fine still developing things to perfect. I was right down with the kids if they played the puzzle I always see who struggles.”(CG1)

In the response above, the participant underscores the practice of recording observations in a personal diary. The diary serves as a valuable tool for the caregiver to document various aspects of the children's development, interactions, and learning experiences.

Moreover, the participant expressed that observations are always recorded in the diary, suggesting a dedicated and consistent approach to documentation. The participant

commences by writing down the date, ensuring a chronological record of their observations. The two caregivers CG2 and CG3 expressed the following:

“Over most of the time, I do individuals, I help them individually. That is how I know how a child progresses and how a child is developing. That is how I am able to write a report.” CG2

The participants make notes of which children may be struggling or thriving. A diary or some notebook is employed to record the identified areas where additional support might be required. Overall, the response indicates the caregivers/educarers’ dedication to recording detailed observations in their diaries. This practice underscores the participants’ commitment to reflective teaching and individualised care.

#### **4.3.5.2      *Informal Observation of Children's Development***

This informal observation indicates the child's progress in language development and underscores the caregiver's ability to recognise and appreciate the child's milestones through informal observation. In addition, informal observation enables caregivers to comprehend each child's unique growth and development naturally and unobtrusively. More importantly, observing children in various contexts provides caregivers a holistic view of their skills, abilities, and social interactions. CG3, who is responsible for infants, expressed the following:

“At this stage, we almost only have our observation, which we do. Sometimes it is not even formal that you observe them with paper or images, or we can do that. Just by watching them on the playground, we can see that this is not the same child that we had last week. We can see if a baby starts to talk; for example, a girl started to talk, he started to talk now, then she's just forever saying: Teacher, water, wash! wash! It is so nice that you knew it was a baby who can now talk.”  
(CG3)

In the response above the participant described the practice of informal observation of children's development. Moreover, the participant noted that they primarily depended

on observations to comprehend and monitor the children's progress and development. This informal observation occurs during various activities and interactions, such as watching the children on the playground.

The participant also reported that formal observation methods, such as employing paper or images, are not always necessary. Instead, they rely on their attentive observations while engaging with the children. By keenly watching the children's behavior and interactions, the participant gains valuable understanding into the children's development. The example provided in the response demonstrates the caregiver's informal observation of a child's language development. The phrase "It is so nice that you knew it was a baby who can now talk" indicates the caregiver's delight in observing and acknowledging the child's emerging language skills.

#### **4.3.5.3      *Monitoring and Individual Children Support***

By providing individualised support, the caregiver can address the specific needs of each child and tailor their teaching strategies accordingly. The participant provided the following response:

"Over most of the time, I do individuals, I help them individually. That's how I know how a child progresses and how a child is developing. That is how I'm able to write a report." (CG2)

In the response above the participant underscores the individual monitoring and assessment of the children in their care. Moreover, the participant's approach involves providing personalised attention to each child, enabling them to closely observe and monitor the child's progress and development. She states that they spend a significant amount of time working with children individually. The response suggests that the participant's monitoring and assessment process is continuous. By continually working with children individually, the caregiver gains a comprehensive understanding of their developmental progress over time. Moreover, this allows the

educarer/caregiver to recognise patterns, identify areas of growth, and assess any developmental concerns that may arise. It is imperative to note that IECD goes beyond the provision of early learning and stimulation through ECD centres and addresses all aspects on a child's holistic development (UNICEF, 2017). Achieving a national understanding and consensus around the importance of IECD and the diversity of quality responses available is an important aspect of the framework (UNICEF, 2017). The personalised assessments inform parents, guardians, and other stakeholders about the child's development and educational journey.

Individual monitoring and assessment are essential components of high-quality early childhood education. In addition, it enables caregivers to provide targeted support, ensure optimal learning experiences, and foster a positive and supportive learning environment for each child. By focusing on individual progress, the caregiver can meet the diverse needs of the children in their care and support their holistic development.

#### **4.3.6 Theme 6: Children with Special Needs**

*Question 3: What challenges do ECD service providers in Windhoek face in implementing the IECD policy?*

The theme on children with Special Needs probes into the essential aspect of inclusivity in Early Childhood Development centers. Moreover, it is imperative to ensure early detection of impairments and identification of children with special needs, adequate interventions are required (Republic of Namibia, 2017). This theme explored the unique challenges and opportunities involved in providing care and support for children with special needs. Comprehending the diverse requirements of these young learners is imperative for creating a nurturing environment that caters for their specific developmental needs, fostering a sense of belonging and empowerment within the

ECD community. The following sub-themes emerged: Identification of children with special needs, Support for children with special needs, treatment of children with special needs, Inclusivity of children with special needs in activities, and Training in psychosocial support.

#### **4.3.6.1      *Identification of Children with Special Needs***

By examining the identification strategies and interventions employed to address their requirements, valuable insights are gained into the dedication and expertise required to create an inclusive and enriching learning environment. Moreover, children are constantly exposed to numerous adversities such as violence, abuse, divorce separation of parents due to different reasons, traumatic experiences, etc. The participants reported the following:

“Children with special needs are identified through observations made by Head of Departments (HODs) and teachers. Behavioral issues are also noted in files.”(CM1)

“If we see a problem with the child, we address it with our HOD, and then they have a meeting with the parent to advise the parent on what to do. So yes, we do support.”(CG1)

The ECD manager/ owner referred to as CM1, reported that the center implores in identifying the children with special needs. In the Namibian context, children with special needs” refers to children who have physical, mental, or developmental disabilities that require additional support and services to fully participate in educational and social activities (Ministry of Education, Arts and Culture, 2013). On the other hand, the caregiver CG1 describes their practice of providing support to children by discussing any observed problems or challenges with the Head of Department (HOD) and involving the parents in the process. Both approaches of ECD owners and caregivers demonstrate a collaborative effort to address and support the child's needs effectively. When the educarer/caregiver notices a problem with a child,



they implement the proactive step of bringing it to the attention of the HOD. Moreover, this action demonstrates the caregiver's attentiveness to the development of the children in their care. More importantly, the involvement of the HOD in the process indicates that the caregiver is part of a supportive team where concerns about the children's development are appropriately addressed and discussed with higher authorities.

Additionally, the response accentuates the importance of communication and collaboration with parents. By meeting with the parents, the HOD can share observations and advice on how to support the child's development at home and in an ECD context. Furthermore, this collaboration ensures that parents are aware of any concerns and cooperate with the caregiver and the ECD center to provide comprehensive support for the child. Discussions and meetings to address concerns demonstrate a proactive and caring approach to supporting children's growth and development in the ECD context. This collaborative action fosters a positive and supportive environment for both the child and their parents, enhancing the child's overall learning experience.

#### **4.3.6.2      *Support for Children with Special Needs***

Children with special needs require a concerted effort from all stakeholders. Moreover, involving parents in discussions about their children's development allows for a collaborative approach to support, as parents can provide valuable insights into the child's behavior, experiences, and family dynamics. It also fosters a strengthened partnership between the caregiver and the child's family, which is imperative for a child's progress.

Considering the involvement of a social worker demonstrates a commitment to seeking additional expertise and support in understanding and addressing the child's needs, which is imperative in early identification. It is important to note that social workers are trained professionals who can provide valuable insights, guidance, and interventions when supporting children and families facing various challenges. This is articulated clearly by CM1, CM2 and CG2, when they reported the following:

“The center provides support for children with special needs by promptly referring them to appropriate services and informing parents about the situation.”(CM1)

“Children with special needs are retained at the center, and parents are advised to seek medical help for their children.”(CM2)

“I think it's just to involve the parents and maybe a social worker to talk to her or to see how we can help the child or to hear the background stories, maybe something happened to her to see that's why she's too shy to talk.”(CG2)

The responses from CM1, CM2 and CG2 suggest a proactive approach to providing support to children who have special needs. In addition, CG2 proposes involving both the child's parents and a social worker in the process to better comprehend the child's context and offer appropriate support. All of the participants recognise the potential significance of the child's background stories and acknowledge that there might be underlying reasons for the child's behavior. Moreover, by involving parents and a social worker, the center's service provider aims to gather comprehensive data about the child's experiences and any possible events that may have contributed to the child's current behavior, ultimately not to get rid of the child. By involving parents, social worker, medical support, the center owners and caregiver aim to gain a more comprehensive understanding of the child's situation, therefore implement appropriate strategies to enable the child overcome any dilemma, therefore thrive in the ECD setting.

#### **4.3.6.3      *Treatment of Children with Special Needs***

Promoting equality and fairness in an ECD setting is imperative for fostering a positive and nurturing learning environment. Treating all children equally enables to build trust and confidence, promote positive interactions, and support each child's well-being and development.

“It does really need more attention than others, but you know that child is always treated equally as the others. I don't see that the class teachers are discriminating, even if he enters our classroom, we will let him stay there.” (CG3)

In the response above, the caregiver acknowledges that there is a child who needs more attention than others, possibly referring to a child with specific needs or challenges. Moreover, the statement reflects the caregiver's commitment to providing inclusive care and ensuring that every child, regardless of their individual needs, is treated with equal respect, dignity, and fairness. The caregiver's emphasis on not discriminating against the child demonstrates their dedication to promoting an inclusive and supportive environment in the ECD setting.

#### **4.3.6.4      *Inclusivity of children with Special Needs in activities***

Inclusivity is the foundation of effective Early Childhood Development, and this sub-theme focused on the activities implemented to foster an inclusive atmosphere that celebrates diversity. Moreover, comprehending how caregivers adapt their approaches to accommodate children with special needs promotes an appreciation of the transformative impact of inclusion on the overall development of every child. By exploring inclusive practices, it indicates how ECD centers become spaces of acceptance, understanding, and growth for all children. By embracing diversity and accepting all children without bias or discrimination, caregivers can support the emotional well-being and development of each child (Matengu et al., n.d.). On the

question of involving children with special needs in all activities, the participant expressed the following:

“Yes, we involve them in all possible activities.” (CG1).

Woodhead (2014) indicates that comprehensive education for children living with disabilities and distinct educational needs identified the following virtues of successful inclusive schools in developing countries, moreover, early intervention when children are in the formative stage of development can include the following:

- Small classes
- Well-trained and valued teachers
- Multi-ability groups
- Positive learning environments with awareness of the community
- strong parental involvement.

The above components are imperative, hence the responsibility rests upon the state for equal treatment and service provision to children living with disabilities (Haihambo & Lightfoot, 2010).

It is interesting to note that CG1 confirms the inclusivity of all children in all activities, irrespective of their challenges at the ECD center. The statement indicates that the educator/caregiver ensures the participation and engagement of these children in the same activities as their peers without exclusion or discrimination, irrespective of their special needs. By including these children in various activities, the caregiver supports their social, emotional, cognitive, and physical development.

Inclusive participation allows children with special needs to interact with their peers, develop friendships, and build critical skills through shared experiences. Moreover, inclusive activities also provide opportunities for children to learn from each other and develop empathy, compassion, and understanding. By being exposed to diverse

abilities and perspectives, all children in the class can grow in an inclusive and supportive environment. Another caregiver underscored equal treatment of children to demonstrate fairness as follows the equal treatment of children to demonstrate fairness.

“A Child is always treated equally as the others. I don't see that the class teachers are discriminating, even if he enters our classroom, we will let him stay there.” (CG3).

In the response above, the participant underscored that all children, including the child being referred to, are treated equally and fairly in the ECD setting. This practice is necessary for creating an inclusive and nurturing learning environment. When children are treated with equal respect, dignity, and care, it fosters a sense of belonging and builds trust between children and their caregivers.

#### **4.3.6.5      *Training in Psychosocial Support***

Psychosocial support is an integral component of nurturing the emotional well-being of children in Early Childhood Development centers. This theme focuses on the training caregivers receive to provide the necessary emotional and social guidance that fosters resilience and self-confidence in young learners. Moreover, by examining the techniques and approaches employed in psychosocial support, the role of caregivers in shaping a positive and nurturing environment for the children in their care is acknowledged. On the question of psychosocial support training all three selected participants reported the following:

“None.” (CG1)

“No” (CG3)

“No, no training. Maybe before I came to the center, no, it's training for another teacher but not for me.”(CG3)

In these responses, the participants expressed that they had not received any training related to psychosocial support. In addition, the absence of training indicates that the participants may not have or may have undergone formal education or professional

development in the field of Early Childhood Development, but not regarding psychosocial support. Conversely, not receiving any training might not necessarily imply a lack of skills or competence in caregiving. Caregivers in ECD settings can possess natural caregiving abilities, personal experiences, and inherent qualities that contribute to their effectiveness in working with children with special needs.

Formal training is critical; it can provide caregivers with valuable knowledge, evidence-based practices, and specialized techniques to support child development and learning more effectively. Training may cover topics such as child development milestones, age-appropriate activities, behavior management, communication strategies, health and safety protocols, and inclusive teaching methods. While the caregiver may not have received formal training, it is essential to consider the caregiver's dedication, personal qualities, and experience in providing care and support to children with special needs.

The participant expressed the possibility that training might have been provided to other teachers at the center, but not to her. This suggests that there may be some disparity in the training opportunities offered to different staff members in the ECD setting, regarding special training such as psychosocial support which could be a disadvantage to the recipients of the services, the children.

#### **4.3.7 Theme 7: Impact of COVID-19 Pandemic to ECD**

*Question 3: What are the challenges faced by ECD service providers in Windhoek in implementing the IECD policy?*

The outbreak of the COVID-19 pandemic brought about significant challenges, including the closure of educational institutions, and ECD centers were not excluded. This theme focuses on the profound impact of the school closure on children's early development, caregivers' responsibilities, and the extensive ECD environment. It

examined the resilience and adaptability displayed by caregivers during this unprecedented time and the measures implemented to ensure that young children continue to receive essential care and support. The two sub-themes or codes developed are: Yearning for teaching, interacting with children as well as the emotional impact of COVID-19.

#### **4.3.7.1      *Yearning for Teaching and Interacting with Children***

Part of the important attributes of an educator/caregiver is a distinct interest in education and children. Moreover, as an educator/ you get attached to children, and the bond and love of the children grow exponentially. One of the respondents expressed the following:

“Um, I missed uh, I missed to, I missed to teach them, I miss interacting with them, I missed having so much fun with the kids last year, yeah because of the pandemic. Yes. I missed out a lot”(CG1)

In the response above, the participant expresses a strong sense of longing and unhappiness for not being able to teach, interact, and have fun with the children in their care, due to the Covid-19 pandemic. The phrase "*I miss to interact with them*" accentuates the caregiver's yearning for a meaningful interaction and connection with the children. The phrase "I missed having so much fun with the kids last year" further confirms the caregiver's deep emotional connection and enjoyment in spending time with the children in playful and enjoyable activities. This sentiment indicates the caregiver's genuine commitment to making a difference in the children's lives by actively engaging with them and fostering their development.

#### **4.3.7.2      *Emotional impact of Covid -19 and school closure***

The Covid-19 pandemic has caused a lot of emotional disorder globally, and Namibia was not excluded. Moreover, the pandemic also negatively impacted parents, children as well as caregivers. Many people lost loved ones due to Covid-19. Children were not attending classes at the center for a significant period of time. Children ought to develop holistically, including emotional development. A participant expressed the following regarding the impact of the Covid-19 pandemic:

“There were times where we had to...mh! I think we'll have to work on an occupational basis. I also had to work from home since I had just to come in; you know you are at home, and you will even call your kids the little ones names because you just miss them, and that was not nice. At the time it was that the kids couldn't mingle, they couldn't play together we just had to keep them inside in our playroom and it felt so Claustrophobic because they're not allowed to play outside yeah, I think that was the saddest part.”(CG3)

The participant underscored the challenges and emotional feelings experienced during the Covid-19 pandemic, when they had to work on rotational basis, including working from home. Moreover, the participant reported the emotional impact of being separated from the children they care for. The separation affected both the caregivers and the children socially and emotionally. Mueenuddin (2021) advised the Government of the Republic of Namibia (GRN) to provide more resources for the management and staffing of the child protection unit. More importantly, there is a need for financial and emotional support. The caregiver's concerns about the children's inability to interact and play outside during the pandemic further accentuates the sense of longing to interact as well as provide a conducive environment for the children's, cognitive, emotional and social development.



#### **4.3.8 Theme 8: Parental involvement in Center activities**

*Question 3: What challenges are ECD service providers in Windhoek face in implementing the IECD policy?*

Parents and guardians are vital stakeholders in the Early Childhood Development journey of their children. This theme explores the significance of parental involvement in fostering a holistic development approach. In addition, when parents are actively engaged, they can reinforce learning at home, provide emotional support, and contribute to a strong partnership with caregivers and the ECD center in general. The following two sub-themes emerged: Active participation of parents and guardians, sharing center programmes as well as children's progress reports.

##### **4.3.8.1 Active Participation of Parents and Guardians**

The active participation of parents in the center's events and activities enhances the sense of belonging, community, and family engagement within the ECD center. Moreover, it also provides opportunities for parents to interact with their children in a supportive and joyful environment, strengthening the parent-child bond and developing a sense of belonging. By understanding the diverse approaches adopted to involve parents, gain insights into the collaborative efforts that create a strong foundation for a child's lifelong learning journey. IECD requires all stakeholders' involvement and collaboration at all levels. CG1 stated the following:

"So we have in a fun walk, usually a fun walk is at the beginning of April. The parents come, and then the parents, the children, and the teachers walk around the blocks here like a few kilometers. Girls have a sports day. There is also a concert; the kids have concerts, and the parents always come and watch."(CG1)

In the response above, the participant describes various events and activities in the ECD setting in which parents actively participate. These events include fun walks,

sports day, and concerts organised for the children. In addition, another participant expressed the following regarding parental participation:

“Ok, most of the time when we do things. For example, we were having a career day. Then every parent has to come with their child then they have to come and say what their child wants to become between what their child really wants to do in life.”(CG2)

In the response above, the participant discusses a specific event called "career day" that takes place in the ECD center. During career day, parents are actively involved and encouraged to participate with their children. Moreover, parental participation in career day fosters a strong partnership between the ECD center and families, promoting collaboration in the child's educational journey. Another caregiver stated that parental involvement varies from parent to parent; while some are fully involved, others are less involved.

“We can see that let us say that 70% of the parents are involved and then you get those parents that are just bringing their kids and do not mind what happens when they turn their backs.” (CG3)

All three participants indicated that parents are involved in center activities to a certain degree, moreover, it varies from center to center and parent to parent. CG1 indicated that the parents and guardians participate in center activities such as fun walks, sports day, and concerts. This sub-theme explored the interactive activities and engagements that caregivers facilitate with parents and guardians. It is imperative to note that these activities strengthen the bond between families and Early Childhood Development centers and encourage a shared commitment to the child's growth and development. Viatonu et al (2012) contends that a massive public awareness campaign for parents and other stakeholders on IECD should be conducted for a successful implementation of IECD.

It is not unusual in ECD settings to observe varying levels of parental participation. Parental involvement can be influenced by various variables, including parents' work

schedules, personal circumstances, cultural norms, as well as level of awareness about the importance of active engagement in their child's early education.

#### **4.3.8.2      *Sharing Center Programmes and Children's Progress Reports***

These practices demonstrate a collaborative approach between the ECD center and the parents to address the child's needs and support their development. Moreover, when a child is experiencing difficulties, open and transparent communication between the caregivers and parents is imperative to ensure the child's well-being and progress.

By involving parents in the child's program and addressing concerns, the ECD center creates a supportive and inclusive environment that values the partnership between teachers and parents in nurturing the child's growth and development.

“When a child is or has a problem, we are also involved in reporting the problem to the parents so that they can know how their child is. If they struggle coming to the center, then they come and check their child.” (CG1)

In the response above, the participant underscores the importance of communication with parents when a child is experiencing difficulties or challenges. The caregiver fulfills an active role in reporting these issues to parents, informing them about their child's progress and any areas of concern. Besides the challenges, parents are encouraged to observe their children's progress and programs. Monitoring the child's programme and activities refers to parents reviewing the children's daily or weekly schedule and activities in the center to understand their children's routine and engagement in various learning experiences.

#### **4.3.9      *Theme 9: Challenges and Barriers of ECD service provision***

*Question 3: What are the challenges faced by ECD service providers in Windhoek in implementing the IECD policy?*

The Challenges and Barriers theme investigates the impediments experienced by Early Childhood Development caregivers and owners at the centers in delivering ECD services. Moreover, from resource constraints to societal norms, various factors can impede the smooth functioning of ECD initiatives. By examining these challenges, the researcher gained understanding into the complex landscape in which caregivers and ECD owners or managers operate. Hence, time management, caregiver coordination and parental engagement, are imperative factors in ECD.

#### **4.3.9.1      *Time Management, Caregiver Coordination and Parental Engagement***

Efficient time management, managing caregivers and motivating parents all can be classified as imperative. They all require diverse skills to manage ECD centers. Moreover, it demands that one effectively balances their responsibilities, both in caring for the children or dependents and managing their own lives. Parental involvement is imperative for a child's development (UNICEF, 2020). The research findings indicate that managing time and balancing various responsibilities is a notable challenge encountered by centre management in Early Childhood Development (ECD) centres. More importantly, this finding is significant in the context of ECD centers, which fulfils a crucial role in the early education and care of the young children. All three center owners experience the same regarding time management, balancing various responsibilities, managing teachers and unreliable parents or uninterested parents. The participants reported the following:

“Managing time and balancing various responsibilities is a challenge faced by the center management.”(CM1)

“Managing teachers and dealing with unreliable parents pose challenges for the center's management.”(CM2)

“The center faces challenges with parents' poor involvement and also encounters difficulties with fundraising efforts.” (CM3)

In the operation of Early Childhood Development, achieving excellence requires a multifaceted approach or skills. Moreover, it entails mastering effective time management, skillful coordination of caregivers as well as fostering meaningful parental engagement. The theme “Time Management, Caregiver Coordination and Parental Engagement” explores the complex set of challenges and opportunities that occur in the process of providing children with the best start in their education journey. It employs strategies, technique, and best practices to address these challenges and enhance overall leadership. This implies that balancing responsibilities and managing time efficiently directly affects the quality of care and education provided to the children (UNICEF, 2020).

The research findings suggest a need for strategies to address these challenges, which may include staff training in time management, adopting efficient administrative tools, and creating clear workflows and roles within the center. The ECD center management upholds multifaceted responsibilities, such as curriculum planning, staff supervision, financial management, parent communication, and ensuring a safe and nurturing environment. More importantly, the complexity of these tasks can render time management challenging. Efficient time management is critical for allocating resources appropriately, including staff time, materials, and financial resources, to ensure a well-rounded and effective early childhood program. Addressing these challenges can lead to more effective early childhood programs and better outcomes for the children under their care. Further research and practical interventions from the government may be necessary to support the center management in overcoming these obstacles (UNICEF, 2022).

#### **4.3.9.2 Factors Affecting Parental Involvement**

When participants were questioned about parental involvement, the center owners explained the various factors that impact parental involvement. Moreover, it is a fact that parental involvement fulfills a crucial role in a child's early childhood development. However, several factors can act as challenges and barriers, impeding full parental involvement at ECD centers, as explained by CM3:

“Parent involvement is very poor, possibly due to lack of awareness about daycare.” (CM3)

The response above indicates that the level of parental involvement can be affected by their understanding of the importance and role ECD fulfills. Some parents may not have access to adequate information or education about the impact of early childhood experiences on a child's development. More importantly, this lack of understanding may result in less active involvement in their child's early years. According to UNICEF (2022), to address this issue, it is imperative to educate parents about the significance of ECD and its long-term benefits on their child's cognitive, emotional, as well as social development. This can be achieved through community workshops, parenting classes, or awareness campaigns. Moreover, when parents better understand how their involvement can positively influence their child's future, they are more likely to participate in their child's early years actively. One of the center owners CM1 explained the lack of parental involvement due to their children's ages.

“Very Good involvement when children are young, but poor as they grow older. Age of children affects involvement, with parents more involved when children are younger.”(CM1)

The younger the children, the more parents are involved: It is commonly observed that parents tend to be more involved in the lives of their younger children compared to older ones. This can be attributed to several variables. Firstly, parents may feel a greater sense of responsibility and need to provide constant care and attention to their

younger children who are more dependent on them and probably new to the center. In addition, as children grow older, they become more independent and may require less direct parental involvement. Secondly, parents may have more time and energy to invest in their younger children as they have fewer responsibilities and commitments.

As parents age or get used to parenthood, they may have to manage multiple roles such as work, household chores, and caring for older children, which can limit their availability for active involvement in their younger children's lives. The Republic of Namibia (2020) contends that to ensure parental involvement remains consistent across all age groups, it is imperative to create opportunities for parents to engage with their older children. Moreover, encouraging open communication, involving parents in decision-making processes, and providing support and resources to enable parents balance their responsibilities.

One of the participants indicated that the lack of finance could be a contributing factor to parental participation. She stated:

“Poor involvement due to financial difficulties and parents not paying fees.” (CM2)

Parental involvement often extends beyond the boundaries of the home and school, including participation in fundraising activities to support the center to fulfil the needs of their children. However, financial constraints can impede parents' ability to contribute to such activities. Moreover, limited financial resources may prevent parents from being able to make monetary contributions or purchase items for fundraising events. Additionally, struggling parents may have limited time and energy to dedicate to fundraising efforts, as they may be working, managing multiple jobs, or dealing with other urgent priorities. To address this issue, schools and communities can explore alternative ways to involve parents in fundraising activities that do not

solely hinge on monetary contributions. This can include volunteering time or skills, contributing in-kind donations, or organising events that require minimal financial investment (Ministry of Gender Equality and Child Welfare, 2007). Additionally, ECD centers and communities should strive to create an inclusive environment where parents who cannot contribute financially do not feel excluded or marginalised. Recognising and appreciating all forms of parental involvement, regardless of financial capacity, this can be achieved.

It is also critical to note that the COVID-19 pandemic had brought significant challenges to ECD centers and educational institutions globally. Moreover, social distancing measures, lockdowns, and other health protocols have affected how schools and centers operate and engage with parents and children. While lower participation rates may result from the necessary precautions taken to ensure the safety of the children and staff, the center needs to find alternative ways to maintain communication with parents as well as involve them in their child's learning journey. Virtual meetings, online updates, and digital communication instruments have become essential in filling the void between parents and educators during these challenging times. However, they might not be feasible for all parents due to socio-economic backgrounds. Finally, this accentuates the lower participation rate of parents in the ECD center due to COVID-19 restrictions. The pandemic has necessitated adjustments in the way parental involvement is facilitated. However, it also presents an opportunity for centers to explore innovative methods to maintain parental engagement and support the children's development despite the challenges posed by the pandemic.

#### **4.3.9.3      *Insufficient Art Materials***

It is essential to ensure that the ECD center is equipped with relevant and sufficient learning materials and equipment including qualified caregivers. In addition, to ensure



that learning environment is conducive for promoting the holistic development of the children. Moreover, the promotion of art in ECD centers is a necessary activity; it not only assists with creativity and self-expression but it also encourages freedom of expression and observation of the environment (Phillips et al., 2010). One of the respondents noted the following:

“In our setup or classroom, we aim to do more activities with our hands like art activities such as collage. Being a caregiver, we must think outside of the box, and we tend to bring whatever we can find from our houses. We tend not to have enough materials, especially for art activities. Our problem is mostly materials.”(CG3)

In the response above, the caregiver discusses the challenges experienced in providing sufficient materials, particularly for art activities, in the ECD center. Moreover, art activities are imperative for fostering creativity, imagination, and fine motor skills in young children. It is imperative to note that insufficient art materials can limit the range and variety of artistic experiences offered to the children, impacting their opportunities for self-expression and creative exploration.

Despite the constraint in materials, the caregiver demonstrates innovation by thinking "outside of the box" and using whatever materials available from their own house. More importantly, the data revealed the dedication and commitment of caregivers to provide meaningful experiences for the children, even when faced with resource limitations. Having a well-equipped learning environment with a variety of materials enhances the quality of the educational experience and allows children to engage in hands-on, interactive, and creative activities. Moreover, plans can be drafted to secure additional resources, seek donations, or explore partnerships with organisations that support the Integrated Early Childhood Development and Education. Addressing the

challenge of insufficient materials may require collaboration between the ECD centers, caregivers, parents, and the community (World Health Organisation, 2020).

#### **4.3.10 Theme 10: Support Needed and Expectations**

*Question 4: What kind of support would ECD providers (owners and educarers/caregivers) need in order to align their services to the expectation of the IECD policy?*

This theme touches on the essential support required from the government and stakeholders to ensure the sustainability of the centers and the development of children. Moreover, the inter-sectoral approach, Policy framework, collaborative partnership, financial investment, as well as advocacy engagement contribute to the growth and enhancement of early childhood programs and education systems. The following sub-themes emerged: Financial Support from the government and Stakeholders and the Need to Professionalise ECD.

##### **4.3.10.1 Financial Support from Government and Stakeholders**

The centres require financial support from either the government and/or stakeholders to address various needs that are critical for improving early childhood education. CM2 expressed the following:

“The center requires financial support from the government and stakeholders to address various needs.” (CM2)

Financial support is essential for the long-term sustainability of early childhood centers. Moreover, it ensures that crucial resources, such as qualified staff, educational materials, and safe facilities, are maintained at a high and required standard. Furthermore, sufficient funding enables centers to invest in continuous quality improvement efforts. This includes updating curriculum materials, providing

professional development opportunities for caregivers, and enhancing the learning environment. CM1 expressed the following:

“The center is aware of other centers that have received support, and they emphasize the need for a systematic procedure for assistance.” (CM1)

The finding above implies that there is limited support to some centers, hence the need for a systematic process for assistance. In addition, this respondent implies that support might be available to everyone, conversely, there seems not to be an organised method of funding or assistance. More importantly, funding is required for the regular maintenance and improvement of facilities, ensuring that they remain safe and conducive to learning. Governments and stakeholders may attach accountability measures to their financial support, such as ensuring that funds are used effectively and transparently to achieve educational goals. Equally important, strong and continuous collaboration among stakeholders is crucial in ensuring that these centers receive the necessary resources to provide the best possible start for young children (Republic of Namibia, 2020). The GRN will need to establish new funding channels and models to ensure equitable distribution of resources. Moreover, this model will need to blend per capita expenditures for certain costs, such as school feeding and subsidies for learning materials, and expenditure item allocations for other costs, such as salaries, infrastructure maintenance, as well as training programs. (Republic of Namibia, 2020) This indicates that GRN would raise funds from partners and facilitate services from the private sector and non- governmental partners. Finally, the new model should have a simple approach to funding and monitoring programmes.

#### **4.3.10.2    *Need to Professionalize ECD***

The cultural perception of ECD as maternal caregiving rather than a professional role, coupled with limited resources for training, impedes the sector's development (Arregoces et al., 2019). Moreover, in the absence of ECD as a profession in Namibia, it is perceived as an impediment for IECD services and the poor quality of some ECD centers and services. As stated in the Fourth National Development Plan (NDP4: 2012/13 to 2016/17), "the formalization of ECD hinges on the investment of public funds to enforce the necessary legislative and regulatory framework and institutional capacity" (Republic of Namibia, 2017).

"I like the government to professionalize ECD. At the moment, in Namibia, because of the pandemic, to help the ECD is like financially, especially the ones in Katutura. Just to help them with financial support. Like there are so many kindergartens in Katutura that are struggling because of finance. The parents cannot pay, the owner of the school has no choice because she doesn't have money as well." (CG1)

In the response above, the participant expresses their expectation from the government, particularly the Ministry of Gender Equality and Child Welfare, to professionalise Early Childhood Development (ECD). The participant desires increased support for ECD centers, especially those that experienced financial challenges during the pandemic. The participant in particular mentioned kindergartens in Katutura, which are struggling financially, leading to difficulties in providing quality and equity care and education to all children. More importantly, the participant expects that the government should provide financial support to the centers, in particular, struggling ECD centers, ensuring that they can continue to operate effectively and cater to the needs of children and parents in the community. The participant expressed the following:

"The policymakers should always include kids with special needs because I don't see the vision in the curriculum in which kids with special needs are involved in the main. Also, teachers should also get training on how to work with these kids."(CG3)

The participant view above expresses their expectation from the policymakers, particularly the Ministry of Gender Equality and Child Welfare, to prioritise inclusion of children with special needs in the ECD curriculum. Moreover, the participant perceives that there might be a lack of focus on addressing the needs of children with special needs in the current curriculum. The participant advocates for a more inclusive approach that involves integrating children with special needs into the mainstream curriculum. Additionally, the participant accentuates the importance of providing adequate training for teachers to effectively support and engage with children with special needs.

Overall, the view indicates that the participant holds specific expectations from the Ministry of Gender Equality and Child Welfare. The participant desires the government's support in professionalising ECD centers and providing financial assistance to struggling kindergartens. Moreover, the Ministry of Gender Equality and Child Welfare (2021) reports that educarers who are trained in Basic Curriculum ECD Training Course working in community based ECD centres in poor and marginalised communities can be given an allowance of N\$1500. In addition, the beneficiaries must be Namibian between 18-59 years and not recipients of any other government grant, such as veterans grant and/or pension allowances, (excluding disability grant).

Additionally, the participant advocates for an inclusive approach in the curriculum, ensuring that children with special needs are adequately integrated and supported in the mainstream ECD settings. Finally, the caregivers' expectations from the Ministry of Gender Equality and Child Welfare, includes professionalising ECD centers, providing financial support to struggling kindergartens, and promoting inclusivity and

adequate training for teachers of children with special needs in the ECD curriculum (Ministry of Gender Equality and Child Welfare, 2021).

Fulfilling these expectations can lead to improved quality and effectiveness of Early Childhood Development services delivery in the country and ensure high return in investment for future prosperity.

#### ***4.3.11. Additional comments and final words from participants***

The ECD caregivers and ECD owners in their concluding comments all stated their expectation and recommendation mostly for the Ministry of Gender Equality, Poverty Eradication and Child Welfare. It became evident through the findings that it is imperative for the government and key stakeholders, including parents in this field to have clear future plans and suggestions to ensure the provision of high-quality ECD services. According to CM1, the expectation from parents is high for her to grow the center and even introduce school grades. CM1 expressed the following:

“I just want to uphold the standard; I want to keep it small. There are many people who are asking me to please make it bigger or to franchise it or go for grade 1, 2, 3, but my passion is for these small age groups, ECD basically. I feel there are enough Pre-primary, the government does pre-primary and up. I think ECD is the foundation and very important. I just want keep it from 0 – 4” (CM1).

The statement about upholding ECD standards, keeping it small and not expanding or franchising for grade one, two and three etc, emphasises the importance of passion for small children.

The following recommendations were provided:

- 1. Increased Investment:** The government should prioritise increased investment in ECD programs, recognising their long-term benefits for both children and society. This includes allocating sufficient funds for infrastructure,

teacher training, curriculum development, as well as parental support programs (UNICEF, 2022).

**2. Strengthening Curriculum:** The World Health Organisation (2020) reported that continuous plans should be constructed to develop and implement a comprehensive and age-appropriate curriculum that promotes holistic development, including cognitive, physical, social, as well as emotional domains. Moreover, this should be conducted in collaboration with child development experts and educators.

**3. Professional Development:** It is crucial to provide continuing professional development opportunities for ECD teachers and caregivers. Moreover, regular training sessions, workshops, and mentorship programs can enhance their skills and knowledge, ensuring high-quality care and education for children (Ministry of Gender Equality and Child Welfare, 2007).

**4. Parental Involvement:** UNICEF (2020; 2022) perceived parental involvement in ECD programs as imperative. In addition, the government should provide support and resources for parents to actively participate in their child's early learning and development, such as parenting workshops and home-based learning activities.

**5. Monitoring and Evaluation:** Establishing a robust monitoring and evaluation system is imperative to ensure the efficacy and quality of ECD programs. Moreover, regular assessments, feedback mechanisms, and data collection can assist to identify areas for improvement and make informed decisions.

The responses implied the importance of upholding ECD standards and keeping it small, rather than expanding or franchising for higher grades. It highlights the passion

for small children as a crucial factor in ECD. While passion and dedication are indeed imperative in providing quality care for young children, it is also important to consider the broader implications and potential benefits of expanding ECD services (Ministry of Gender Equality and Child Welfare, 2021).

Arguments for keeping it small and not expanding can have great benefits for children. Some of the benefits could be:

1. **Personalised Attention:** Smaller ECD centers can offer more individualised attention to each child; ensuring that their developmental milestones are enhanced and unique needs are fulfilled.
2. **Quality Control:** By keeping it small, it becomes easier to ensure the quality of ECD services, as close supervision and monitoring are feasible (Ministry of Gender Equality and Child Welfare, 2021).
3. **Nurturing Environment:** Small centers can provide a nurturing and familiar environment, developing a sense of confidence and emotional well being for children (World Health Organisation, 2020).

Balancing personalised attention and quality control with accessibility and long-term impact are imperative in ensuring the holistic development of all children. Moreover, the government and key stakeholders should engage in comprehensive discussions and research to make informed decisions regarding the future plans and direction of ECD. Government can also benefit by supporting motivated and competent ECD leaders to be the catalysts and champions in the IECD approach and policy implementers. In addition, CG1 stated the following:

“Best right dream job, work on a kindergarten. I just wanted to put from my family as a daily thing and my studies. I want to do a diploma. That's my dream, to open a



kindergarten, right here. I just want support for my family, as a personal daily thing and I'll be studying. Yeah, I want a bachelor.”(CG1)

The educator/caregiver remarks that their dream job is to work in a kindergarten, which is an ECD centre. She also expressed a desire to balance her family responsibilities with her studies. More importantly, this indicates an assurance to personal development, as she aims to improve her skills and knowledge in early childhood education through formal education and practical experience. Furthermore, she mentions her intention to pursue a diploma in early childhood education. This underscores her dedication to enhancing her qualifications and expertise in the field. Additionally, she expresses her dream of opening a kindergarten, indicating her long-term professional goal (Republic of Namibia, 2017).

Overall, the response reflects the participant's aspirations for both personal and professional growth in the ECD field. She has specific goals of obtaining a diploma and eventually opening her own kindergarten. Moreover, her request for support, especially from her family, underscores the importance of a supportive network in assisting individuals pursue their career goals and aspirations in the field of early childhood education. Two of the caregivers CG1 and CG2 further expressed their expectations as follows:

“Yes, I also want parents to be happy, it's quite with the work that I'm doing towards their children. They must meet me halfway like if. They always drop the kids in the morning they bring the kids in the morning they drop them for the day.” (CG1)

“Sometimes it feels that the parents don't read the messages we send them. We would like involvement and compliance.”(CG3)

From the responses above, the participants expressed their anticipation for parents to be satisfied with the care and education they provide to their children. Moreover, the

participants desired positive feedback and responsive communication from parents, indicating that they wanted the parents to be happy with the quality of service provided. They also mentioned the importance of a collaborative engagement, stating that parents should be involved in the care and education of the children. The participant may be implying that parental involvement and support fulfill a significant role in the child's development, hence they seek cooperation from the parents in this regard.

The findings indicate that there is a challenge with some parents not reading the messages they forwarded, which might impede effective communication between the caregiver and the parents. It can be concluded from the findings above that effective communication and collaboration between caregivers and parents are imperative for the well-being and progress of the children in the Early Childhood Development setting (UNICEF, 2017). The ECD owners concluded that the government ought to offer support to ECD owners: Two ECD owners expressed the following:

“I like the government to professionalize ECD. At the moment in Namibia because of the pandemic, to help the ECD is like financially the ones I cannot support, especially the ones in Katutura. Just to help them with financial support. Like there are so many kindergartens in Katutura that are struggling because of finance. The parents cannot pay, the owner of the school has no choice because she doesn't have money as well.”(CM1)

“The policymakers should always include kids with special needs because I don't see the vision in the curriculum in which kids with special needs are involved in the main. And also, teachers should also get training on how to work with these kids.” (CM2)

The ECD owners expressed the expectation from the government, in particular the Ministry of Gender Equality, Poverty Eradication and Child Welfare, to professionalise Early Childhood Development (ECD). Moreover, they wished for

increased support for ECD centers, in particular those that experienced financial challenges during the pandemic. One of the ECD owner/manager in the Windhoek's western suburb specifically mentioned kindergartens (ECD center) in Katutura, which were struggling financially, leading to difficulties in providing quality care and education to children. The Educarers/caregiver's expectation is that the government should provide financial support to these struggling ECD centers, ensuring that they can continue to operate effectively and cater to the needs of children and parents in the community.

Suggestions and expectations provided by CM3 to the policymakers, in particular the Ministry of Gender Equality, Poverty eradication and Child Welfare, is to prioritise inclusion of children with special needs in the ECD curriculum. In addition, the ECD owner observed that there might be a lack of focus on addressing the needs of children with special needs in the current curriculum. They advocated for a more inclusive approach that involved integrating children with special needs into the mainstream curriculum. Additionally, the ECD Owner/managers underscored the importance of providing adequate training for teachers (educarers/caregivers) to effectively support and engage with children with special needs. Moreover, they want the government's support in professionalising ECD centers and providing financial assistance to struggling ECD centers. Additionally, they advocated for an inclusive approach in the curriculum, ensuring that children with special needs are adequately integrated and supported in the mainstream ECD settings. They also underscored the importance of training for teachers to enhance their capabilities in working with children with special needs.

It can be concluded that the ECD owners' expectations from the Ministry of Gender Equality Poverty Eradication and Child Welfare, which include professionalising ECD services, providing financial support to struggling ECD centers and promoting inclusivity as well as adequate training for caregivers (United Nations Educational Scientific and Cultural Organisation, 2021). The distribution of ECD curriculum need to be extended nationally. Fulfilling these expectations can lead to improved quality and efficacy of Early Childhood Development programs and services in Namibia.

#### **4.4 Non- Participant Observations Findings**

Non-participant observations were conducted for the purposes of enriching the data and to confirm the data collected from interviews. For the purpose of non-participant observation, a deductive approach was applied by pre-defining themes based on the research questions.

More importantly, this approach assisted the researcher in establishing the experiences and challenges encountered by ECD service providers (ECD owners and caregivers) in the implementation of the IECD approach as outlined in the National Integrated Early Childhood Development policy (NIECD) policy in their respective ECD centers. During observations, notes of essential information were taken which were further examined to suit into themes and allowed for the comparison of findings from both sources. Moreover, non-participant observations were conducted to support the views expressed through interviews. The observations included activities of the ECD center owners and ECD caregivers/educarers.

The purpose was to observe the processes and practices followed on a day-to-day service delivery. This study focused on IECD approach and implementation, which is based on the National Integrated Early Childhood Development policy, which is the legal framework for ECD services. The three ECD centres that formed part of this

study included children 0 – 5 years old, which were the main focus for this study, which correlated with the Namibian policy. The centers were Center 1, Center 2 and Center 3.

The following themes were observed for the implementation of the IECD approach, namely, experiences and challenges in ECD centers: Type of Infrastructures and Facility, Playroom/Classroom layouts and practices and methods of delivery. The analysis for the non-participant observations were conducted per ECD center observed.

#### ***4.4.1 Center 1***

Center 1 is a privately owned ECD Centre managed by a 49 years old lady. It accommodated children aged 0 – 6 years old of mixed races. Moreover, the center is situated in Eros, which is a suburb for the middle to high-class homeowners. This community is classified as affluent, where most of the inhabitants are middle to high class. The center consisted of a Center Manager, who is the owner, Head of Departments as well as caregivers/educarers. At Center 1, caregivers were responsible for implementing the curriculum at the playroom/classroom level. They were responsible for taking care of children and to ensure that the programme and activities for children were facilitated accordingly and effectively. Being an ECD Section Head at the City of Windhoek, the researcher considered it suitable to conduct non-participatory observation at the ECD center. The observation was conducted in the four playrooms namely: baby class 0 – 18 months, Toddler class 18 to 24 months, in 2 – 3 years and 4 – 5 years old playroom. This observation was conducted over 5 days. The detailed observation results for Center 1, situated in an affluent neighbourhood and catering for middle to high-class families, indicate a well-established and professionally managed early childhood development center.

#### **4.4.1.1      *Type of Infrastructure and Facilities***

It was observed that the center is constructed with bricks, concrete and corrugated iron sheet. The structural appearance of the facilities is indicative of a high level of investment and commitment to providing an exceptional learning environment. Moreover, the furniture, equipment, and security measures were excellent, child-friendly and in outstanding condition. The center exceeded the recommended standards, which underscores the importance placed on safety and quality. The observation for Center1 revealed that the center prioritised the physical well being of the children and has the resources to maintain an excellent facility. It was further observed and established that the boundary was fenced with a wall and electrical wire, security camera, monitored within the center office. The outdoor areas and the playgrounds were paved, rubberised, shaded and divided as per age group. Moreover, and it was well equipped with recommended equipment for children's motor-skill development. The interior area such as kitchens, restrooms, sickbays, and playrooms were all in excellent condition. All rooms were furnished and equipped appropriately with child sized toilet pots in the toilets, various kitchens with child friendly cutleries. The Covid-19 protocols were highly complied with at this center, including the wearing of masks, sanitising of hands and shoes as you enter, demarcating of various play areas for children to distance themselves from others, including the sleeping areas.

#### **4.4.1.2      *Playroom and Materials layout***

The observation of the playroom layout, the materials were in good condition, appropriate, and sufficient. This underscored the attention to detail in creating an engaging and developmentally appropriate play environment. It was an inviting environment for children to explore and interact, which will enable children to develop

cognitively, socially, emotionally and physically. This is crucial for young children's cognitive, social, and physical development. The availability of suitable materials and an effective layout suggested that the center was well prepared and supported children's learning through play. Due to Covid-19 protocols, children were allocated square blocs where they must sit and do their work and activities. This was an indication that the health and hygiene of every person in the center was highly valued, including visitors.

#### **4.4.1.3      *Method of Delivery and Practices***

Through observation, the researcher discovered that Center 1's delivery methods and practices were very impressive, stimulating environment, safe and hygienic. The caregivers were so creative and engaged the children through out. The ratio of teacher to children was below the recommended number and that was a blessing to the caregivers. There were two caregivers per age group. It reflected a commitment to high-quality early childhood education. A daily program was also observed. It indicated that children had a structured routine, which can promote consistency and a sense of security and order. The findings on a stimulating environment suggested that the center provided opportunities for exploration and learning. Additionally, the commendable teacher-to-child ratio is essential for ensuring individualised attention, responsive caregiving, and a safe environment.

Overall, Center 1 observation findings demonstrated a strong commitment to provide an exceptional early childhood education experience for children from the community it served. Moreover, these children seemed fortunate and privileged to be in a good center. The infrastructure, a well-designed playroom, and impressive teaching practices created a nurturing and stimulating environment, which is key in IECD. It is imperative for the center to maintain these high standards, continue professional

development for staff, and adapt to evolving educational best practices to ensure the ongoing advancement of the center as well as development of the children in its care. Lastly, effective communication with parents from middle to high-class families can further enhance the educational experience and ensure alignment with their expectations and goals for their children.

#### **4.4.2 Center 2**

This is the detailed observation result for Center 2, located in a low-income neighbourhood and serving families in this socioeconomic range.

Center 2 was a privately owned ECD center. In addition, the center was owned by a 58 years old lady and it accommodates children aged 3 – 6 years old. The center is situated in Greenwell Matongo. Poor to low-income homeowners occupied the suburb, which rendered the area a low-class community. The center consisted of only the Center Owner, who was the Head teacher and four Caregivers/Educators. At Center 2, caregivers were responsible for the teaching and caring of children. Moreover, they were also responsible for ensuring that the programme and activities for children were conducted as per the Step out of Poverty through Education Encouragement and Support (SPES) provided programme and activity plan. SPES is a non-profit organisation that supports ECD centers in Windhoek. The non-participant observation was completed over three days, because it was small with few playrooms. More time was spent on the playroom and at the outdoor activities. The playgroup of children observed for three days ranged from 3-4 years and 4 -5 years old. This was conducted to observe the facilities, activities, as well as the method of delivery of caregivers. The observation revealed several areas of challenges that required improvement in the early childhood education setting.



#### **4.4.2.1      *Infrastructure and Facilities***

The building for Center 2 was constructed in two kinds of styles. Some of the playroom with bricks and cements, roofed with corrugated iron sheet, and the other part was built with corrugated iron sheet only, situated in Greenwell Matongo location. The observation revealed that the infrastructure and facilities, including the building, fence, playground, furniture, equipment, and security measures, were in existence and were effective. Several critical shortcomings were observed. The owner's house was also in the premises and attached to the center. The reality that the owner's house was on the same premises raised concerns about the separation of personal and educational spaces.

Additionally, insufficient space for outdoor play and a small playground, leading to overcrowding, can impede children's physical development and safety. Although, the owner attempted to equip the center by seeking support from private organisation and donor agencies, inadequate space is a major challenge. Some of the facilities 'condition raised questions about the overall safety and suitability of the environment.

#### **4.4.2.2      *Playroom Structure and Materials***

The observation of the playroom and materials layout were fairly good. However, there is room for improvement in creating an engaging and developmentally appropriate indoor play space and inclusion of materials, such as books, appropriate toys and games. With regards to COVID-19 protocols, the teachers wore masks, as well as few children. No sanitation of hands was observed. Moreover, the outdoor area was not levelled and there were stones that posed a danger to children. While some elements were deemed appropriate and sufficient, addressing the shortcomings in playroom quality may enhance the overall learning experience for the children.

#### **4.4.2.3      *Method of Delivery and Practices***

The observation for the method of delivery and practices revealed fairly good practices under the circumstances that prevailed. It was an indication of a moderate level of quality service. In addition, the center had two flushing toilets, which were not sufficient for the number of children at the center. Insufficient toilets can impact children's comfort and health. There was one caregiver for 25 children, and it is difficult for one to offer quality service with such an overwhelming number. The large group with one caregiver can affect the quality of care and individualised attention the children could receive. On a positive note, the availability of a daily program and a stimulating environment was observed, which can support children's learning and development.

It is imperative to note that children were responsible for their own food. Moreover, ensuring that children receive nutritious meals is important for their overall health and well being. It would be beneficial to monitor the quality of food brought by children and provide guidance on healthy eating. Center 2 experienced several challenges in providing high-quality early childhood education. Challenges related to infrastructure, safety, hygiene, overcrowding, and limited outdoor play space need attention. Improvements in the playroom structure and materials can enhance the educational experience. While the method of delivery and practices are considered efficient, addressing safety and hygiene concerns, as well as the caregiver/educarer child ratio, is imperative. Moreover, it is imperative for ECD center to consider the availability of space when admitting children.

#### **4.4.3 Center 3**

Center 3 is located in a very poor and low-income location. The Center is also a privately owned by a 36-year-old lady. The center, accommodated children aged 6 months to 6 years old. It is situated in Okuryangava, informal settlement. The location is in a densely populated area, with only corrugated iron sheet houses. The center consisted of the center owner, who was also a caregiver for the 5 to 6 years children and 2 other additional caregivers/educarers. They were all responsible for the teaching and the center owner had multiple tasks and responsibilities, as she was responsible for center management and administration as well as playgroup duties. Like Center 2, the center plan, curriculum and programme were provided by a non-profit organisation known as SPES.

The non-participant observation was conducted over three days at this center. More time was spent on the playroom as well as observing the outdoor activities. The playgroup of children observed for two days were from 6 - 36 months and 4-5 years old. This was done to collect information regarding the facilities, activities, and method of deliveries of caregivers. The observation revealed several areas of challenges that required improvement in the early childhood education setting. It was evident from observation that Center 3, was overwhelmed with so many challenges. The non-participant observation focused on the three pre-determined themes.

##### **4.4.3.1 Infrastructure and Facilities**

The center was built with corrugated iron sheets. Some playrooms were built with pre-cast wall and roofed with corrugated iron sheet. The description of the infrastructure, made of “corrugated iron sheets”, indicates a lack of proper construction materials and poses potential safety concerns. It was observed that there were limited facilities, such as a very low fence, a small playground, and insufficient furniture for children. It was

not well-ventilated and became congested inside. These factors indicate that the center lacked essential resources for a quality learning environment and infrastructure. In addition, it was observed that the center had a lovely jungle gym for the children built outside, donated by SPES.

The babies had no cots; they slept on folded blankets on the floor, moreover, there was limited space for feeding, changing nappies, as well as playing. The babies' situation raised concerns about their comfort and safety. Inadequate security measures, overcrowding, and congestion without proper ventilation further compromised the comfort and safety of the children. The babies and toddlers were in the same playroom or baby room.

#### **4.4.3.2      *Playroom and Materials Layouts***

The researcher observed that the playroom could not be divided into different sections because there was not enough space. Due to the lack of space in the playroom, there were also no sufficient play and learning materials. Equally important, there is a serious need for substantial improvements. While some elements are considered appropriate and sufficient, addressing the overall quality of the indoor play space is crucial for the children's holistic development, safety, and security.

#### **4.4.3.3      *Method of Delivery and Practices***

It has been observed that the caregivers their delivered their best to engage children in the daily activities. Moreover, the children followed a structured routine and schedule. However, safety and hygiene are also imperative concerns. A toilet was shared between the center and the household. The serious challenge is that the toilet was not connected to the sewerage or any kind of septic tank. The flushed waste went down the back of the center. This practice posed a serious danger to the health and hygiene of everyone at Center 3. The ECD owner's house was also next to the center in the

same yard. The overcrowded and large number of children, under the supervision of one caregiver is very concerning and can compromise the quality and care.

The overcrowded playrooms and classes were suboptimal and may affect the care provided. On a positive note, the availability of a daily program and a stimulating environment was mentioned, which can support children's learning. Similar to Center 2, children were responsible for their own food, which may provide flexibility for families, however required monitoring to ensure they received nutritious meals, which could be a challenge in the area of Okuryangava.

Moreover, Center 3 experienced significant challenges in providing quality early childhood education due to its limited and inadequate infrastructure, overcrowding, and safety concerns. The government ought to address the structural and safety challenges, provide proper educational materials, and improve ventilation to create a safe and conducive learning environment. Furthermore, attending to sanitation as well as caregiver-to-child ratios is imperative for effective service delivery and development of the children. More importantly, collaborative engagement with the community and local authorities may be required to secure the required resources and support to advance the conditions at the center as well as provide a better learning experience for the children from low-income families in the informal settlement.

## **CHAPTER 5: SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 Summary of the Main Findings**

In this chapter, the researcher engaged in a comprehensive review and consolidation of the interpretation and significance of the main findings garnered from earlier sections, which focused on the main 11 themes.

Moreover, the study adopted a qualitative research design with a phenomenological approach to seek answers from the phenomenon under study. More importantly, the study sought to examine the innovative recommendations that emerged from the voices of ECD center owners, educarers, caregivers as well as non-participant observation. This investigation sought to promote a holistic and ideal design for ECD within the Namibian context and by communicating the insights of these key stakeholders, the researcher sought to bridge the gap between theory and practice, envisioning a more vibrant and effective place of early childhood education.

The findings revealed significant disparities in the quality of facilities, availability of learning materials, as well as overall child development environments across the three locations. Overcrowded playrooms characterised the ECD center in the Okuryangava informal settlements, a lack of age-appropriate educational materials, and inadequate security measures posed challenges to both learning and child safety. In contrast, centers in middle-class localities had relatively better resources, though space limitations and access to advanced learning instruments remained concerns. Meanwhile, ECD centers in affluent areas were well-equipped, spacious, and secure, offering children access to modern educational instruments and a structured learning environment. Finally, these disparities accentuated the need for equitable resource

allocation, to ensure that all children, including those from disadvantaged backgrounds, receive quality integrated early childhood care and education services.

## **5.2 Conclusion**

As I come to the end of this academic journey, it is imperative that I reiterate, this study explored the experiences and challenges of ECD center owners and caregivers/educarers in implementing the IECD policy across different socio-economic settings. Adopting a phenomenological approach, data from interviews and observations, the study finding revealed significant disparities in resources, learning environments, and IECD approach implementation. Moreover, the centers in the informal settlements experienced overcrowding, inadequate materials, and security concerns, while those in middle-class and affluent areas had enhanced facilities and learning resources.

More importantly, the findings underscored the need for targeted government support, including better resource allocation, training, and infrastructural improvements in underprivileged areas. Strengthening parental involvement and fostering public-private partnerships can further enhance ECD service delivery.

To conclude, ensuring equitable access to quality early childhood education is essential for lifelong learning and development. Addressing the challenges identified in this study through policy reforms and continued research will create a more inclusive and supportive early learning environment for all children.

### **5.3 Recommendation for Policy Development**

Based on the findings of this study, the following recommendations are proposed to improve the implementation of the Integrated Early Childhood Development (IECD) policy in Namibia and ensure equitable access to quality early childhood education:

#### ***1. Increased Government Support for ECD Centers in Informal Settlements***

The study revealed that ECD centers in informal settlements experienced severe challenges, including overcrowding, inadequate learning materials, and poor infrastructure. More importantly, the government needs to allocate more resources to improve facilities, provide essential teaching materials, and enhance security to create a safe and conducive learning environment.

#### ***2. Standardized NIECD Policy Implementation and Enforcement***

Disparities in applying the IECD policy across different socio-economic settings underscores the need for clear, standardised guidelines. In addition, the government should ensure effective dissemination and enforcement of these guidelines to promote uniformity in service delivery across all ECD centers.

#### ***3. Promoting Public-Private Partnerships in ECD Development***

Well-equipped ECD centers in affluent areas benefit from private sector support. The government should foster collaborations with private organisations, NGOs, and community stakeholders to provide financial and material assistance to under-resourced centers, bridging the gap in early childhood education.

#### ***4. Improving Support for Children with Special Needs***



Limited capacity to accommodate children with special needs was identified in several ECD centers. Moreover, specialised caregiver training, inclusive learning materials, and adaptive infrastructure should be prioritised to ensure that all children receive quality early education.

### ***5. Regular Monitoring and Evaluation of ECD Centers***

Findings indicate inconsistencies in policy implementation, resource distribution, and service quality. Moreover, the government should establish a systematic monitoring and evaluation framework to assess compliance, identify gaps, and provide ongoing support to ECD centers. Regular assessments ensure that centers operate effectively and meet national early childhood education standards.

Implementing these recommendations will bridge disparities in ECD service delivery in Namibia, ensuring that all children, regardless of their socio-economic background, receive quality early childhood education for their holistic development.

### **5.4 RECOMMENDATIONS FOR FUTURE RESEARCH**

To achieve improved outcomes in the future, both non-governmental institutions and ECD center stakeholder research and development should fulfill an imperative role for informing institutions as well as stakeholders tasked with policy development. The following areas are recommended for future research on IECD service delivery and improvement:

- Assess the impact of inter-sectoral collaboration in IECD policy implementation. Utilise theories of collaboration to comprehend how different sectors (e.g., health, education, social services) can collaborate to promote child development effectively. Inter-Sectoral integration is a system employed

to identify steps directed towards achieving a more integrated early childhood development (IECD) system, which means moving from a ‘multi-sectoral’ to an ‘inter-sectoral’ approach (*silo operation to coordinated activities*). This is done effectively by including different sectors and different age groups with a holistic comprehension of human development (Woodhead, 2014).

- Investigate the role of parental involvement in IECD policies and its impact on child learning and development.

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# APPENDICES

## APPENDIX A: Ethical clearance Certificate



**ETHICAL CLEARANCE CERTIFICATE**

**Ethical Clearance Reference Number:** SoE-DEC100621/08      **Date:** 11 June 2021

This Ethical Clearance Certificate is issued by the University of Namibia Decentralised Research Ethics Committee (DEC) in accordance with the University of Namibia's Research Ethics Policy and Guidelines. Ethical approval is given in respect of undertakings contained in the Research Project outlined below. This Certificate is issued on the recommendations of the ethical evaluation done by the Faculty/Centre/Campus/Unit Research Ethics Committee.

**Title of Project:** THE IMPLEMENTATION CHALLENGES OF THE INTEGRATED EARLY CHILDHOOD DEVELOPMENT (IECD) APPROACH AT EARLY CHILDHOOD DEVELOPMENT CENTRES IN WINDHOEK, NAMIBIA

**Nature/Level of Project:** Postgraduate Studies

**Researcher:** INDILENI N. DANIEL

**Student Number:** 8630224

**Faculty:** EDUCATION & HUMAN SCIENCES

**School:** EDUCATION

Take note of the following:

- (a) Any significant changes in the conditions or undertakings outlined in the approved Proposal must be communicated to the DEC. An application to make amendments may be necessary.
- (b) Any breaches of ethical undertakings or practices that have an impact on ethical conduct of the research must be reported to the DEC.
- (c) The Principal Researcher must report issues of ethical compliance to the DEC (through the Chairperson of the Faculty/Centre/Campus/Unit Research Ethics Committee) at the end of the Project or as may be requested by DEC.
- (d) Approval is valid for a period of one year from the date of issue.
- (e) A mid-year report to be submitted to DEC (where applicable).
- (f) The DEC retains the right to:
  - (i) Withdraw or amend this Ethical Clearance if any unethical practices (as outlined in the Research Ethics Policy) have been detected or suspected,
  - (ii) Request for an ethical compliance report at any point during the course of the research.

DEC wishes you the best in your research.



.....  
Dr Helena Miranda  
SoE-DEC Chairperson



## APPENDIX B: Research Permission letter

ANNEX 16

### RESEARCH PERMISSION LETTER

**Student Name:** INDILENI N DANIEL  
**Student number:** 8630224  
**Programme:** MASTER OF EDUCATION (by Research)

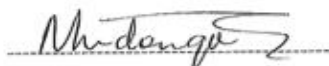
**Approved research title:** THE IMPLEMENTATION CHALLENGES OF THE INTEGRATED EARLY CHILDHOOD DEVELOPMENT (IECD) APPROACH AT EARLY CHILDHOOD DEVELOPMENT CENTRES IN WINDHOEK, NAMIBIA

### TO WHOM IT MAY CONCERN

I hereby confirm that the above mentioned student is registered at the University of Namibia for the programme indicated. The proposed study met all the requirements as stipulated in the University guidelines and has been approved by the relevant committees.

The proposal adheres to ethical principles as per attached Ethical Clearance Certificate. Permission is hereby granted to carry out the research as described in the approved proposal.

Best Regards



Prof Nelago Indongo

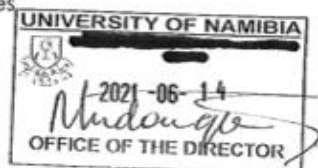
Director: Centre for Research Services

Tel: +264 61 2063004

E-mail: [nkanime@unam.na](mailto:nkanime@unam.na)

14/06/2021.....

Date



## APPENDIX C: Participant information letter and Consent form

### PARTICIPANT INFORMATION LEAFLET AND CONSENT FORM ANNEX 5



**TITLE OF THE RESEARCH PROJECT:** The implementation challenges of the Integrated Early Childhood Development (IECD) approach at Early Childhood Development Centers in Windhoek, Namibia.

**REFERENCE NUMBER:** FE/PGSC/20/09/04

**PRINCIPAL INVESTIGATOR:** Indileni Ndeshipanda Daniel

**ADDRESS:** 8 Omusema Street, Erf 32, Cimbebasia, Windhoek

**CONTACT NUMBER:** Cell Number: +264855511993

You are being invited to take part in a research project. Please take some time to read the information presented here, which will explain the details of this project. Please ask the study staff any questions about any part of this project that you do not fully understand. It is very important that you are fully satisfied that you clearly understand what this research entails and how you could be involved. Also, your participation is **entirely voluntary** and you are free to decline to participate. If you say no, this will not affect you negatively in any way whatsoever. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the Research Ethics Committee at The University of Namibia and will be conducted according to the ethical guidelines and principles of the international Declaration of Helsinki, South African Guidelines for Good Clinical Practice and Namibian National Research Ethics Guidelines.

This study gathers evidence of current practices, challenges, approaches, experiences and perceptions of ECD practitioners on the implementation of the IECD policy in Windhoek. The study might raise awareness amongst IECD practitioners about their responsibilities in the

implementation of the IECD policy in early childhood development centres. The study may also provide relevant information to the Ministry of Gender Equality and Child Welfare, the City of Windhoek's ECD Section, as well as IECD training institutions regarding the practices and challenges of IECD practitioners in implementing or delivering IECD services. This study may add value to the insufficient body of knowledge on IECD delivery in Namibia and would suggest alternative strategies to overcome some of the existing barriers to IECD implementation. Moreover, this study would be valuable to the government in contributing ideas to coordinate, monitor and spearhead IECD service provisions and programmes.

You are invited to participate in this research because you are in a position to provide information which is of significance towards the study. You have been purposely selected, as you are believed to have the experience required about ECD and you have been practicing for more than five years. You are kindly urged to provide information by answering interview questions. The interview will last for about 30 to 40 minutes.

The study has no personal benefits to participants as of current, however in future it will benefit policy makers, the Ministry of Gender Equality, Poverty Eradication and Social welfare as well as ECD practitioners in policy writing and implementation. The study will also add value to literature with the findings obtained from the study. There are no harm or risk involved that will result from participating in this study and the only person who will have access to information is the researcher. Your identity is protected and remains anonymous.

There will be no payments given for participating in this study. The researcher is responsible for all costs involved in the research process.

To ensure **confidentiality and anonymity** of the collected information, data collection materials used in this research will be stored in a safe lockable place to avoid leakage of information and will be destroyed at least after five years. You are reassured that collected information will only be used for academic purposes and no one else apart from my supervisors will have access to them. Furthermore, your right to privacy will be highly respected and guaranteed and when quoted in the thesis, which will be available to the public, a fiction name will be used.

As a participant, you have the right to withdraw at any given point in time during the interview and study.

*You can also contact the Center for **Research and Publication** at +264 061 2063061; [pclaassen@unam.na](mailto:pclaassen@unam.na) if you have any concerns or complaints that I have not been adequately addressed by the investigator.*

You will receive a copy of this information and consent form for your own records.

### Declaration by participant

By signing below, I ..... agree to take part in a research study entitled:

The implementation challenges of the Integrated Early Childhood Development (IECD) approach at Early Childhood Development Centers in Windhoek, Namibia.

#### I declare that:

- a) I have read or had read to me this information and consent form and it is written in a language with which I am fluent and comfortable.
- b) I have had a chance to ask questions and all my questions have been adequately answered.
- c) I understand that taking part in this study is **voluntary** and I have not been pressurised to take part.
- d) I may choose to leave the study at any time and will not be penalised or prejudiced in any way.
- e) I may be asked to leave the study before it has finished, if the study doctor or researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.

Signed at (*place*) ..... on (*date*) ..... 2019.

.....  
Signature of participant

.....  
Signature of witness

### Declaration by investigator

I **INDILENI NDESHIPANDA DANIEL** declare that:

- I explained the information in this document to .....
- I encouraged him/her to ask questions and took adequate time to answer them.

- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I did not use an interpreter.

Signed at (*place*) ..... On (*date*) ..... 2019.

.....

Signature of investigator

.....

Signature of witness

## APPENDIX D: Interview Guide for ECD Center head/owners

Indileni Ndeshipanda Daniel

8630224

Interview Guide ECD Owners/Head

### SEMI-STRUCTURED INTERVIEW GUIDE ECD CENTER OWNERS OR HEADS

My name is Indileni Ndeshipanda Daniel. As part of my Master of Education Studies with the University of Namibia (UNAM), I am conducting research on the following topic “**An exploration of factors that hinder the implementation of the Integrated Early Childhood Development (IECD) approach in Early Childhood Development Centers in Windhoek**”. You have been selected to be part of this interview because you are an ECD Caregiver who is knowledgeable and experienced. Thank you for agreeing to take part in this interview. The study aims to gather evidence of current practices, challenges, approaches and support rendered to ECD practitioners on the implementation of IECD policy in Windhoek. I am now going to ask you some questions regarding IECD. All information I collect will be treated with confidentiality. Please answer them as honest as possible and to your best knowledge. There are no right or wrong answers. Do not hesitate to ask or inform me if there is anything you do not understand or if at any stage you do not feel comfortable with the questions I pose to you. You have the right to withdraw at any stage without facing any consequences. The interview will take about 35 to 45 minutes and, with your permission, I would like to record our interview to make sure that I do not lose any valuable information you are sharing with me.

Thank you for your time.

Center Name:.....  
Residential Area:.....  
Gender ..... Age:..... Mother Tongue:.....  
Highest School Grade Completed:..... Year:.....  
Experience in childcare and development:.....  
ECD Qualification:..... Year obtained.....  
Institution obtained from:.....  
Other training received:..... Year:.....  
Training Institution and Trainer:.....  
Identification Code of the participant:.....  
Date of interview:..... Recording number:.....

**Questions about Experiences and Approaches**

1. What motivated you to start an ECD center?
2. Where do you see this center in the next 5 – 10 years?
3. Which particular services does your Center offer to children?
4. Why do you offer those services?
5. What services would you have had offered if all resources were in place?
6. What resources should be in place for you to roll out all the services you would love to offer at this Center?
7. How do you finance your center and activities?
8. How do you rate the level of parental involvement at your Center? Would you say it is Very Good; Good; Poor or Very Poor?
9. What factors are affecting parental involvement at your Center?
10. What are the requirements (attributes) you are looking for or guiding you when recruiting caregivers?
11. Do you always get caregivers with those attributes when you are looking for them? Please explain your answer.
12. Does your center have the National Integrated Early Childhood Development Policy document?
13. Have you ever received training on how to implement the IECD Policy?
14. How do you ensure that your approach on ECD delivery is integrated?



15. What is your view about integrated early childhood development (IECD)?
16. How easy or how difficult is it for you to implement the IECD Policy?
17. When it comes to children enrolment, what are your admission (enrolment) criteria?
18. Have you ever found yourself in a situation where you had to turn down children?
19. What circumstances have forced you not to admit certain children if any and which of those children do you have to turn down?
20. What type of national identification documents form part of enrolment requirements?
21. Do you receive children with special needs?
22. Have you received training on psychosocial support?

#### **Questions about challenges and barriers**

23. What kind of problems do you encounter mostly or on a regular basis at the center?
24. What do you do in cases where parents or guardians cannot pay their fees?
25. How do the issues of non-payments affect your activities at the center?
26. How do you solve these payment problems?
27. What you do to children with special needs (psychosocial support rendered) in the case when you them at the center?
28. How do you identify them?
29. How do you ensure that your admission criteria make your center open to all children?

30. What do you do when children without any national identity documents apply?

31. How do you ensure that the children's hygiene and nutritional needs are upheld?

32. What other challenges and problems do you encounter with regards to center management?

33. Kindly indicate and explain if you have experienced any of the following challenges in the past five years and how you overcame them.

| Type of Challenge               | How you attempted to solve it | How you resolved it | Source of Support |
|---------------------------------|-------------------------------|---------------------|-------------------|
| Feeding of the children         |                               |                     |                   |
| Nutritional food                |                               |                     |                   |
| Safety of the environment       |                               |                     |                   |
| Health                          |                               |                     |                   |
| Psychosocial support            |                               |                     |                   |
| Indoor and outdoor space area   |                               |                     |                   |
| Payments of caregivers          |                               |                     |                   |
| Center fees payments            |                               |                     |                   |
| Parental support of activities  |                               |                     |                   |
| Community/sectorial support     |                               |                     |                   |
| Government support              |                               |                     |                   |
| Curriculum support and training |                               |                     |                   |

#### Questions on Support needed and expectations Government and Stakeholders

34. What kind of support do you need to be effective in the running and management of your center?

35. What support do you need to develop your skills in the implementation of IECD approach?
36. What kind of support do you require to keep yourself informed and capacitated in the field of ECD?
37. What support do you expect from the Ministry of Gender Equality and Child Welfare?
38. What support you expect from the City of Windhoek, more specifically from ECD Section?
39. What is your comment and advice to the policy makers and implementers with regards to the ECD in general and IECD Policy specific?
40. Is there anything else you would like to add or ask me?

Thank you for your inputs and contributions. The information shared and data collected will be interpreted. A report will be written and shared with key stakeholders. If the need arises, I might come back for more information to validate the report.

End Time:.....

## APPENDIX E: Interview Guide for ECD Educators/Caregivers

Indileni Ndeshipanda Daniel

8630224

Interview Guide: ECD Caregivers

### SEMI-STRUCTURED INTERVIEW GUIDE

#### ECD CAREGIVERS

My name is Indileni Ndeshipanda Daniel. As part of my Master of Education Studies with the University of Namibia (UNAM), I am conducting research on the following topic “**An exploration of factors that hinder the implementation of the Integrated Early Childhood Development (IECD) approach in Early Childhood Development Centers in Windhoek**”. You have been selected to be part of this interview because you are an ECD Caregiver who is knowledgeable and experienced. Thank you for agreeing to take part in this interview. The study aims to gather evidence of current practices, challenges, approaches and support rendered to ECD practitioners on the implementation of IECD policy in Windhoek. I am now going to ask you some questions regarding IECD. All information I collect will be treated with confidentiality. You have the right to withdraw at any stage without facing any consequences. The interview will take about 35 to 45 minutes and, with your permission, I would like to record our interview to make sure that I do not lose any valuable information you are sharing with me.

Thank you for your time.

Center Name:.....  
Residential Area: .....  
Gender ..... Age:..... Mother Tongue:.....  
Highest School Grade Completed:.....Year:.....  
Experience in childcare and development:.....  
ECD Qualification:.....Year obtained.....  
Institution obtained from: .....  
Other training received: ..... Year:.....  
Training Institution and Trainer: .....  
Identification Code of the Participant:.....  
Date of interview:..... Recording number:.....

**Questions on Approaches and experiences**

1. What inspired you to become an ECD Caregiver?
2. What makes you wake up every day to come to the Center?
3. What did you miss most when the schools, including ECD Centers were closed due to the Covid -19 Pandemic?

***Curriculum***

4. How do you start your day at the Center? Take us through the first things you do in the morning when you arrive at the Center.
5. How many children are in your class (playroom)?
6. What does your curriculum entail? (The type of activities you do and services you offer to children).
7. How did you acquire the curriculum? (What are you expected to do with the children?)
8. Did you receive the curriculum as a written document? (If so, from where?)
9. Did you receive any specific training on the curriculum? (If so, from where?)

***Integrated Early Childhood Development (IECD) Approach***

10. Did you receive any training in the IECD approach? (If so, from whom?)
11. In your own words and understanding, what is this IECD approach? What are you expected to do with it and with regards to the children in your care?
12. What knowledge do you have about IECD policy?
13. Does the center have a copy of the National Integrated Early Childhood Development policy?

14. Have you ever received training on the implementation of the IECD Policy?

15. If yes, how are you implementing it?

If no, how did you know what to do?

16. How do you keep yourself informed and capacitated in the field of ECD?

***Children Characteristics, Needs and Psychosocial support***

17. What is the age range of the children in this group?

18. How do you monitor and assess children's development and progress?

19. Do you have children with special needs in your class (playroom)? If yes, how many?

20. What types of special needs do the children in your group have?

21. How did you become aware of their special needs?

22. From the center side, what support do you give to children with special needs?

23. How do you include them in all the activities?

24. How do you support the children with special needs?

25. How do you support children who are delayed in their development?

26. How do you identify them?

27. What training have you received in terms of psychosocial support in order to support all children, including those with various special needs?

***Parental involvement***

28. In what way are parents and guardians of the children involved in the Centre?

29. What activities does the Center initiate with parents/ guardians of the children at the Center?

30. What is the participation rate of parents/ guardians?

31. What activities do the parents initiate to help and support the center?

32. What is the success rate of such activities?

33. What are the issues that impact and motivate parental involvement at your center?

#### **Challenges and Barriers faced**

34. You have earlier shared with me the type of activities you have in the curriculum. What challenges do you experience in delivering what is expected of you?

35. What challenges do you encounter in delivering your curriculum (daily activities)?

36. What other challenges do you encounter in terms of ensuring that children develop holistically?

37. What challenges have you encountered in the implementation the IECD approach?

38. Do you often find yourself unable to apply what is expected of you by the IECD approach?

39. Can you share some of those situations/ examples?

#### **Support needed and expectation**

40. What support do you see essential for you to be effective in the IECD approach?

41. How do you upgrade your skills and stay a relevant as caregiver?

42. What assistance do you need to develop your skills in IECD?

43. What support do you need in terms learning and developmental materials?

44. What support do you expect from:

- A) the owner of the Center
- B) the parents
- C) the Ministry of Gender Equality and Child Welfare?

45. What comment and advice do you have to policy makers and implementers with regards to the IECD Policy from playroom perspective?

46. Is there anything else you would like to add or any question you would like to ask?

Thank you for your time, inputs and contribution. The information shared and data collected will be interpreted. A report will be written and I might come back for more information and validation of the report. This debriefing might not be done on an individual basis, but other platforms might be used to share the information with all the respondents.

End Time:.....



## APPENDIX F: Observation Checklist

Indileni Ndeshipanda Daniel

8630224

Observation Checklist

### ECD CENTERS OBSERVATION CHECKLIST

My name is Indileni Ndeshipanda Daniel. As part of my Master of Education Studies with the University of Namibia (UNAM), I am conducting research on the following topic “**An exploration of factors that hinder the implementation of the Integrated Early Childhood Development (IECD) approach in Early Childhood Development Centers in Windhoek**”.

Your ECD center has been selected to be part of this study because your ECD center is has been established more than five. The study aims to gather evidence of current practices, challenges, approaches and support rendered to ECD practitioners on the implementation of IECD policy in Windhoek. All information I collect through interview and observation will be treated with confidentiality. You have the right to withdraw at any stage without facing any consequences. The observation will take about five days and, with your permission, I would like to take some pictures, record some activities to make sure that I do not lose any valuable information at the center.

Center Name:..... Date:.....

Time: ..... Target Age range of Children: .....

Number of Caregivers: Full Time:..... Part Time:.....

Number of Caregivers receiving their salary through subsidy:.....

Number of children at the center: ..... Number of playrooms:.....

| 0 = Not observed                         | 1= Satisfactory | 2 = Very Good (accomplished) | 3 = Poor(Not accomplished) |   |                |
|------------------------------------------|-----------------|------------------------------|----------------------------|---|----------------|
| Infrastructure and facilities            |                 |                              |                            |   |                |
|                                          | 0               | 1                            | 2                          | 3 | Comment/Remark |
| Fence                                    |                 |                              |                            |   |                |
| Playground                               |                 |                              |                            |   |                |
| Security measures                        |                 |                              |                            |   |                |
| Outdoor play equipment                   |                 |                              |                            |   |                |
| Child-Friendly Furniture                 |                 |                              |                            |   |                |
| Kitchen (Responsive to children's needs) |                 |                              |                            |   |                |
| Child-friendly Restrooms                 |                 |                              |                            |   |                |

|                                                                                            |  |  |  |  |  |
|--------------------------------------------------------------------------------------------|--|--|--|--|--|
| Suitable Office Space                                                                      |  |  |  |  |  |
| Sick bay                                                                                   |  |  |  |  |  |
| Running water                                                                              |  |  |  |  |  |
| Electricity (Or any source of power)                                                       |  |  |  |  |  |
| Others                                                                                     |  |  |  |  |  |
| <b>Playroom /classroom structure</b>                                                       |  |  |  |  |  |
| Attendance register                                                                        |  |  |  |  |  |
| Evidence of children work                                                                  |  |  |  |  |  |
| Play and learning materials (puzzles, crayons, papers, books, paints, brushes, etc)        |  |  |  |  |  |
| Material for Outdoor Play (slides, swings, zigsaws, balls, jungle jim, etc)                |  |  |  |  |  |
| Material for Indoor Play(indoor slides, soft balls, cars, dolls, soft toys, joga mats, etc |  |  |  |  |  |
| Equipment (TV, computers, projectors, Etc)                                                 |  |  |  |  |  |
| Others                                                                                     |  |  |  |  |  |
| <b>Methods and Practices</b>                                                               |  |  |  |  |  |
| The way Caregiver and children interact                                                    |  |  |  |  |  |
| Health (children's immunization records, handling of sick children, growth charts)         |  |  |  |  |  |
| Safety (incident reports, minor injury handling, etc.)                                     |  |  |  |  |  |
| Hygiene practices (washing hands, eating with own utensils, cleaning routines, etc.)       |  |  |  |  |  |
| Feeding                                                                                    |  |  |  |  |  |

|                                                                                      |  |  |  |  |  |
|--------------------------------------------------------------------------------------|--|--|--|--|--|
| Programmes & Activities (parents meetings, fundays, fundraising, social events, etc) |  |  |  |  |  |
| Compliance Certificate (CoW)                                                         |  |  |  |  |  |
| Registration (MGECW)                                                                 |  |  |  |  |  |
| Visit from (MoHSS)                                                                   |  |  |  |  |  |
| Psychosocial Support (files of special cases, referrals, etc.)                       |  |  |  |  |  |
| Caregivers-Children ratio                                                            |  |  |  |  |  |
| Others engagements                                                                   |  |  |  |  |  |

### Summary Comments

[illegible]

