

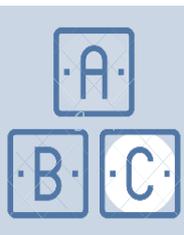


National Early Childhood Development Community of Practice

MEETING HIGHLIGHTS 06 May 2020

Virtual Meeting

WELCOME AND PURPOSE



To date there has been no communication regarding the re-opening of ECD sites under level 4 of lockdown. There are risks with both opening ECDs and keeping them closed. BRIDGE had already begun the process of convening meetings on this topic through the KZN ECD CoP. The KZN ECD CoP discussions had led to the identification of a number of ‘themes’ that would have to be considered in the reopening of ECD sites. The purpose of this CoP was to therefore engage the National ECD CoP on these themes and to collectively decide if recommendations could be developed to better guide the sector on the reopening of ECD sites. Sheila Drew (SAIDE) facilitated this CoP. Thandeka reminded the CoP to take into account the context of ECD provisioning of ECD in South Africa that consists of different modalities and caters mostly for the poorest and vulnerable children. The deliberations of the CoP pointed to idea that we the ECD sector could find itself adapting to a ‘new normal’. COVID-19 has presented an unprecedented global challenge which means that the ECD sector has opportunities to reimagine ECD provisioning in South Africa.

“We need to think 'beyond centre based provision' (institutional care for children is problematic, and the risks are great) but for the centre to act as a resource base, a hub, where health and ECD practitioners could visit and support the 'pods' City health could monitor and support the health status of participants, and local authorities monitor and support. Through ECD Forums, collaborative relationships can be forged to look at the different problems on the ground.” [CoP Member]

SMART START SCENARIOS

Rebecca Hickman from SmartStart explained that the organisation had gone through an analysis of risks and opportunities that could be attached to three reopening scenarios that SmartStart had identified. The scenarios included 1) Uniform re-opening from earlier date (June/July), 2) Variable opening in line with government Lockdown Levels 1-5 and 3) Uniform re-opening from later date (October/November). The intention behind the analysis was to scope the environment in order to reach a balanced position and also contribute to conversations in the sector. The overall risk of reopening sites lies in the likely possibility that programmes could be stressful for children due to social distancing practices and other measures to keep them safe and also to practitioners who have to maintain the protocols.

Focus was given to the risks that could be attached if ECD sites are not reopened and in this process, issues gathered were around:

- The detriment to the children’s learning in the absence of ECD programmes
- Issues around health and nutrition as many ECD programmes are a source of at least one stable meal for the child
- Homes could possibly very stressful environments and even worse in the current circumstances
- Disjointed gradual reopening of the economy without any consideration for the childcare needs of that workforce could force parents to look for informal and possibly inappropriate childcare facilities
- The loss of ECD workforce can be expected as they look for other means to survive
- Programmes could reopen illegally without the required support thereby acting as nodes of infections

The SmartStart scenario analysis document goes further to explore the mitigation strategies which are differentiated in each scenario according to the modalities. Finally, the document deals with a modality analysis which is laid over the scenarios. To access the SmartStart scenario and modality analysis, please click [here](#) for the scenarios and [here](#) for the modalities.



GROUP DISCUSSIONS

Virtual break-away groups discussed the themes that had been identified at the KZN ECD CoP.

a) Basic services that need to be in place for sites to be COVID-19 ready

- Basic materials to protect the children and the practitioners including:
 - Protective equipment such as masks, sanitisers and so forth- who would provide and pay for these? Noted that in well-resourced sites, parents would probably provide masks; but this would not be possible in poor communities
 - Basic services, particularly in rural areas were of main concern to participants citing that children and site staff would need water to wash hands. This was the key safety measure after all. Municipalities and local health officials would need to be approached.

b) Protocols to keep children, staff and communities safe: transport, caregiver/staff interaction, hygiene, managing children who show symptoms, etc.

- Concerns over the health of older ECD staff and those with co-morbidities
- If adults must be tested before opening – how would this be done?

- There is a need for training of all staff in the “new normal” and parents will need to be educated too
- All personal belongings to be put in plastic bags and left outside along with shoes
- There may be a need for limited activities and avoidance of toys and equipment that the virus is easily attachable to, e.g., soft toys.
- Entry and exit strategies into and outside of the ECD site will need to be put in place
- There should be a minimum checklist for all ECDs regardless of how or where they operate
- Protocols for when a child has contracted Covid-19 would have to be established
- There will need to be strict protocols for food preparation
- Concerns over cost of essential protective equipment

c) Supporting registered and unregistered sites financially to be able to reopen, including nutrition programmes

- Assistance is required as most centres cannot benefit from UIF and most of the available COVID-19 relief schemes. We have to engage on nutrition-the need for nutrition is even greater now that ECD sites cannot operate.
 - A key principle in Covid-19 response should be the sustainability of sites that already exist – we can’t afford to lose sites, however irregular or poorly they might function.
 - There is no one-size-fits-all approach in terms of ECD sites, as there is such a range of sites: the non-centre-based/ under-resourced/ unregistered sites in poorer communities have very different needs to formal better-resourced centres; and in Covid-19 their challenges are immense.
- ECD sites would have to stipulate what resources are needed and develop strategies to find them
- Make use of churches/corporate structures in support of ECD provision
- This may also be an opportunity to relook at the registration issue as the standard and process for registration is unattainable for most ECD sites
- Workplaces can open centres where the parents/caregivers are working. The department of public administration has provisions for government workers that need childcare services for their children
- Institutionalise ECD forums so there is a coordinated platform where low-resourced sites in particular can find a strong voice
- Repurpose and redirect the conditional grant to respond to supporting the workforce
- DSD must continue to pay subsidies of current ECD beneficiaries during this time to ensure the continuity of ECD site operations beyond COVID-19

d) ECD practitioners engaging meaningfully with children, including around COVID-19, social distancing, washing hands etc.

- The management of the interactions as they are related to the inclusion of precautionary measures such as physical distancing, regular handwashing, regular cleaning to keep surfaces clean and so on whilst trying to facilitate active learning and stimulation of children.
- Emotional and psychosocial support for both the children and the ECD practitioners.
- Creative ways of engaging children around issues of hygiene, physical distancing etc, without becoming punitive towards children
- Support (from NGOs etc) to implement these ideas
- Children understanding what is happening ...
- Children will have to get used to a restrictive and controlled environment whereas the ECD environment should be flexible and explorative whilst being structured.
- Quality of social interactions in ECD programmes will be greatly compromised under the lockdown
- The opportunity lies in the fact that children will be accessing appropriate and developmental instruction in safe environments and caregivers will be less burdened and able to work comfortably knowing children are safe during the day
- The sector needs to be practical about distancing as it relates to children. It will not be possible for all ECD contexts. The reality of the different settings must be represented and many sites that do not have space and facilities will not be able to practice distancing of any sorts for children.
- If distancing is not practical then it must be acknowledged, and propose what will be practical from observing hygiene protocols optimally.
- Parents have to be engaged so that they also may understand the constraints that sites are facing.
- Orientation of ECD practitioners to cope with the dynamics of the new learning situation will be key.

OPEN PLENARY DISCUSSION

Burning issues:

DSD considerations

- How will DSD control regulations when they can't even regulate licensed vs unlicensed ECD centres?
- There is currently no way to register non-centre based and this is an opportunity to address as non-centred based is not only a good option for now but also after the Covid-19 pandemic.
- How do rural sites practice good hygiene where they don't have access to resources? The costs associated with this need to be raised with DSD and local authorities.

- Charmaine Botha on her contact with DSD: DSD has been asked to send out communication to the sector as people are looking for reassurance that DSD is looking in their interest with a plan for returning and not specifically a date. In the meantime sites are being fined for opening – they are opening because they have not yet had any communication from DSD on how to operate or move forward. In response, DSD will be sharing a communication document this week for the entire sector and they are going to rely on all networks to disseminate this document
- It is vital that DSD automatically supply licenced centres with hygiene products, PPE and thermometers to incentivise unlicensed ECDs to become licenced.
- Operating unregistered sites is illegal, are they going to be assisted to get their registration status in order with DSD first? If not who is going to be liable if Covid-19 breaks out at that unregistered site and parents, staff and children are infected with Covid-19?
- With regards to the conditional grant meant to support unregistered sites, how big is it? How do we tap into this as a resource?
- DSD officials have very little say, the dialogue will have to be with executive officials such as Deputy Minister and the Minister herself otherwise, the meetings will bare very little fruit.
- We must have a basic checklist for all to follow as there are so many variations. Most important is the need for guidelines from government as to where ECDs and care for children not going to school stand in terms of being able to open. Children need to be safe when parents are working.
- The situation facing the whole sector is absolutely critical - we risk losing so much of what has been gained over the last decade and more for our most vulnerable children. It is concerning as ECD now seems to lie between Education and DSD without being a priority for either.
- Government could make use of sites such as churches etc. as they are not in use at the moment and make them compliant to run as ECD sites during the pandemic.

Centre protocols

- There is not going to be a one size fits all approach with this. There should be a minimum level of protocol that must be in place as a checklist for all sites. There has to be local and district municipal participation in terms of basic service provision.
- Different modalities need to be considered as this is not a one size fits all but we do need a united voice from the sector.
- There should be a nurse on site to deal with emergencies.
- First Aid training and Trauma training for practitioners in our sector should be provided.
- We should remove the term ‘social-distancing’ in ECD and instead introduce ‘physical distancing’ as ECDs are social in nature.

- The sector needs to be practical about distancing as it relates to children. We need to present the reality of the different settings and many sites that do not have space and facilities to practice distancing of any sorts for children. If distancing is not practical we must say so, and propose what will be practical from observing hygiene protocols optimally. We also need to think about how we engage parents so that they also may understand the constraints that sites are facing.
- There is concern in poorer communities where physical distance will be difficult to implement as sites accommodate more numbers in small places such as shacks.
- Social solidarity and physical distancing can become by-words in ECD as families are supported and help is provided, in collaborative partnerships with civil society and local government, and the ECD practitioners provide monitoring and support.

Communication

- How do we communicate these monumental challenges to the ECD practitioners? They need to be made aware of these implications for their sites. Being aware of what is manageable so as not to induce fear and panic and not overload them with information.
- In the Western Cape there is a home visiting programme where they have been creating and setting up an e-learning platform and have been communicating with parents via WhatsApp and social media to share activities and ECD messages with families. This model could be shared and adapted more widely.

Legalities

- There are concerns with regards to children being left in the care of neighbours or siblings due to their parents having going back to work. This means that the child may have more contact with more people. What are the legal consequences if a child does return with Covid-19?
- There is Workman's Compensation for those ECD sites who pay it for their staff. If a staff member is infected at work, they can claim Workman's Compensation. But informal, unregistered sites don't pay UIF or Workman's Compensation, which is a problem as they back up the vast informal economy, but get no support or help

Parental involvement

- We are missing the voice of the parents and need to consider this. SmartStart has created a survey in an effort to solicit parent's views as well as the voices of ECD practitioners and will roll that out this week.
- Parents cannot afford to send their children back to ECDs as they have not/are not able to work and earn an income.

- Parent's temperatures should also be taken and if it is high the child should not be allowed at the centre.

Funding

- Is there any possible funding going to be made available for supplies and resources in all quintiles?
- We could approach Vodacom as an example to give better, more cost effective data packages for ECD to ensure that remote learning does not burden the practitioners even further.
- ECD donors - family foundations and private trusts - have been in touch. Most are supporting existing partners this year with core and operational costs.
- We need to pay attention to the poorest in the ECD sector but also remember that those centres in the more affluent sectors are also closing their doors due to non-payment. This factor will also impact our sector severely. These schools could also not pay salaries and don't have the funds to purchase precautionary supplies.

Way forward re: recommendations

- Need to engage with the Department of Health and the Department of Labour
- A risk assessment plan needs to be put in place for sites
- Look into the cost implication for this exercise and do centres have the capacity to fulfil this
- Guillian Bland has been in touch with Solidarity Fund but they do not support Non-Profits. She has appealed this and will let us know when she has more information

Setting up a group to compile the recommendations

- This requires a smaller group to engage with to compile recommendations for the sector. This needs to be done quickly.
- BRIDGE will coordinate the recommendations and feed that into their other collaborative work but this is difficult for BRIDGE to do alone. We would need people on the ground to give a voice to the reality of those involved.
- The group needs to represent different modalities and contexts.
- Andrea, Charmaine, Hillary and Kay have volunteered their assistance. If someone feels they want to contribute please contact Thandeka directly.

FOLLOW UP MEETING

Thandeka thanked the participants and the people that volunteered. There will be a follow up meeting to feedback on what is happening in terms of the recommendations.