Short-Changing the System: Putting Young Children’s Health on the Blocks

By

Ndhlula Douglas
Research Article

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Ndhlula Douglas

Lecturer, Great Zimbabwe University, Department of Educational Foundations, Ecd Section.

Email: ndhlulad@gmail.com

ABSTRACT

This study set out to investigate whether preschools in one mining town in the Midlands Province of Zimbabwe are complying with the health and safety standards stipulated in the Zimbabwe Public Health Act 15:09(1996). A qualitative research paradigm was adopted for the study. Observation was opted for as the major data gathering method. The research study revealed that preschools did not have enough space, had few toilets in relation to children’s enrolments and had hazardous playgrounds and equipment. The researcher concluded that although some preschools strived to offer services and maintain health and safety standards, the standards were far from being developmentally appropriate and led to low quality childcare. It is recommended that there should be a national audit of all preschools to ascertain levels of compliance and advise accordingly.

Keywords: Health, Safety, Early Childhood Development, Preschools, Complying.

INTRODUCTION

The study sought to investigate whether preschools in one mining town in the Midlands province of Zimbabwe were adhering to health and safety standards as stipulated in the Zimbabwe Public Health Act 15:09 (1996). Gordon and Browne (2010) say that regardless of how many children are in the setting and for how long, the first priority is to provide for their health and safety. Health and safety practices in the preschool setting ensure that children develop physically, intellectually, socially and emotionally. The essence of health and safety practices in the setting is to promote quality childcare and reduce barriers to child development and learning.

Background to the study

Health and safety are important issues aligned with child development and learning. Theorists like Maslow, McMillan and Bronfenbrenner amongst others inform much on child development with regards to health and safety. Maslow’s hierarchy of needs cited in Santrock (2003) point out that children have basic physical needs of water, food and shelter. On the same note, one of McMillan’s key tenets is that good health in terms of diet, housing and physical conditions is essential to effective learning (Tassoni and Hucker, 2004). It entails therefore that a physical environment involving infrastructure, play equipment, food and food preparation and safety practices in place constitute what would promote good healthy and safety standards. However, it has come to the attention of the Ministry of Education, Arts, Sports and Culture that there are unregistered private ECD centres that are mushrooming all over the country. The Principal Director’s Circular 20 of 2011 notes that,

It is observed that when the Nziramasanga Commission of 1999 democratised ECD in Zimbabwe, it did not make private ECD centres illegal. In effect the process has left a lot of gaps, which private ECD centres were quick to capitalise upon. Private unregistered ECD centres have mushroomed in the country. Some of the centres are health hazards to the little ones... this situation is unacceptable.

It is thus the intention of this study to ascertain whether preschools, registered or not, in one mining town are complying with the health and safety standards as stipulated in the Public Health Act 15:09(1996) which is a national document that sets minimum health and safety requirements for all public and private organisations and institutions which may want to operate in Zimbabwe.

Statement of the problem

Having realised that health and safety issues are of paramount importance in the development and learning of children in the early years the research sought to investigate whether preschools in one mining town in
Zimbabwe are complying with the health and safety standards as enshrined in the Zimbabwean Public Health Act 15:09(1996).

**Conceptual framework**

Tassoni (2009) asserts that policies are guidelines that provide a framework on how preschool settings should work. These are designed for use by child service operators and centre staff to assist and determining ways to control potential health and safety hazards (Frith, Kambouris and O’Grady, 2003). Gordon and Browne (2010) point out that programmes for children must establish policies and regulations that provide for the protection, service and education of children’s health and safety at all times. It is in this regard that Statutory Instrument 106 of 2005 (Education- Early Childhood Development Centres Regulations, 2005) was put in place to ensure compliance with minimum healthy and safety standards.

The United Nations Convention on the Rights of the Child (UNCRC, 1990) article 24, and The African Charter on the Rights of the Child, article 14, echoes that children have a right to good health and safety standards. In addition, Education For All (EFA) goal number one (1) posits that the needs of children should be met through “expanding and improving comprehensive early childhood care and education” (UNESCO, 2005 :294). The Zimbabwe Public Health Act 15:09 (1996) section 87 item (f) outlines the need to ensure that, “any preschool that does not conform to any bylaws under any Act and enforce it in the area as regards to minimum stipulations shall be regarded as a nuisance and shall be dealt with”. The Act further states that the Minister may make regulations as to the prevention of overcrowding and other related dangers, in this case, for preschool settings. Such policies and proclamations ensure that preschools operate within set standards.

**Research Questions**

**Major research question**

- Are preschools in the mining town complying with Health and Safety standards stipulated in the Public Health Act 15:09 (1996)?

**Sub Research Questions**

- Do available space provisions meet the set standards?
- Does the physical infrastructure meet the health and safety standards stipulated in the Act?
- Is available play equipment meeting minimum set standards?

**RESEARCH METHODOLOGY**

This study adopted a qualitative research paradigm. The approach employed is consistent with the views of Cohen, Manion and Morrison (2011:37) that, “it enables a researcher to solicit rich data on attitudes, beliefs and feelings.” Descriptive survey was chosen as the research design for the study. The design enabled the researcher to investigate the educational and social arenas of the problem (Wiersma, 2000). Observation was opted for as the main data gathering tool. Simple random sampling was adopted to choose four preschools out of the eight that were operational then.

**Findings**

The findings of the study as they answered the research questions were:

- Space is inadequate and poses danger to children’s healthy and safety needs.
- The physical infrastructure, inclusive of classrooms and other sanitary facilities, do not comply with minimum set standards.
- Outdoor play equipment does not fully comply with the provisions of the Act.

**DISCUSSION OF FINDINGS**

**Space is inadequate and poses danger to children’s healthy and safety needs.**

The researcher deduced that generally indoor space provision requirements for children were inadequate in comparison with set healthy and safety standards. Findings indicated that most classes offered individual space which was below two square metres ($2^{nd}$) per child. Calculating individual space provision for each child, the
The researcher noted that there was between 1.4 and 1.8 \(m^2\). This contradicts Statutory Instrument 106 of 2005’s section 11 item (a) which states that “each early childhood development centre shall provide total indoor playing space to allow for at least two comma five square metres (2.25\(m^2\)) for each child, and of such space at least one comma seven five square metres (1.75\(m^2\)) for each child, or a total of forty-two square metres (42\(m^2\)), whichever is lesser, shall be in the form of clear space in one room.” This compromises the healthy and safety needs of children with regards to air space, traffic flow and individual play space. Furniture and equipment also affected the amount of space available to children. From the limited indoor space, the researcher deduced that there was overcrowding in most of the classes. Olds (2001) points out that when enrolling preschool children, administrators should consider individual space requirements as outlined in the governing statutes. Gordon and Browne (2010) are of the view that ample indoor space will combat overcrowding and hence reduce risks of air borne infections. Higgins (2005) affirms that the inadequacies of indoor air in schools continue to be reported and linked to ill health. It therefore follows that amount of space in relation to the number of children in a class either fosters or endangers the holistic development of children as there is a danger of communicable air borne infections. Decker and Decker (2001) aver that space affects quality of living and learning of children within a centre. In this regard it can be concluded that adherence to healthy and safety standards with regards to space therefore resulted in developmentally inappropriate practices resulting in low quality child care.

The researcher observed that there was ample outdoor space; however, the challenge was the arrangement of outdoor play equipment. Spacing of large outdoor equipment was hazardous and posed a risk to children’s safety. Davies (2008) acknowledges that crowded spaces do not offer much opportunity for children to move about and pursue their individual interests as there is imminent danger posed by inadequate space and the cramped equipment outdoors. The researcher therefore deduces that outdoor space that is well arranged and organised will promote healthy and safety needs of children at a centre.

The physical infrastructure does not comply with minimum set standards.

The researcher gathered that children’s safety needs with regard to emergency preparedness was being catered for to a lesser extent. All the classrooms had only one entrance and yet Olds (2001) posits that early childhood classrooms and playrooms should have at least two exit doors in case there is need for emergency evacuation. Failure by preschool administrators and teachers to provide for emergency preparedness promoted risks and hazards to children thus endangering their lives. This was also compounded by the fact that most of the buildings used as preschools were initially meant for residential purposes and were not renovated when they were turned into preschools. The researcher noted that only one out of the four preschools observed had sand buckets in place to cater for fire emergencies. Green (2003) says that ensuring that the physical environment of an early years setting is safe and secure includes giving consideration to safe evacuation of the building. In this case none of the preschools visited had that in place. None of the preschool had fire extinguishers in place to cater for fire outbreaks. The researcher also gathered from informal interviews with caregivers that fire drills and evacuation procedures were not practiced. Failure to ensure emergency evacuations and equip the classrooms with the necessary instruments compromised the children’s safety thereby providing low quality care.

It was also observed that general cleanliness standards were maintained in the toilets. The floors were kept clean and minimally wet. The attendants cleaned the toilets regularly including after every toilet routine. The major problem was that of pupil-toilet ratio. It was observed that there was high pupil-toilet ratio of 1: 42 at one preschool and the lowest was 1:22. This is in contradiction of Statutory Instrument 106 of 2005 section 11 item (d) which stipulates that there should be a toilet –pupil ratio of 1:8 for flush closets and 1:12 for squat holes. Section 11 item (g) of the Statutory Instrument further states that wash basins shall be provided in the ratio of one basin for every six children at early childhood development centre. Frith, Kambouris and O’Grady (2003) are of the view that toileting and hand washing facilities must be appropriate for the numbers and ages of children and should be safe and well maintained. Minimum health standards set for crèches in 1983 states that small wash basins at the height twenty inches (50.8cm) from the floor should be installed with reasonable supply of hot and cold water. The researcher observed that none of the preschools had hand washing basins; instead they had buckets of water near the toilets entrance and one multi-purpose outside tap.

Outdoor play equipment does not fully comply with the provisions of the Act.

It was observed that all the outdoor play centres were traditional playgrounds (Decker and Decker, 2001) typically on flat barren land, with steel structures such as swings and slides fixed on concrete. These are poor and dangerous to children from both a safety and developmental perspective as there are chances of fractures and bruises from use of such play equipment. From the findings the researcher deduced that there were no soft landings underneath any of the play equipment yet Green (2003) reiterates that it is important that any surface under and around any climbing equipment from which a child may fall a distance of 60cm or more should be equipped with soft landings to absorb some impact of the fall thereby reducing risk or potential or serious playground injuries. In this case preschool administrators and teachers did not provide for these thus putting children at risk and compromising quality childcare.
CONCLUSIONS

The research concluded that:

- Health and safety standards of preschools in the mining town were compromised as the spatial needs, indoors and outdoors, were not in tandem with recommended specifics.
- Absence of emergency preparedness on infrastructure compromised children’s health and safety thereby translating to low quality child care.
- Shortage of vital sanitation infrastructure such as hand washing basins and toilets compromised efforts to maintain health and safety standards.
- Lack of soft landings under and around playground equipment was hazardous and had a negative effect on the maintenance of health and safety standards resulting in low quality child care.

RECOMMENDATIONS

From the findings of the research, the researcher came up with the following recommendations:

- That the Ministry of Education, Sports, Arts and Culture engage in an audit of all preschools in Zimbabwe and ascertain whether they are meeting minimum health and safety standards.
- That those preschools that do not meet minimum health and safety standards be closed.
- That District Education Officers work hand in glove with the Ministry of Health and Child Welfare in ensuring that frequent health inspections are made.
- That licensing of preschools be done once after every two years and issuing of a licence be dependent on meeting minimum health standards.
- That buildings meant for dwellings should not be allowed to be turned into preschools unless where necessary renovations have been done.
- That there be an office that is established solely for the purpose of monitoring the health and safety standards of preschools in every district.

REFERENCES