Running Head: SERVICE PROVISION BY CHILD DAY CARE CENTERS

An Assessment of Quality Service Provision by Child Day Care Centers in Nifas Silk Lafto Sub-City of Addis Ababa

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Abbreviation

FDRE – Federal Democratic Republic of Ethiopia

NICHD - National Institute of Child Health and Development

NSLSC - Nifas Silk Lafto Sub City

Abstract

Child care can be defined as care for children by adults other than the parents of the child. Child care can be informal such as care for the children by relatives, nannies or friends while formal child care is carried out in child day care centers, family day care homes, nurseries, etc. This study was carried out to assess the service provision by child day care center for infants and toddlers which is becoming widespread especially in large condominium house sites such as the study areas, (Jemo, Mebrathaile and Lafto condominium house sites) which are located in three different Woredas of Nifas Silk Lafto sub city. The study area is purposefully selected based on the availability of research participants. The finding of the research point out challenges that child day care centers in the selected study areas have in providing quality child care service. The study found out that the service provided in these day care centers is custodial care for toddlers. Most caregivers are not trained and the need for trained caregivers is not recognized. Large group size, poor physical setting, low wages and poor work environment for the caregivers are also other features of these day care centers which compromise the quality of the child care service provision. On the other hand there is no specific government regulation or guideline and follow up mechanism for proper functioning of the day care centers. The critical role of child day care center services for children, families and the society however, need to be recognized and appropriate steps have to be taken for a better quality center based infants and toddlers care service provision.

Key Words: child day care centers, day care center services, child care, infants, toddlers, caregivers.

CHAPTER ONE- BACKGROUND OF THE STUDY

Introduction

Child care is defined as arrangements for the care of young children, provided by adults who are not their parents (Huntsman, 2008). Informal child care by relatives, nannies, or home care providers usually takes place in a home setting (either the child's home or the adult's home), while formal care by trained or untrained caregivers takes place in school or child care center settings(Huntsman, 2008; NICHD, 2006).

The rapid socio economic and cultural changes have in many countries led to changes in family structure, with a decrease in traditional community life and increase in the number of working mothers (Scarr, 1998). As a result, more day care nurseries, child minding centers, and other related services have been created for preschool children while their parents are away at work (Scarr, 1998).

Child Day care services in some form have been established to a varying extent and quality in a large number of countries and in practically all parts of the world with the acceptance that child care is necessary even for infants and toddlers when the mothers are obliged to work.

(Scarr, 1998) Raising children is however one of the difficult task, but it is the most important and rewarding things that human beings need to do. Caring for children daily is more difficult when it comes to selecting persons and suitable place for the child healthy development and wellbeing.

Children's earliest experiences can have significant and long lasting effects on their development (Berk, 2009; Paulsell, Nogales, & Cohen, 2003). Especially growth during the first three years of life transforms not only the infant's brain but his or her body, mind and personality (NICHAD 2006; Paulsell, et al., 2003). Countries provide regulations on minimum quality

standards and monitoring mechanisms to safeguard the health of and wellbeing of infant-toddler who are using child care center services (Joseph et al., as cited in Blau & Mocan, 1999).

In Ethiopia, especially in Addis Ababa, child care service is a new phenomenon and a booming business for the growing participation of women in the work force. These days there are working families in Addis Ababa who use child-care services for their child from infancy through kindergarten. Therefore, with the growing number of demand for child care services to infants and toddlers this study assesses quality child care service provision by the centers in the selected woredas (Woreda 1, 6 and 12) of Nifas Silk Lafto Sub City. It also aims to assess the current problems and challenges and suggest the way forward in overcoming the challenges.

Statement of the problem

Formal child care is common all over the world especially in developed countries where the majority of parents are engaged in full or part time jobs. Non parental shared child care is therefore normative for human young, both historically and worldwide (Scarr, 1998, p. 95) and not a dangerous innovation representing a major deviation from appropriate patterns of child care (Lamb as cited in Scarr 1998, p. 95). Child care supports or gives a relief for working parents who do not have any other option to take care of their children (Scarr, 1998).

Increased women literacy rate in urban areas of Ethiopia has intensified women's participation in various professions. As a result of this the way of life of the people in general and the child rearing styles in particular is changing. Especially in Addis Ababa city where there are large condominium house sites and the family is mostly nuclear, the challenge of child rearing for working parents is very high.

In other countries where the challenge of child rearing is very acute, child day care service has been an emerging solution for working parents. However, child care service needs to

satisfy certain requirements in order to provide quality child care for the healthy development and wellbeing of the child. Study conducted by Fuller, Kagan, Loeb & Chang (2004) found out that quality child care center services have positive effects on children's development. Berk, (2009) also concluded that child care serves children's development which can be enhanced by high quality early child care service.

Providing infant-toddler care especially requires intensive care and supervision for infants and toddlers requires lower number of children per child-caregiver than for older children (Paulsell, et al., 2003, p. 7). Other key dimensions of child care service delivery in day care centers, like the role of stable staff (caregivers) and positive care giving are also important to achieve quality child care service provision in day care centers (Rohaceket al., 2010).

The early childhood life is the most formative and any poor care at this early age may leave lasting physical and mental traces, which can potential handicaps the rest of the child's life (Berk, 2009). Caregivers, therefore, need training in infant-toddler care and development to ensure that practices and expectations are appropriate to the child age and promote healthy development (Huntsman, 2008; NICHD, 2006). Besides, the service-providing center need to be fully equipped (Huntsman, 2008). However, in the context of Ethiopia it seems that most child caregivers are without proper training, and even sometimes equated with a job for a woman who has not any other work to do.

The flourishing number of childcare centers and users of child care service need prompt attention in order to identify whether the child care service provided satisfies the basic requirements of quality care provision or poses risks to healthy child development. Different countries have put in place different measures to regulate the quality of child care service provision. Providing care for children is serious issues that the public should be involved in

establishing regulations and enforcing regulations to ensure basic safety, health, and welfare for children (Love .et al., 1996).

As far as the researcher's knowledge, there is no research conducted on issues related to child day care service provision to infants and toddlers in the context of Ethiopia. Therefore, this study attempts to assess practices related to provision of quality child day care services to infants and toddlers, show the current challenges and measures that need to be taken by the government towards regulating child day care center services. Moreover the study tries to show the areas of concern and suggests appropriate measures to improve the quality of the services provision by child care centers. Nifas Silk Lafto Sub city and specifically in Jemo, Mebrathaile and Lafto Condominium house sites are selected as a research area based on the availability of research participants as center based child care service for infants and toddlers is widespread in this areas.

Research Questions

- 1) What services are provided by the child day care centers?
- 2) What does child care service provision by the child day care centers look in light of research based components of quality child care service provision?
- 3) What are the experiences of child care givers, owners of child day care centers and parents regarding child care service provision by the child day care center to the infants and toddlers?
- 4) What regulation mechanisms put in place by the government for child care centers providing child care service to infants and toddlers?
- 5) What should be done to improve the service provision by child care centers so as to ensure the healthy development for the infants and toddlers who are using child day care centers services?

Objective of the study

General objective

To assess quality of service provision to infants and toddlers by child day care centers in the selected woredas of Nifas Silk Lafto sub city of Addis Ababa.

Specific Objectives

Assess the practices related to child care service provision by child day care centers to infants and toddlers.

Identify existing problems to providing better quality child care service to infants and toddlers.

Identify the measures taken by the government in order to have child day care service provision which ensure basic safety, health, and general welfare for children.

Give ways for further studies to be conducted in the area.

Significance of the Study

The significance of this study is to assess the quality of service provision by child day care centres to infants and toddlers and identify existing problems. The study also identified measures taken by the government in order to have child day care service provision which ensure basic safety, health, and general welfare for children. It is anticipated that the findings of this study will have significance on the area of social work practice, policy, and research.

This study can be used as base line for further studies to be conducted on the area of child care service provision to infants and toddlers in day care centres. Moreover, this study can give insights to child care centre owners, care givers, parents and concerned government organs that child care is very important and at the same time sensitive area which need due attention,

care and regulation. The study also indicates areas in which social work professionals could intervene so as to bring about a better child care service provision which ensures healthy child development.

Scope of the Study

According to the Sub-city officials the total number of child day care centers in the study cites is estimated to be 15. The study made the assessment of quality of child care service provision only in five child day care centers situated in Woreda 01, Woreda 6 and Woreda 12 of Nifas Silk Lafto sub city in relation to ensuring basic safety and healthy development of children. Moreover, the study covers only child care services provided to infants and toddlers.

Organization of the Paper

This paper is organized into six chapters. The first chapter mainly deals with back ground of the problem and convinces the rationale of the study. It also incorporated the research objectives and the research questions. The second chapter deals with review of related literature on the quality child care and its outcomes on the healthy child development. The need for regulations related to child care is also reviewed. The next section, chapter three is where the research method and the research process of the study are explained. Ethical issues are also part of this section. The fourth chapter presents the key findings of the study. In chapter five of this thesis discussion of the major findings of the study in light of the literatures reviewed. The final chapter is chapter six in which concluding remarks and policy, social work practice and social work research implications are presented.

Operational Definition of Terms

Child day care center- for the purpose of this study may be defined as an establishment for healthy children who cannot be cared for in their homes during a substantial part of the day.

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The basic principle of a day care center is to provide an adequate supplement of parent or family care. In this discussion of day care centers, this paper will exclude those services giving day care with education as a primary aim. Day cares in this paper provide care at a non-home location where infants and toddlers receive care from adults for about 10-12 hours a day and usually including Saturdays.

Child care Service quality –Care that promotes the developmental well-being of children.

Infancy- is from birth to 1 year.

Toddlerhood-is from 1 year to 3 years.

CHAPTER TWO: REVIEW OF LITRATURES

Definition and perspectives on child care

Child care is defined by different Authors. According to Huntsman (2008), child care can be defined as arrangements for the care of children that have been variously categorized as non-parental care and include long day care in centers; home based care in child's own home or caregiver's home. McCartney (2007) also defined Child care as care for young children, provided by adults who are not their parents.

There are different perspectives to child care which are stipulated by different Authors. Child care can be regarded as a service to parents (parents perspective); a way of enhancing children's development (development perspective); the government or regulatory perspective; the provider and staff perspectives (Huntsman, 2008, p. 1; Scarr, 1998, pp. 99-102). The developmental perspective however, that is aspects of child care and children's experience in care, and their current and future wellbeing has dominated research ("Caring for Infants and Toddlers", 2001, p. 8).

Scarr (1998)exemplifies a child development perspective in her definition of quality: "Child care is characterized by warm, supportive interactions with adults in a safe healthy and stimulating environment, where early education and trusting relationships combine to support individual children's physical, emotional, social and intellectual development" (p. 102).

From the historical perspective, non-parental care is not a dangerous innovation rather it is a universal practice with a long history (Scarr, 1998, p. 95). In agricultural society, infants and toddlers are left in the care of relatives or female neighbors, who are also caring for their own children. In Industrialized societies however mothers' employment outside the home has made non maternal care of various types necessary (Scarr, 1998). This demand for child care is the

economic need for women in the labor force and as a result both formal and informal arrangements have become much more widespread (Scarr, 1998; Huntsman, 2008).

As the number of mothers of very young children entering the workforce grew, so did the concern about the effects of non-maternal care on children (Huntsman, 2008, p. 2). The late 1970's was the time that researchers recognized the quality of child care varied widely, and that there was evidence of an association between low quality care and risk on the healthy development of the child (Huntsman, 2008, p. 2).

The Predominance of non-relative care in the last decade has alerted consumers, governments and the research community to the possibly damaging effects of poor quality care on children's development (Berk, 2009; Scarr, 1998). Child care provided by anyone other than the child's parents deserves special notice and regulation and states became concerned for its regulation (Hotz & Kilburn, 1996).

Types of child care settings

NICHD (2006) classified child care settings for infants and toddlers mainly in to three types; the first one is in home care which is, grandparents, or other adults come to the child's home for care of the child, the second is child care homes, meaning adults provide care in their own homes and the third is child care centers (which is the focus of this research), in which children receive care from adults at a non-home location such as a traditional day care centers.

Child Care quality

Infants and toddlers require care while their parents work or go to school. Child care can be regarded as a service to parents, a way of enhancing children's development, and part of a broad range of services to children and parents.

The quality of child care has a direct influence on the child's ability to learn, to be healthy, and to build healthy relationships and become the best he or she can be ("Child Day Care Center", 2009, NICHD, 2006). Early experience leaves a lasting imprint on the child's competence (Berk, 2009, p. 167). Stimulating physical surroundings and warm care giving that is responsive to infants' self-initiated efforts promote active exploration of the environment which is a developmental milestone (Berk, 2009, p. 167). Unfortunately, many infants and toddlers reared in underprivileged environments whether homes or institutions like day care centers continue to be affected by deprived conditions during their childhood years (Berk, 2009,p. 169; Karageorge and Kendall; 2008, p.33).

Consequently quality in child care settings need to be defined in order to develop objective indicators of quality; and to assess whether high quality care was beneficial, or low quality care harmful, to children's development (Huntsman, 2008, p.2). Child care quality measures are grouped in to two categories, structural and process features (Huntsman, 2008, p.2; Kreader, Ferguson, & Lawrence, 2005, P.2). The first is the quality of a child's day care experience, characteristics of day care centers which were subject to government regulation principally staff/child ratio, size of child groupings, and care giver qualifications, health and safety of the child care setting. These and other characteristics of child care setting and of care givers have come to be labeled in the subsequent research as indicators of structural quality (Huntsman, 2008, pp.2 &8; Karageorge and Kendall, 2008, p.33).

The second measure is process quality which is measured by observing what actually occurs in child care settings, especially children's interaction with caregivers and with other children and their engagement with the activities and materials provided(Huntsman, 2008, p.2 &8;Karageorge and Kendall, 2008, p.33).

Aspects of child care quality

Structural aspects of quality

Structural aspects of quality or Structural features of child care are usually regulated by public agencies or by state. These features include adult-to-child ratio, group size, and the training of the child care provider. Structural features of child care are believed to set the stage for the child's day to day experiences in child care (De Schipper, IJzendoorn, &Tavecchio,2004, P. 532).

Child-adult ratio and Group size

The most accurate measure for research purposes, and the most commonly used in research studies to calculate the ratio of children to adults in a child care setting is the total number of staff and children observed in the same area over a given period of time (Huntsman, 2008, p. 4 & NICHD, 2006, pp. 8 - 10). If the child-adult ratio in a child care settings is lower, findings show that there is higher global quality scores, higher process quality, and better overall child outcomes. On the other hand, a large number of children per caregiver have been associated with lower levels of process quality (Huntsman, 2008, p. 4,NICHD, 2006, pp. 8, 10). In a study by Howes et al. 1995 as cited in Huntsman, (2008) revel that a reduction from 6:1 to 4:1 for infants and 8:1 to 6:1 for toddlers improved the quality of care. According to this study the child- caregiver ratio is a stronger predictor of quality for infants and toddlers than for older children.

The study by NICHD (2006) also found that caregivers were significantly more supportive and more respectful of children's autonomy in the 3:1 setting, while children were significantly more cooperative compared with 5:1 ratio- the difference being more marked for younger children, for whom caregivers provided better structure and limits and higher quality

instructions, with less negative regard. Younger children in particular showed significantly higher levels of wellbeing in the smaller groups (Huntsman, 2008, p4 and NICHD, 2006, P. 8, 10). Children receive less attention, affection, responsiveness each time a single child is added to a group (Clark-stewart, Guber and Fitzgerald's 1994, as cited in Huntsman, 2008, p. 5).

Regulations generally prescribe the maximum number of children arranged and supervised as a group, and this differs according to age, with group size for younger children being smaller. NICHD, (2006) finding related to group size shows that where the number of children in a group was of recommended size or below, process quality (care giver child interaction) was higher while poor process quality (care giver child interaction) where group sizes were large. NICHD (2006) recommended children age six month to one and half years to be a maximum of six children in the group, children age one and half years to two years to be a maximum of eight children in the group and children two to three years maximum of 14 in the group.

Chaos and confusion will be created when too many infants or toddlers put in one group, even with an appropriate number of adult caregivers (NICHD, 2006). In small groups, very young children are able to make connections, form caring relationships, and learn to understand other children (Barreau, et al., 2002).

Care giver education, qualification, and training

Caregivers can be categorized according to the level of formal education attended, by the degree of specialization; whether educational attainments are general, other specialists or early childhood and Training whether pre-service, on the-job or continuing (Huntsman, 2008). The link between levels of caregiver education and/or specialized qualifications, process quality and child outcomes is strong on quality (Huntsman, 2008, p.6). Burchinal, Howes, and Kontos

(2002) as cited in Huntsman, (2008) conclude that caregivers level of education is a better predicator of quality than group size or adult-child ratio in both center based and home based care. NICHD (2006)on the other hand found out that specialized training is more strongly associated with quality in the case of infants and toddlers, while formal education is a stronger predicator of quality for children of preschool age.

NICHD (2006) found out that caregivers with a higher level of formal education had more specialized child-related training, held less authoritarian child -rearing beliefs, and were in settings rated as more safe, clean and stimulating. Kontos, Hsu, and Dunn, 1994 considers "care giver specialized training as one prerequisite for better child care and enhanced competence in children" (p. 409). According to Kontos et al., (1994) "the importance of the quality of caregiver-child interaction to children's development suggests that this is an important focus for the training to take" (p. 409).

Stability, staff turnover and staff wages

Stability in child care has been found to be powerfully and consistently positively related to child outcomes (Loeb, et al., 2004 as cited in Huntsman, 2008, p. 7). A decline in the educational background and training of child care staff suggest that this may be related to low wages. Staff wage were in turn is strongly related to process quality which implies that the influence of child –adult ratios and group size cannot be considered independently of staff education and training (Huntsman, 2008; NICHD, 2006).

Stability in care may contribute to explaining differences in the child's adjustment to the day care setting. Children experiencing more caregiver stability in day care have more secure relationships with their caregiver, and show higher degrees of social competence (De Schipper et al., 2004, p. 531). Similarly, according to Korjenevitch & Dunifon (2010) infants and toddlers

who develop stable and affectionate relationships with caregivers display more appropriate social behavior.

Physical aspects of the child care settings

The physical setting should provide facilities for playing, working, eating, washing, toilets, sleeping, and storage room at a minimum level. Infant-toddler child care providers also need adequate space for crawlers and walkers, as well as special equipment such as cribs, high chairs, strollers, developmentally appropriate toys, and age- appropriate outdoor play equipment. (Paulsell, et al., 2003, Page 7)

On the other hand focus on health and hygiene practices such as cleanness and hand washing and its items related to space and the physical setting, are important for the physical health and wellbeing of children (Rolacek, et al., 2010; Huntsman, 2008; NICHD, 2006).

Process features

The second way of measuring child care quality focused on actual day - to - day experiences in the child care setting which are called process features. Careful observations provide information about children's social interactions with adults and with other children's as well as their activities with toys and other items (Berk, 2009, p. 167). That is positive care giving is a measure of care quality that is based on direct observations of caregiver behavior.

Though structural features of child care indicators of child care quality are easy to assess, observations of each child care setting provide more detailed information about day-to-day social interactions and activities (NICHD, 2006, P.10). Among process features one of the strongest and most consistent predicator of children's development is positive care giving that is, sensitive, encouraging, and frequent interactions between the caregiver and the child (NICHD, 2006, P.10).

The essence of care giving that supports child development is a relationship with an adult who is both attentive and responsive to infant's and toddler's concerns, discoveries and achievements ("Caring for Infants and Toddlers", 2001, p. 9). Moreover a study made by Loeb, Fuller, Kagan & Carrol (2004) found out that children display stronger cognitive growth when caregivers are more sensitive and responsive and stronger social development when providers have formal education beyond high school.

Showing a positive attitude that is, the caregiver generally being in good spirits, having positive physical contact, **r**esponding to vocalizations in which the caregiver repeat the child's words, comment on what the child says or tries to say and answer the child's questions, encourage the child to talk/communicate by asking questions that the child can answer easily, praising or encouraging the child's positive actions with positive words, teaching phrases or items, such as saying the alphabet out laud, counting to 10, and naming shapes or object, telling stories, describe objects or events or singing songs and eliminating negative interaction by the caregiver and make sure to be positive in the interaction with the child, even in times of trouble. The caregiver should interact with the child and not ignore him or her are among positive care giving behaviors that are outlined by NICHD (2006).

In conclusion, it can be said that regulated (structural) and process features of child care quality related to each other. The more structural features of care that are regulated by public agencies or by states are indirect indicators of quality of the child's experiences in care. Process features, measured through careful observation of children in the child care setting, provide more direct information about child's experience in care. In general, the structure of child care (structural features) predicts the process features or the children's daily experiences of child care.

The process features, then predict children's behavior and healthy development ("Caring for Infants and Toddlers", 2001; Berk, 2009; Huntsman, 2008; NICHD, 2006).

Child Outcomes

The quality of child care can bring about a significant influence on the wellbeing of infants and toddlers (Paulsell et al, 2003, p.1). Good quality child care that is safe and healthy environment that meets professional standards for good care can positively influence the developmental outcomes of infants and toddlers (NICHD, 2006, Feinberg, 2007, Karageorge and Kendall, 2008). Good child care quality during this period is associated with enhanced social skills, reduced behavior problems, increased cooperation and improved language in children (NICHAD, 2006).

The study made by Kareader et al. (2005) also shows high quality child care supports the positive social, emotional and cognitive development of young children. Positive or negative effects of day care center may appear when the children are older or in the long term ("Day care center", 2009, p. 18)

Berk (2009) divided development in to three broad domains: physical, cognitive and emotional and social. Early childhood development is therefore designed to yield a well-rounded human being, as it explains that growth during the first years of life transforms not only the infant's brain but his/her body, mind and personality (Berk, 2009). Blau & Mocan (1999) assert that "cognitive, social and emotional development of children is enhanced by exposure to high-quality child care and is harmed by exposure to low-quality care" (p. 1) NICHD (2006) outlined the following aspects of child development:

"Cognitive and language development- describes how children learn to think, respond, and interact with the world for acquiring knowledge;

Social behavior - describes how children interact with adults and with one another, as well as how well they manage their own behavior;

Emotional development and relationships with mothers - describes a child's emotional growth and skill; and

Health and physical growth - describes the child's physical features and overall physical health".

Structural dimensions of quality of child care, such as professional caregiver-child ratio, caregiver education, and staff turnover rate has been found to predict the child's socio - emotional development. Higher caregiver-child ratios, higher levels of education, and lower staff turnover rates were associated with more social competence, more social adjustment, and positive caregiver-child relationships (De Schipper, et al., 2004. P. 532).

On the other hand, relations with caregivers (process quality) are the context in which early development occurs. These first relationships that a child forms with adults have the strongest influence on social and emotional development. Physical, intellectual, and social learning occur together as a baby and caregiver go through the day's routine - talking, exploring, playing and cuddling. ("Caring for Infants and Toddlers", 2001, p.9) Infants and toddlers rely on their closest caregivers for security and comfort. Those who are able to develop secure relationships are observed to be more mature and positive in their interactions with adults and peers than children who lack secure attachment. They show a greater capacity for self-regulation, effective social interactions, self-reliance and adaptive coping skills later in life (Huntsman, 2008; NICHD, 2006; "Caring for Infants and Toddlers", 2001).

The need to have Standards and Regulation on Child Care

In the early days and years of the existence of the various types of day care programs, most countries paid little attention though gradually standards and regulations were written and put in to effect which represented a rough consensus of what appeared to be appropriate for young children. (Scarr, 1998)

Hotz & Kilburn (1996) assert that "exposing young children to child care environments that are unhealthy or unsafe, to arrangements in which children may be abused, or to those which fail to provide young children with adequate developmental stimulation can have pernicious and irreparable effects on children's long term cognitive, emotional and social development" (pp. 1 & 2). The imposition and enforcement of minimum standards on available child care services preempt the possibility of such harm being inflicted on children by eliminating low-quality child care services (Hotz & Kilburn, 1996, p. 2).

"It is also important that regulations and informed parents ensure and demand the highest possible quality of care. Because caring for others' children (in groups) requires different care strategies than caring for ones' own children" ("European Alliance for families", 2011, p. 5). By imposing minimum standards on the training of providers and the quality of services they must provide, children and parents can avoid being "defrauded" by providers. It is important to increase regulation of child care services as a growing body of evidence indicates that focusing on the quality of early care and education can have benefits for children, families and the society (Rolacek et al., P.1). By improving the child care giving options available to families, society can support the wellbeing of both families and children ("Caring for Infants and Toddlers", 2001, pp.7-8)

Standards, express a baseline below which no program should be allowed to operate.

Most standards include regulations on health and safety, ratios of children to adults, group sizes,

staff training and often required play materials (Scarr, 1998, p.97). Uncertainty about the importance of improving quality is however especially noticeable when law makers face the reality that creating higher quality for example, including lower ratios and higher salaries costs money (Love et al., 1996, pp. 1 &2). That is there is the possibility that tougher regulations may adversely affect the supply (or price) and thereby discourage the use of child care because it is thus more expensive (Gormely, 2007, p. 21)

The key assumption behind these regulations however is that the quality of child care will be better if the child/staff ratio is relatively low, if the teacher's education and experience are greater...and the child health and development is ensured (Gormely, 2007, P. 10). Licensing and other standards often set a baseline of acceptable practice by the day care centers. Because of this role, standards and enforcement systems are one avenue to reach centers with quality improvement efforts (Rohacek, P. 134). However the mere enactment of child care regulations and standards does not guarantee that they will result in improving child care service quality if it is not fully enforced.

Conceptual Framework

The quality of child care has a significant impact on healthy development of infants and toddlers. Structural features and Process features of child care quality determine the quality of service provision by child day care centers. Structural features are care giver training, group size of children; caregiver to child ratio, caregiver turn over and physical setting while Process feature of child care quality is mainly positive care giving that is sensitive, encouraging and frequent interactions between caregiver and the child. The structure of child care, as described in terms of its structural features, predicts the process features or the children's daily experiences of

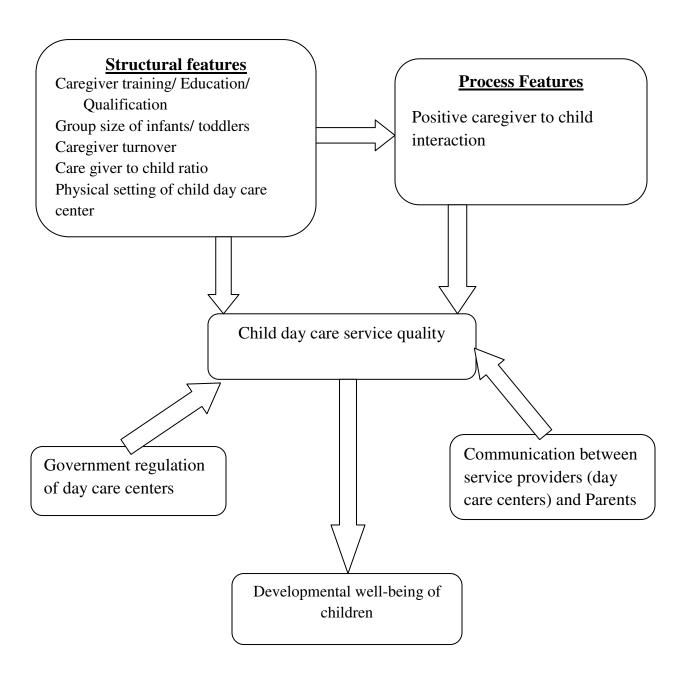
child care. Structural and process features determine the quality of child care center service provision which predicts the child's emotional and physical health and wellbeing.

On the other hand the government regulation and/or guideline are important to ensure child day care centers are providing quality child care service so that the health and wellbeing of the infants and toddlers are not endangered. Communication between the service provider and parents is also anther crucial factor for the improvement of child care service provision quality.

The following conceptual framework is developed from review of relevant literature. Figure 1 shows the conceptual framework of the factors which determine the quality of child care service provision in child day care centers and its impact on the healthy development of children. This framework considers that improving structural and process features of child care quality leads to improved child care quality service provision. The conceptual framework also consider government regulation and communication between service provider and parents as important factors for the provision of a better child care service which is an asset for the healthy development of the child.

Instruments were developed to assess the child care service provision by the day care centers and the challenges to providing quality child care. Accordingly, in depth interview was conducted with caregivers, owners of day care centers and parents. Moreover, key informant interview with concerned Government officials from Nifas Silk Lafto Sub City, and Food, Medicine and health care administration and control Authority of Ethiopia was conducted. In addition the researcher made observations in each of the child day care centers.

Figure 1: Conceptual Framework on determinants of the quality of child care service provision by day care centers



CHAPTER THREE: RESEARCH METHODOLOGY

Research Methodology

This study uses a qualitative cross sectional research method. The qualitative method has been chosen to get an in-depth understanding of the practice of child care service provision by allowing the research participants to express their experiences and views broadly. The researcher selected Woredas 1, 6 and 12 of Nifas Silk Lafto Sub-city purposefully based on the information from the officials of the Sub-city that in the research site there is higher concentration of day care centers compared to other Woredas of the Sub-city.

The data showing the exact number of day care centers giving child care services to infants and toddlers in the Sub-city and the selected woredas is not available, according to the officials of the Sub-city. The officials stated that day care centers may be opened at a certain time and closed after a while and that they did not have tracked this and have no data showing the number of day care centers giving service currently. However they estimated around 15 day care centers are operating in the selected Woredas which according to them is relatively higher than other Woredas of the Sub-city. Thus the research site can serve as a potential area to access the research participants and gather enough information.

Research site

The research site is Woreda 01 (which is known as Jemo Condominium), Woreda6 (Mebrathaile Condominium) and Woreda 12 (Lafto condominium) of Nifas Silk Lafto sub city. Nifas Silk Lafto sub city is one of the ten sub cities of Addis Ababa occupying 63.59 square kilometer which made it the fifth largest sub city in its area coverage. (Nifas Silk Lafto Sub-city Socio-economic Features Bulletin (2013). According to 2007 census the total number of inhabitants in Nifas Silk Lafto sub city is 316,283 and it is estimated to be 351,082 in 2012

making it the third in the size of its population among the sub cities of Addis Ababa. Nifas Silk Lafto sub city is the main area in which housing construction is taking place.

According to Nifas Silk Lafto Sub-city Socio-economic Features Bulletin (2013), Woreda 01, Woreda 6 and Woreda 12 of Nifas Silk Lafto sub city is an area of house construction sites having large number of houses and condominiums and the members of this community are mostly young working parents of infants and toddlers. According to the officials of the Sub-city these woredas have relatively higher number of child day care centers which give service to infants and toddlers.

Data Collection Techniques

Interview

The interview guide is of four types. The first is a guide for the in-depth interview with the child care givers in the child day care centres, , the second is for interview for the child day care owners, the third is for children's parents and the forth one is for the concerned government officials as key informants.

In-depth interview with child care givers

In-depth interview was carried out with child care givers from five child day care centres of the selected sites. Three care givers from day care centres found in Woreda 1 (Betelehem and Sele Enat day cares), two care givers from day care centre found in Woreda 12 (Super Nanny day care) and three care givers from day care centres found in Woreda 6 (Kidus and Rohoboth day cares). The interview took place at each of the child day care centres. The major topics of the interview included the type of services they are rendering, their experience on child care service provision, attitudes and challenges regarding the quality of child day care services provision.

In-depth Interview with Child Day care center Owners

The owners of all the five the child day care centre were interviewed. The major interview questions included what challenges they have encountered in providing a child care centre services, their experiences and views related to quality service provision to toddlers who are using their services.

In-depth Interview with parents

Ten parents (two parents from each day care center) who are using the services of the child day care centers for their children were interviewed. Most of the interview took place at the child day care centers while the parents drop or pick their children and interviews with some of them conducted at their home. The major interview questions included; the reason for enrolling their children in the child day care centers, and the problems they have encountered related to the quality of the child day care services.

Key Informant Interviews with Government officials

Government officials from Nifas Silk Lafto Sub City, Food, and Medicine and health care administration and control Authority of Ethiopian were interviewed. The major issues that were covered include what are licensing procedures for opening child day care centers, regulation and monitoring mechanisms.

Observation

Non-participatory observation was used as a primary data collection method. The researcher visited and made an observation at the selected five child day care centers. This helped the researcher to better understand the type of the services they are rendering to the toddlers. The researcher also observed what the child- care giver relation look like and the

physical setting of each of the day care centers. The researcher recorded every day observation on notebook.

Selection of Respondents

Eight care givers were selected from the five child day care centers. One caregiver from Betelehem day care centre, two caregivers from Sele Enat day care, two care givers from day Super Nanny day care, two caregivers from Kidus and one caregiver from Rohoboth day care. The focus of selection was based on their experience in relation caring for infants and toddlers in child care centers. Ten Parents were selected, two parents from each day care based on the recommendation of day care center owners and caregivers as to which parent could best give the required information. In addition, all the five child day care center owners were selected for the study. Two key informants from the concerned government offices (Ethiopian Food Medicine and Health Care Administration and Control Authority and the Nifas Silk Lafto sub city) were selected based on their positions. Totally the number of respondents was 25 and there were 25 sessions of interview.

Data Processing and Analysis

All the data from the interviews was collected by hand-written notes. Each rough note of the interview is converted to organized notes. The analysis was made based on these notes. To understand the situation the researcher tried to identify coherent meaning out of each report.

Major themes that could fit to the objectives and research question of the assessment was selected. Codes was given to each respondent's idea in order to easily identify who said what while trying to organize the gathered data under each category.

The Findings of the research is presented under each category. While trying to present the findings from the interviews, data from field observation and information from the document review was incorporated.

Ethical Considerations

The purpose of the research is clearly communicated to participants. Participants participated based on their willingness and, written and verbal consents. The participants' privacy and confidentiality were maintained. In addition, responsible government officials who were directly responsible for the issue were informed about the study to get their support.

Limitations

Observing the day care centers by taking longer time was not possible due to time constraint, so that observation was made with in short period of time. However, much deeper observation of each day care center could have provided more detailed information especially about day-to-day social interactions and activities. Moreover, quantitative study using an extensive survey may help to get significant information in numerical data, as the practices and experiences regarding quality child care service provision to infants and toddlers in day care centers may vary among different areas and communities. Therefore, it is the hope of the researcher that this gap of this research will be addressed by future researches.

CHAPTER FOUR: DATA PRESENTATION

General description of the child day care centers

The research project covered five child day care centers found in three different woredas of Nifas Silk Lafto sub city where there are large number of condominium houses. The following general descriptions are from the information obtained from the study participants, key informants and the researcher's personal observation.

Betelehem day care and Sele Enat day care centers are located at Jemo condominium house site or woreda 1 of Nifas Silk Lafto sub city. Betelehem child day care is found in the second floor of a two story communal building of condominium houses while Sele Enat day care is situated in the ground floor of another communal building. Communal Buildings have a maximum of two stories and are built for residents of condominium houses to get communal services. Betelehem and Sele Enat day cares are currently providing child care service to 15 children of age one year up to three year and 20 children of age one year up to four year respectively. There are three child care givers who are also the owners of the day care in Betelehem day care. Sele Enat day care on the other hand, has three child care givers including the owner.

Supper Nanny Day care—is located at Lafto area condominium house site which is woreda12 of Nifas Silk Lafto sub city. This day care is found in nearby area around Lafto Condominium houses. The day care is in the ground floor house of a ground plus one villa. There are 20 children of age one year up to three and half year. The day care center provides the child care giving service with three child care givers including the owner.

Kidus Day care and Rohoboth Day Care centers - are located at Gofa Mebrathaile condominium house site which is Woreda 6 of Nifas Silk Lafto sub city. Both day cares are

situated in the ground floor of two different four stories condominium house buildings. Kidus day care is currently providing child care service to 13 children of age one year up three year with three child care givers including the owner while Rohoboth day care is currently providing child care service to 25children of age one year up to three year by employing four child care givers.

The child day care centers except Sele Enat Day care do not provide child care service for infants below 12 months of age. In Sele Enat day care though there are no infants who are less than one year old at the moment, the owner of the day care stated that they previously had given service to less than one year olds and the day care does not refuse to accept children of that age. According to the owners of day care centers, providing child care service to infants below 12 months of age is a very demanding job, which requires full time attention by the child caregiver. Due to this they do not provide child care service to infants below 12 months of age, though most of them have made it clear that it is their vision to provide such service in the future when their capacity grow.

Type of service provided at the child care centers

According to the owners of the child day care centers, service hours are scheduled as much as possible to make it convenient for the working parents. Two of the child day care centers, Kidus day care and Rohoboth day care provide child care service from Monday to Saturday from 7:00 AM in the morning to 6:00 PM in the evening. The others, Sele Enat day care, Super nanny day care and Betelehem day care provide child care service from Monday to Friday from 6:00 AM in the morning to 6:00 PM in the evening. In addition to working days, Sele Enat day care provide child care service on Saturdays until 4 PM in the

afternoon and Super nanny day care provides child care services on Saturdays until 1 PM in the afternoon.

The interviews with the owners of the day care center owners, care givers and parents shows that similar services are provided in all of the child day care centers. The toddlers use the service of these day care centers until they meet the age requirement to be enrolled in nursery school which is basically for children who are above three years of age. The toddlers are taken to the centers in the morning by their parents. These toddlers are received by the attendant at the center. As indicated above all of the five day cares currently are giving service to toddlers who are from age one year to age three years and there are also some children who are between age three and four. The toddlers learn alphabet, some pictures, songs and reorganize different items in the form of play. Other play activities are also organized though not per age group.

The toddlers are given meal two or three times during their stay at the day care, drink and have time to sleep. They do not take a bath except that they will be cleansed after they defecate. Finally the toddlers are picked up by their parents or a family member in the evenings on their way home. The following discussion shows what these five child day care centers do throughout the day in more depth so as to have a general picture of what the days looks like in these child day care centers;

Sele Enat day care and Rohobot day cares open in the morning 6:00 AM and they receive toddlers until 9:30 AM. In the morning time the toddlers eat their breakfast, play and sing songs. At 12:00 PM up to 2:00 PM they sleep. After sleep they eat their late lunch up to 3:00 PM. Then they play, sing songs, and learn some pictures and alphabet until they are picked up by their parents at 5:00 PM— 6:00 PM in the evening.

Betelehem, Supper Nanny and Kidus day cares - morning 6:00 AM or 7:30 AM (depending on the specific schedule of the day care center) until 9:30 AM is the time they receive children. The toddlers eat their breakfast, play, and sing songs. From 12:00 PM—1:00 PM they eat their lunch and until 3:00 PM they sleep. After sleep they eat their snack, play, sing songs, and learn some pictures and spelling until they are picked up by their parents on 5:00 PM—6:00 PM in the evening.

This is the routine of the child day care centers as described by all of the day care owners and the child care givers and observed by the researcher. The parents have the obligation to bring food, milk or any other drink which the toddlers consume during their stay at the child day care center. The parents bring food which the children eat at least two times a day. The parents are also obliged to bring Diapers for children who are not trained to use toilets. Two of the child day cares (Betelehem and Rohoboth) also require parents to bring Soft paper and Sops at some intervals. Moreover the parents bring cloth which the children use as an exchange if their close is somehow gets dirty. All of these materials are not provided by the child day care centers and if in case the parents fail to bring, the child day cares will provide but request the parents for reimbursement. For example one of the owners of the child day care center told the researcher that; "In case the food the parents bring is rotten or not properly cooked we will not feed that food to the child. Instead we will give to the child another food from our own and ask the parents the cost we incurred as a result of that".

All of the parents interviewed by the researcher regard the service hours convenient.

Regarding the amount of monthly fee, most of them regard it as fair considering that they would have been obliged to pay more had they been hiring home nannies or home servants. Parents from who enrolled their kids in Betelehem day care and Rohoboth day care on the other hand

SERVICE PROVISION BY CHILD DAY CARE CENTERS...

stated that "the payment is not fair considering that they are obliged to bring everything the child needs while staying in day care including soap and soft paper".

Documentation of the Child day care centers

All of the five child day care centers have files in which they document certain information about each child enrolled. They keep photo copies of documents like vaccination card, birth certificate, and parent's identification card. They also make parents sign a form which they provide certain information and address of the parents together with photograph of the child.

Users of child care services

Table No.1 The Socio- demographic Information of parents of children enrolled in day care

Characteristics	Categories	Number
Age	20- 25	1
	26-30	4
	31-35	4
	36-40	1
Gender	Male	2
	Female	8
Two-parent Family	Yes	9
	No	1
Employment Status	Both parents Employed	7
	Only one parent employed	3
Education	10 th grade	1
	12 th grade	3

Diploma	4
Degree	2

According to the information from owners of the child day care centers and the parents participated in the research, the users of child day care services are mostly young employed parents who leave their home for work or for some other business during the day time. The parents interviewed, stated that they came to seek this service because they consider day care center a better option.

Experience of child day care centers on structural quality Aspects

Qualification of childcare givers and Feelings on their capacity

Table No. 2 The Socio- demographic Information of Child care givers in the Five day care centers

Characteristics	Categories	Number
Age	20- 25	3
	26-30	2
	31-35	2
	36-40	1
	26.1	
Gender	Male	0
	Female	8
Educational Status	8 th grade	3
	10 th grade	2
	12 th grade	1

	Diploma	1
	Degree	1
Training related to child	No training	7
care giving	10 month and above child	1
	care giving training	
Length of serving as child	6 month – 1 year	1
care giver	1 year – 2 years	5
	2 years – 3 years	1
	3 years and above	1

From the child day care centers covered under the study, only one caregiver is trained in child care giving, she has diploma in teaching and trained in early childhood education and child care giving. The rest 7 are not trained in child care giving or early childhood education. Regarding formal education, three of them have formal education up to 8thgrade; two have completed 10thgradeandone care giver have completed 12th grade. The remaining one has a degree in Business Management, who is also an owner of a day care.

Most of the care givers have an attitude that formal education or any related training could be useful for better child care quality but they believe that they have acquired capacity to care for the children, infants and toddlers by experience. The caregivers stated the following regarding their attitude and experience on education and training and their capacity to provide child care:

I am 10th grade and I work here because I don't have any other option though the wage here is low. As I worked and had the experience through the years I believe

that I have the capacity to provide good care to children and I believe that training is not that much necessary(caregiver from Sele Enat day care).

Care givers interviewed from Supper Nanny, Kidus and Rohoboth day care centers stated that they attended school up to 8th grade and they have no training related to child care giving.

I'm 8th grade and I took no training related to child care giving. I took training on hair dressing. The main thing here is that the care giver should love children, I love children and I am also a mother of a baby so that is what matters and I have the capacity to give care to children (caregiver from super nanny day care)

The care givers also expressed their views on the importance of having formal education and/or trainings on providing quality care giving;

I'm 8th grade and took no training related to child care giving, however I believe that formal education and trainings have a great deal of impact on giving quality child care giving. Throughout time I got experience on how to handle children and provide care, and at this time I believe that I can do what is expected of me (Care giver form Kidus day care).

Another caregiver also stated; "I am 8th grade and I believe if I get more education and trainings related to child care giving I would be more competent and provide a better care".

(Care giver from Rohoboth day care).

The only care giver who said that she took training on child care giving said that;

Training is a very crucial thing as there is so much difference in the service delivery if you learn or if you don't. I took a 10 months training on child care giving which included practical courses in which I practiced what actually taking care of children looks like by taking apparent sessions on child care centers(care giver from Betelehem day care).

Hiring qualified child care givers

Only Betelehem child day care center owner emphasizes on the importance of the qualification and training of child care giver. Betelehem child care center owner and at the same time child care giver said that;

I strongly believes in education and that i considers it the major requirement for hiring caregivers. All the three caregivers including myself have Diploma in teaching plus trained for child care giving and at the same time owners of the child care center.

Four of the child day care center owners the researcher interviewed stated that, while hiring caregivers they focus on the personal character of the child care giver rather than the education or training requirements. Most of the owners stated that they hire caregivers without the required education or training. Some of their experiences are as follows;

I don't require formal education or trainings related to child care giving, as far as I am concerned if one can read and write it is enough to care for children. My main measurement for hiring caregivers is that they should love children; I will be with them for about a month to see whether they really love children and takes a good care of them. Then if I feel that they are good with them I let them do the child care giving job. I have two child care givers who are 10th and 8th grade and they do this job because they consider it is better from doing nothing and sit at home. Though I am the owner I also do the care giving. I don't have a training but I have 6 years of child care experience in a day care in a foreign country. (Owner from Sele Enat day care)

Owner from Super nanny day care also stated that

When hiring care givers I do not consider education or training as a requirement. However, I focus on the personal character of the individual. I first hire them as a cleaner, and then working together with them I evaluate whether they love children and be able to provide good care, and then when I became confident I

upgrade them in to child care giver. In addition to that I take in to consideration whether they have a child because I believe women having children is more companionate and love towards children. (Owner from super nanny day care)

The other owner also has the same criteria as stated above

I hire care givers who came to me by recommendation from other persons. I do not hire child caregivers who came through brokers. I don't require them to have education or any training on child care giving. My main requirement is to see myself that whether they love children and provides good care for children. I see that by staying for a while with them and by observing their interaction with the children. The other requirement is that they should not be elder women, I prefer young ones and all of my child care givers are young, because I believe that if they are older they will not have the patience and courage to handle children's behavior. (Owner of Rohoboth child day care)

Caregiver to child Ratio and Group size

At Betelehem day care - there are 15 toddlers aged from one year old to three year olds and there are three child care givers. Here the ratio becomes one care giver to five toddlers. At Sele Enat Day Care and Super Nanny day care there are 20 toddlers aged one year and two months to three years and 8 months. There are three child care givers including the owner. The ratio of child care giver per a child in these two day care centers become one care giver to six to seven toddlers.

The lowest number of toddler is found in Kidus day care, where there are 13 toddlers aged one year old to three years and there are three child care givers including the owner. The owner stated that the number of children could sometimes be higher and sometimes lower than this. At this day care center the care giver child ratio is one care giver to four toddlers.

At Rohoboth day care on the other hand largest number of toddlers exist which is 25 aged one year old to three years. The owner told the researcher that the number of children could sometimes be higher and sometimes lower than this. There are four care givers. At this day care center the care giver child ratio is one care giver to 6 toddlers.

In four of the day care centers except that of supper nanny day care, the child care givers do not group the toddlers according to their age. However the care givers said that they give a lot more attention to younger children than older ones. The children sleep together, eat together and play together.

Super Nanny day care - The children aged form one year old to three and half year olds. The children are grouped according to their age for sleep that is children from one year old to two year olds have separate bed room and children from two years old to three year olds have another separate bed room. They eat and play together without any grouping. The child care givers also handle the children together.

Child care giver turn-over

According to the owners of Betelehem, Super nanny, and Kidus day care centers there is no turnover of care givers at all since the time they opened the day cares. The owner of Super nanny day care said that she promotes care givers from the cleaner position to care giver and as a result there is no turn over as they consider the improvement as a good opportunity already. In Betelehem day care, the owner stated that the owners are at the same time caregivers and they three of them who established the day care are still working.

The owners of remaining two day cares, that is Sele Enat and Rohoboth, stated that there are care givers who for different reasons leave the day care. The owner of Sele Enat day care stated that in four years of engagement in this service she hired four care givers where two left and those

care givers hired after them have worked for two years and are still working in this day care. The other one which is Rohoboth day care owner stated that in two years of engagement in this service she hired six care givers where two left for different reasons. Most of the care givers said that their wage is not enough working environment is not good though they have to remain in the job for there is no other better option for them. Care giver from Sele Enat day care stated that;

I am required to work from Monday to Saturday throughout the working hours of the child day care center, and there is no shift between the caregivers in the child day care center. Therefore we have no chance to educate ourselves as we are left with no time to do that. In addition the monthly wage is so small that I work here not to be idle.

Three of the care givers from Sele Enat, Kidus and Rohoboth day care centers stated that they do this job just not to sit at home doing nothing.

Physical Aspects of the child day care centers setting

Betelehem, Sele Enat, kidus and Rohoboth day cares have similar indoor spaces and physical settings. These day cares have one small room for the children to play and dine and that same room is partitioned by curtains in which the children sleep at nap time. In the playing room, there is TV and few CDs of films and songs. These day cares cover the floor of the rooms by carpets. There is another small room where furniture like a closet which holds the children's belongings, fridge, stove, children's chairs and tables (small size) specially they use while feeding the children are placed. There is also a small bathroom for adults. The children's toilets are placed in the bathroom.

The sleeping area of the children there are foams placed on the floor and there are no beds and there are some light blankets for the children which they use during their sleep in the day time. The house looks a little suffocated as the window and the door is closed all the time.

Supper Nanny Day Care unlike the above described day care centers, is a ground plus one villa house and the day care center is on the ground floor. It has playing room with carpet covered floor, two dining rooms with children's chairs and tables, and two sleeping rooms with foam and blankets and one toilet. It has a small compound in which the children relatively can move around. In the playing room there is TV and a foam, the floor is covered with carpet. There are the necessary furniture like closet, fridge and stove. The researcher has also seen office of staff only in this day care.

With regard to outdoor play area - Betelehem day care has no outdoor area as it is located in the second floor of a two story communal building of condominium houses. Sele Enat day care (which is found in the ground floor of communal building) and Kidus day care (which is found in the ground floor of a four stories condominium house building), have an open area outside where the children could play but it is not fenced and the ground is not prepared for the children to play. The owner of Sele Enat day care stated that as she rented the house she cannot fence the compound since the management of the condominium site wouldn't allow her. Kidus day care has compound having a sort of fence from wood and sticks. The owner of the day care stated that though the house is her own she could not do anything on the outdoor area in order to make it suitable for the children play there, as the condominium rule or the management would not allow her do that. Therefore the children will not play in that compound and are restricted to stay all daylong in that small house which do not have much space for them to move around as they want.

Rohoboth day care which is situated in the ground floor of four stories condominium house has a small terrace. The children stay in the house and sometimes get outside the owner told the researcher. In the terrace the children sometimes sit and not allowed to run and move around as they wish because it has heights and stairs that the children could fail down. The remaining Super

nanny on the other hand is different from the other day cares as it is a ground plus one villa house it has a small compound and collider in which the children can play and move around.

Parents interviewed by the researcher particularly from four of the day care centers except supper nanny day care have different concerns related to the small size of the playing room, lack of separate rooms for sleep and dinning, and that their toddlers are not able to play and get a free air for there is no outdoor area or the outdoor area of the day care centers are not used for that purpose. On the overall physical setting, some of the parents have said the following:

I always have concerns whether my child would be hurt physically. One day I arrived while that caregivers were boiling coffee on stove in that small children's playing room. I was shocked because the children may come to the fire suddenly and they could be hurt. More over the playing room is so small for the children and there is no compound for the day care so the children do not have space to move around freely and to play. They are restricted to stay in that room for the whole day. More over there is no enough air circulating in the room. They close the window all the time and the door too is closed. (Mother of a two years and nine months old boy in the Betelehem day care)

Another parent also stated that;

The room is so small that 20 and above children do not move around as they want. Normally children of this age want to explore the environment and are highly mobile, in this day care however most of the time the children are told to sit in one place, so they are frightened to move around. In front of the day care there is small open area though it is not owned or rented by the day care. Sometimes the caregivers take the toddlers in to the compound but as it is not fenced they order them to sit in one place because if they let them play freely the children may be dispersed. (Mother of a three years and six months old girl from Sele Enat day care).

The personal observation of the researcher as well as interview of parents shows that most of the time the toddlers sit in the playing room as there is no enough indoor or outdoor area which is adequate for them to move around and play.

Moreover, concerning hygiene of day care centers, all of the owners of the child day care centers and the care givers have told the researcher that they "take this issue seriously and give attention to clean the rooms, toilets, the carpets, the furniture like chairs and tables the children use to eat, and the hygiene of themselves and the children". They said that "caregivers as well as the equipment and the play areas are always kept clean". Related to this most Parents raised issues such as lack of enough fresh air circulating in the rooms since the rooms are small and the windows and door is closed all the time. Regarding this issue one parent mentioned the following;

Most of the time I found the room where the children stay suffocated; there are about 20 children in this small room (4 by 4) space area. There is one window which is always closed and they don't open the door too. (Mother of a three year and six months old girl from Sele Enat day care)

Parents enrolled their kids at Betelehem, and Kidus day cares shared the above mentioned view. Other parents interviewed by the researcher said that they cannot comment on this issue for the most because they are not allowed to see the inside of the house.

The researcher observed the care givers do not have uniforms and some look like their closes are not neat and especially so for Sele Enat day care. However asked whether their kids have ever encountered any health problem related to lack of hygiene of day care centers, all of the parents interviewed stated that they have never encountered major problems except that their kids may catch cold seldom.

The researcher also observed that the child day care centers except Super nanny day care have problems related to availability of developmentally appropriate toys, pictures, colors or

decorations and appropriate outdoor play Equipment. Most of them are not attractive for children of that age, there are no adequate toys, furniture, such as floor cover, beds, closets for the children's belongings. There is no play equipment outdoor for those day care centers that have compound that is Sele Enat day care super nanny day care and Kidus Day care. Only in Super nanny day care that, the researcher saw colorful pictures and spellings and toys which are not small in number. The room is not decorated in a way attractive for children. There are colorful pictures and spellings and toys which are not small in number.

Parents interviewed by the researcher described the problem related to the availability of Special Equipment, such as Cribs, High Chairs, strollers, developmentally appropriate toys, pictures, colors or decorations and appropriate outdoor play Equipment for the toddlers. A parent from Sele Enat, day care for example said that "the day care lack so much with regard to making available those indicated things".

Another parent from Rohoboth day care also described the lack of adequate toys and outdoor play areas and play equipment for the toddlers. She stated that "there are times that i bring toys from home for my child to play with". Moreover parents said that, picture books, alphabets are not adequately provided in the day care centers. The owners of the day care centers also believe that there is much to do with regard to making available those things which are necessary for the toddlers' mental and physical development.

Positive child-care giver interaction

As indicated in the previous discussion the owners stated that they thoroughly investigate the personal behavior of caregivers while hiring and even after hiring them without fully charging them with the caregiver's duty. All of the owners of day cares however stated that, they "believe the personal behavior of the child care giver matters most to give positive child care giving than

other factors such as caregiver education or training". The caregivers interviewed by the researcher on the other hand have described their own understanding about positive child - care giver interaction. All of them expressed that it is treating children with love and patience and comforting the child in every way. All of the owners of child day care centers and caregivers stated that they "show the toddlers love and affection starting from accepting the children till they give them back to their parents at departure time". The owners of the child day care centers and the caregivers claim they always maintain positive child caregiver interaction.

A caregiver from Kidus day care said,

I try to know the child's behavior, and try to provide care according to his will. For example there are children who want to have toy (car) the moment they arrive at the child care center, so I provide them what they want. If a child cries, I would not get angry at the child rather I show them pictures, tell them stories etc. so that he forget to cry and start playing.

A care giver from Supper nanny day care also stated that,

I love children, as I m a mother to a child too, so I treat them just like a mother. I never get harsh towards them ever. I always try to deal with them peacefully and playfully and try to make their day at the child care center pleasant.

A care giver from Betelehem day care however said that sometimes it is necessary to be harsh in order to shape the difficult behavior of toddlers. She said that;

The children who are younger need our outmost attention and care while the elder ones do not, because they do as we say. If they refuse to play or eat I just try to feed them or do what they have to do by making them play and making some tricks. If they refuse I will order them to sit and watch films.

During the field work however, the researcher observed in Sele Enat, Rohoboth and Kidus day cares, the songs are very loud, to the extent that it could disturb adults let alone the children.

Dippers changed in the playing room, children are left unattended and not given enough attention from the care givers as the number of caregivers attending to the toddlers are low compared with the toddlers' number. In Sele Enat day care for example the researcher saw a year and two months old boy who was continually crying left unattended for quite long period of time while care givers keep on feeding the other children while this little baby was crying for a quite long period of time.

In Super nanny day care on the other hand, the children play and eat together; Plays are not organized for different age groups and the caregivers are watching the children collectively. The researcher saw children in the play area and at the colliders who are unattended.

In relation to positive care giving parents who enrolled their kids in these child day care centers have different concerns. The parents interviewed by the researcher believe that there is so much to be improved regarding positive care giving though the owners of the child day care centers and the caregivers claim they always maintain positive child caregiver interaction. The parents believe that some of the care givers are authoritarian while treating the toddlers and they do not give enough attention to toddlers as the number of caregivers attending to the toddlers is low due to the fact that most of the time the care givers are engaged with other tasks or not present at the day care mainly if the care givers are owners of the day care at the same time. Some parents mentioned their concerns as follows:

I have fear related to enough supervision of children. Sometimes one caregiver only takes care of 15 and above toddlers. Sometimes I came early to the child day care center to pick my child and on the way to see how they are caring, so one day I came early in the afternoon, and when I knock the door no one was able to open the door. After a while I started to see through the hole between the curtains of the window. There was no caregiver attending to the children, the children were left alone, and after a while a caregiver comes out of the other room. I think this is very dangerous for the children the children may hurt

themselves, or harm each other. Moreover, the caregivers angrily talk to children for example to make them eat, I hear them while I go up and down the stairs as they do not let us in (mother of 2 years and 9 months old boy from Sele Enat day care)

Another parent also said that

I do not think the care givers offer enough attention for the children whose number I suppose is more than 20. The caregiver's number which is 3 is not enough to take care that much children. I saw that the attention of the caregivers is diverted. I believe it is better to increase the number of the child care givers and to educate and train them to enable them to provide a positive and nurturing care giving to the toddlers. (Father of two year old girl from super nanny day care)

Four of the parents interviewed stated that, they do not see what is happening inside as caregivers do not want to let them inside. A mother who enrolled her two and half year old girl in Rohoboth day care stated that

I do not look deeply in to how they treat the children throughout the day because the day care centers do not allow us to enter in to the room. But I see that during we drop them and pick them up the caregivers treat my child affectionately and with love. I believe that the caregivers love my child and treat her"

The parents suggest measures that they think would help to improve the positive care giving which are mostly related to improving the structural quality of the day cares specially related to care givers education and training, high care giver to child ration and lower group sizes and so on.

Communication between parents and day care center owners and caregivers

Parents interviewed by the researcher expressed that service provider - parent

Communication is poor. The parents stated that they do not comment or discuss on quality service

provision issue with the owners or with the caregivers for fear of mistreatment of their children by the day cares in return for the comments and arguments they made with them. According to the parents, child day care owners and caregivers have no room to entertain comments specially which point out problems on the quality of service delivery.

I see things which are not proper such as the caregivers failed to properly feed my child, the room is suffocated or hear the caregivers shout at the toddlers. However, I keep silent because the owners or caregivers are not welcoming for such kind of discussion. (Mother of a 2 and half year old boy in the Betelehem day care)

The owner of Betelehem day care on the other hand stated that the day care has discussion programmers with parents per two or three months. The rest of the day care stated that they do not have discussion forums or any kind of formal arrangement for accepting parent's opinions and concerns. However the owners stated that they accept parent's opinions while the parents come to drop and pick their children and believe that it is not enough and should be improved so as to enhance the quality of the care giving.

All the owners of child day care centers who agreed to participate in this research showed a strong commitment to meeting the needs of children and families. They also had their own perspectives about the definition of quality services. On the other hand, the parents also have high desire and expectation for improved communication between providers and parents for better child care service provision.

Regulation of child day care centers

The researcher interviewed two government officials as key informants. One is from Ethiopian Food Medicine and Health Care Administration and Control Authority working as "yesirahidetmeri" and the other is Environmental health Officer from Nifas Silk Lafto Sub City.

Both these officials under the two offices are responsible for issuing competence certificate that is a requirement for obtaining license to open child day care centers and follow up of the proper functioning of the child day care centers.

Nifas Silk Lafto Sub City, Health division and the Ethiopian Food Medicine and Health Care Administration and Control Authority are the government offices which are currently responsible for issuing competence certificate which is a prerequisite for obtaining business license from Woredas for opening child day care centers. The officials from the two government offices told the researcher that there is no regulatory requirement or guideline for center based infant-toddler child care designed to safeguard the safety and healthy development of this vulnerable population.

Official from Ethiopian Food, Medicine and Health Care Regulation Authority stated that "our main focus is the health aspect. We look in to whether the applicant for child day care business license has satisfied health and safety requirements such as having clean rooms, toilet or bathroom, checking caregiver's health conditions, etc". He added that, this government office has a plan to come up with comprehensive guidelines and regulations in the future.

Asked how the office is going about regarding issuing competence certificate to applicant's for child day care business license, the official from Nifas Silk Lafto sub city also replied that;

The staff responsible for checking the applicant's competence for opening day care center knows what to require the child day cares to satisfy and does not refer any written guideline because there are no guidelines so far. For example we will check whether the applicant have separate rooms for playing, sleeping, dining, bathroom outdoor play area, necessary furniture such as fridges, stove, TV.

Both officials also stated that the lack of guideline and regulation have negative impact on the on the child care service provided to infants and toddlers.

Licensing Procedure

According to the key informants from both offices (Ethiopian Food Medicine and Health Care Administration and Control Authority and the Nifas Silk Lafto sub city), the competence certificate the offices issue is not a competence certificate in the full sense of the term. It is a sort of procedure in which the offices give the applicant the permission to go ahead and get a business license from Woredas in order to open a child day care center. According to these key informants, it has been two years since these government organs have been doing this. The procedure of licensing child day care center is explained by the NSL sub city official;

We tell the applicants what to satisfy such as to have separate rooms for playing, dinning, sleeping, toilets, to have the necessary furniture, and to prepare care givers health certificate that show the caregiver is free of any health problem. Then we make appointment with the applicants for visit. And as per the schedule we go and visit to make sure that the applicants satisfy all the requirements they were asked. After the visit if the applicant satisfied all the requirements asked, we will give them a certificate which the applicant takes to the woreda Trade and Industry Bureau. The woreda then issues to the applicant a business license for opening a child care center.

The government officers have told the researcher that they issue license to the applicants even if the applicants failed to fulfill necessary requirements, such as adequate indoor space and outdoor play area. The reason that the officer gave is in condominium areas, where there is a high demand for day care services, the day cares in the condominium buildings may not have enough space.

Inspect, supervise and take measures

SERVICE PROVISION BY CHILD DAY CARE CENTERS...

Both of the key informants mentioned that there are no inspections and supervisions on the day cares centers. Both had said that "due to work load of the offices, and manpower and resource constraints these works have not been carried out as they should be".

The officials also said that as a result of absence of inspection and supervision there are no instances so far that day care centers that provide impaired service for the healthy development of the children are found and measures taken against them. Asked how they are planning to improve the situation, one of the officials replied that "the job is newly assigned to us and we are in the process of recruiting personnel for this job".

CHAPTER FIVE: DISCUSSION

This part discusses the main findings of the study. The aim of this research is to facilitate the interpretation and understanding the practice and experience of child day care centers. It also aims at showing the need for quality childcare service to toddlers, identifying challenges to provide quality child day care services, and suggesting the way forward in how to overcome challenges.

Though the findings cannot be generalized to all day care centers, they would give us an insight on the quality of service being delivered in the study areas. It would also show the perception of caregivers, owners of child day care centers and parents regarding the quality of the services being provided. Moreover, it would show us the overall measures and attention that need to be given to child day care centers.

Service provision by child day care centers

The findings show that the child day care centers provides childcare services to mainly toddlers aged between 1 and 3 years though there are few children aged up to 4 years. The services given at care centers is mainly of custodial care and mostly untrained caregivers are the one attending the toddlers, who feeds, plays and look after them while the parents provide food, drinks and dippers for the toddlers. However, Huntsman (2008) argues that childcare service is a way of enhancing children's development from its developmental perspective. And that child day care centers should instead be properly staffed with well-trained caregivers and fully equipped; so that the children are physically well cared and their minds are also fully exercised (Huntsman, 2008; NICHAD, 2006).

The finding of this study indicates that the child day care centers are not willing to accept infants' age below 1 year. The reason they give is that infants are too demanding and they

need more time and resource for care. However the service should have been available for the infants to make working parents relieved. As childcare is a very important service for working mothers this should be considered and the concerned bodies of the government also take appropriate measures in this regard.

Regarding the service hours given by the centers most parents participated in the study regard indicated that the service hour is convenient. The service is given from Monday to Friday and from morning time to the evening. Besides, three out of the five childcare centers are also opened on Saturdays.

Most parents perceived that the monthly fee is fair compared to what they would have paid had they been hiring home nannies or home servants to look after the kids. Some parents however found it costly considering that they are one who is expected to fulfill all basic materials including soap and tissues.

The nature and quality of day-care centers services, however, vary widely based on the personnel, facilities and standards maintained. Though the current childcare centers are not expected to be the best it is necessary to satisfy at least minimum quality requirements. Research shows that high quality childcare positively influence children's development and learning, while poor quality care is shown to have negative effects on children (Kreader, 2005). The effects of high or poor quality childcare may be long lasting (Berk, 2009). Therefore, quality in child care matters very much for children, their parents, our communities, and perhaps most importantly, for our society as a whole.

The Need for child care services

This study shows that most parents who are seeking child care services are young and employed parents. These parents are living in or in a nearby to condominium apartments. These parents

enrolled their kids to a day care centers, because they find it a better option to take care of their children while they are away for work. Childcare can be regarded as a service to parents when seen from parents' perspective (Sandra, 1998). Scarr (1998); Berk (2009) suggested that the effects of non-parental care experience might be mediated by the quality of care. Day cares are very important for mothers which allow them to run their work while at the same time they taking care of their family responsibility. Moreover, children can benefit in the long term from center based day care arrangements in various ways ("Day care center", 2009, p.20).

In the industrialized countries the needs for childcare center are determined mainly by the number of mothers working outside their homes (Sandra, 1998). The beginning of a new way of life in urban communities of Ethiopia started to demand the existence of day cares. The change in the country's socio economic condition, the degree of urbanization, and the local housing situation are some of the factors increasing the need for day care services in Ethiopia.

Considering this growing need for more day care centers the service provision should be available with improved quality of the child care service particularly in condominium apartment areas where the demand for day care is more visible. Parents should get the good quality child care service without going far. Thus concerned authorities of the government entrusted with this task should create conducive environment and also regulate it to make sure the quality of the child care service is good and to include large portion of the population use the service.

The structural and process features of quality of Child day care center services

There are a couple of standard recommendations available to show what a quality daycare center constitutes. There are two quality child care services. These are: (1) Structural quality
that comprise care giver training, small group size, small child to care giver ratio, stability of

care giver milieu and the physical setting of the child day care center; and (2) Process quality refers to the positive care provision by sensitized staff (Huntsman, 2008; NICHAD, 2006).

Communication between care providers and parents is also noted as an important quality factor.

Caregivers training in early childhood development

The findings of this study show that most of the child care givers do not have training on early childhood education and on how to give child care. Among the five child day care centers in the sample only one caregiver out of eight is trained in child care giving (she has diploma in teaching and trained in early childhood education and child care giving). The rest 7 are not trained in child care giving or early childhood education. Three of them have formal education up to 8th grade, two of them have up to 10th grade and one care giver has completed 12th grade. The remaining one has obtained bachelor degree in Business Management, who is also an owner of a day care center.

The study result also shows that all owners of the child care centers except one day care owner have the attitude that formal education and/or any related training is unnecessary as long as the caregiver love the children. They believe that the experience they have acquired is enough to care for the children, infants and toddlers. This attitude of the owners seems to focus only on the personal behavior of care givers, rather than on the qualification while hiring child care givers.

However, studies suggest that education and/or specialized qualifications have a huge impact on the overall quality of care giving. The link between levels of caregiver education and/or specialized qualifications, process quality and child outcomes is strong (Burchinal, Howes, and Kontos, (2002) as cited in Huntsman, 2008). NICHAD (2006) report further argues that specialized training of caregiver is more strongly associated with quality, while formal

education is a strong predicator of quality for children of preschool age for infants and toddlers. Other research also suggests that caregivers with a higher levels of formal education and have more specialized child-related training, had less authoritarian child-rearing beliefs, and were in settings rated as more safe, clean and stimulating (NICHD 2006). Hence much attention has to be paid to education and/or training of child caregivers. The attitude of owners and caregivers on the need to have caregiver training need to be changed, because it has a huge impact on the overall quality of the childcare service be it on the structural or the process quality aspect.

The responsible government organ should made mandatory for the formal training requirement and monitoring its compliance. On the other hand caregiver training centers should avail standard training for caregivers before actually starting the job. The day care centers should not be only as places where untrained persons merely see that the children and fed the kids.

Care giver to child ratio

The number of toddlers aged 1-4 found in the five day care centers range from 13–25. In the three day care centers, namely Sele Enat, Supper nanny and Rohoboth the ratio of caregiver to toddlers is found to be 1:6-7 toddlers. Whereas, in Kidus and in Betelehem day care centers the ratio is found to be 1:4 and 1:5 respectively. Caregiver to child ratio is a stronger indicator of quality for infants and toddlers than for older children (NICHAD, 2006). Howes et al. (1995) as cited in Huntsman, (2008) have found out that the reduction of the ratio from 6:1 to 4:1 for infants to caregiver and 8:1 to 6:1 for toddlers to caregiver have improved the quality of care. Care giver-child ratio in the study area centers seems to be appropriate when seen in light of these findings.

The personal observation of the researcher as well as the interview of the parents however reveled that toddlers do not get enough attention. This is not because of the higher ratio

of toddlers to the care givers but rather due to the caregivers (notably the owners and caregiver at the same time) are not present full time at the day care center. Caregivers do not give them enough attention while they are busy with other tasks such as cleaning and other stuff. Previous studies indicates that in settings where there is higher caregiver to child ratio it is more likely that the children get individual attention and that it has higher global quality scores, higher process quality, better overall child outcomes. Whereas, higher ratios of children per caregiver had been associated with lower levels of process quality (Huntsman, 2008 and NICHD, 2006).

All of the five child day care centers investigated for this study have much to improve in this regard. Most child care service providers have one or two caregivers regardless of the number of toddlers in the day care. Impact of ratios of children to caregiver on quality will be more significant when the ratios exceed 1:7. The owners of the day care centers who consider themselves as a child caregiver as well should engage in the job full time and they have to make sure that the other caregivers are attending to the toddlers all the time.

Group size

Group size of the children is high and there is no grouping among the children on any other basis. Groups in this case mean a specific number of toddlers present at the day care center. The researcher have observed no grouping of the toddlers either by age or other criteria except in Super Nanny day care they use kids smartness and age to group them.

Standard recommendation on the number of children that need to be arranged and supervised in a group varies by age. For example, for younger children smaller group size is preferred. Studies show that process quality (care giver child interaction) was higher when the number of children in a group is in a recommended size or below; while poor process quality (care giver child interaction) was observed when group sizes was large, (Huntsman, 2008 Page,

p. 5, NICHD, 2006). As the number of infants in a group goes up, so do noise level, stimulation, and general confusion group's intimacy is gone (NICHD, 2006)

In three of the child day cares covered under this study the group size is 20, 20 and 25. The remaining two day cares have 13 and 15 toddlers. As described above two to three care givers attend when the toddlers play while other activities like songs, teaching of alphabets and painting are conducted without grouping them according to age or any other basis. For instance, smaller toddlers aged 1 and half are treated the same way as toddlers aged three and above. This affects care that needs to be given for different age groups considering their age and has to be improved.

Care givers turnover

It was found that most of caregivers are not trained neither have high formal education level, which means they are low paid. Some of the caregivers stated that they do this job simply because they do not want to be idle and remain at home. These conflicting interests increase the instability of caregivers, though stability of caregivers proved to show strongly and consistent positively child outcomes (Loeb, et al, 2004 as cited in Huntsman, 2008). A high turnover of caregivers, force the child to adapt to different individuals often. That in turn affects the secure relationship between caregivers and children (De Schipper, et al. 2004. pp. 531, 532, 547).

The owners of child day care centers described that there is no significant caregivers turnover in the study day cares. The reason for the stability is not because the attractiveness of their wage neither the working condition. The possible explanation to this low rate of caregivers turnover is that caregivers are in a situation known as "poverty trap", because these caregivers have no alternative market due to their low level of training or education. The relationship between low age and education level has complicated effect on childcare. Because a low level

educational background of child care staff would mean lower wage rate. Low staff wage is in turn strongly related to process quality, which can negatively impacts the child care provision. By failing to meet the needs of adults who work in child care, we are threatening not only their wellbeing but that of the children's in their care (White book, Howes and Philips 1989 as cited in Love, 1996, p.1)

Though the combined effect of low wages and poor work environment was not leading to caregivers to turnover, it has brought low level of motivation towards work. Care providers need to be valued by society, well compensated and enriched by serious and careful education and/or training (European Alliance for families, June 2011, p. 5). The owners of the child day care centers should be concerned to improve the wage and the working environments and also to provide opportunities to upgrade caregivers capacity through trainings to secure better care giving service.

Physical setting

Four of the child day care centers except Supper Nanny day care have similar physical setting. Toddlers spend the day in this small room where they do not have enough space to move around or play freely. There is so much sitting in these day cares as there is no space adequate (playground) for the children to get out and run around. They eat and sleep in the same room that is partitioned by curtains. However, Supper Nanny Day care center has relatively wider indoor space and separate classes for playing, sleeping and dinning. On the other hand, Rohoboth and Betelehem day care centers do not have outdoor play area whereas Kidus, Sele Enat and Supper Nanny have outdoor space, but they are not using it.

Infant-toddler childcare providers, however, need to prepare adequate space for crawlers and walkers. Besides age- appropriate outdoor area and play equipment is important for the health

and wellbeing of children (Rolacek, et al., 2010; Paulsell, et al., 2003). The caregivers also need to take much care to avoid objects and some activities that may cause injury to the toddlers. It was found that parents are anxious to see some caregivers boiling coffee in the playing room using highly flammable gas or sometime suffocating charcoal that is too dangerous for their children's safety.

Making available play equipment and enough toys for the toddlers is also found to be another problem. There are limited number of toys, pictures and other play equipment. Moreover the child day care centers are not colorful and prepared in a way attractive to children. Super Nanny day care center, however, is better in this regard; there are toys and other play equipment and especially the playing room is decorated with different pictures, alphabets and colors. Play is regarded as an essential function in the life of a child, and helps for the harmonious development of the child's personality. It is important to create a stimulating atmosphere for the child so that the child becomes adapted to his/her environment. Owners of the toddler childcare need also to provide special equipment appropriate for the child development, such as cribs, high chairs, strollers, toys, and outdoor play equipment (Paulsell, et al., 2003, Page 7).

Regarding hygiene, both the caregivers and the owners claimed that they give much attention to keep the day care always clean. Majority of parents interviewed have also attested the same fact. However, parents complain for the lack of enough air circulating in the room, as the windows and doors are always closed. I have also observed that the caregiver's uniforms was not clean and specially so for Sele Enat day care. Besides the rooms does not look clean in the mentioned childcare center.

This unhealthy environment can cause health problem to children. The children's toilets, their belongings, food, their chairs and tables, their sleeping foam and blanket have to be clean in

order to keep them healthy. Paulsell, et al., 2003, argues that "health and hygiene practices and its items related to space and the physical setting, related to and the children's overall physical health" p. 7.

Issues like providing adequate indoor and outdoor area play equipment makes the childcare setting clean and suitable also needs the attention. The government officer has told the researcher that they issue license to the applicants even if the applicants failed to fulfill necessary requirements, such as adequate indoor space and outdoor play area. The reason that the officer gave is in condominium areas, where there is a high demand for day care services, the day cares in the condominium buildings may not have enough space. However, the issuance process should consider the healthy development of the child. There is a lot more expected from the government in order to bring about marked improvement in the facilities available.

Positive child-caregiver interaction

During the field work the researcher have observed caregivers trying to show love and affection for the children and it is especially so when the toddlers are coming and leaving the day care center. However, parents' description as well as through the researcher's own observation, there are times when caregivers became emotional and show dictatorial behavior towards the toddlers. Yet, it is important to exhibit consistent positive care giving because that is one of the strongest predicator of children's development.

All the five day care centers mainly provide custodial care and the daily program of the day care centers also makes little or no provision for planned activity to let the children enjoy his/her day. Impersonal approach of day-care centers to the children tends misunderstand the emotional needs and problems of children. This approach creates symptoms of emotional neglect for the child. "In quality child day care centers caregivers are sensitive and responsive to children's

needs, often offer a language-rich environment, organize activities that promote development, and encourage children to behave in pro-social ways" (Mccartiny, 2007, p.2).

Positive childcare giving is crucial factor for quality child care service provision. It measures child care quality focused on actual day to day experiences in the child care setting. The findings of the study show that most of caregivers have lower educational level and have no training, are too few in number to provide even a minimum individual attention and mostly the need for trained staff is not recognized. Positive care giving however is dependent up on the presence of structural features such as caregivers education and training, group sizes and adult to child ratio(Huntsman, 2008; NICHD, 2006). That means these structural features of quality predicts the process features or the children's daily experiences of child care. The process features, then predict children's behavior and healthy development ("Caring for Infants and Toddlers", 2001; Huntsman, 2008; NICHD, 2006).

NICHD (2006) found that the more positive the care giving is the higher the quality of care will be. According to NICHD (2006) the relationship between adult-to-child ratios and children's outcomes could be explained by care giving behavior - that is when caregivers cared for a smaller number of children, they showed more positive care giving - which in turn is associated with better outcomes. The same is true for caregiver education level- caregivers with higher education levels engaged in more positive care giving and the children they cared for showed better outcomes. Positive care giving, then, was a primary indicator of childcare quality(NICHD, 2006).

Generally, children differ from adults in their needs, which are peculiar to their age and maturity. Their satisfactory growth and development depend not only on the provision of protection and adequate nutrition but also psychologically stimulating environment. Positive care

givingis the strongest and the most consistent predicator of children's development, which is sensitive, encouraging, and frequent interactions between the caregiver and the child ("Caring for Infants and Toddlers", 2001, p. 9). In this regard, the awareness and approach of caregivers and owners towards the child care need to be improved.

Communication between parents and service providers

All the owners who agreed to participate in this research showed a strong commitment to meet the needs of children and families demand for their children. They had some ideas about what constitutes good quality child care and plans for the future on how to improve the quality and scope of their service provision. However, communication between parents and service providers is very poor in all of the child day care centers under this study, though communication is very critical issue. Parents who agreed for this study interview expressed that they do not comment or discuss on quality service provision with the caregivers, because of the fear for mistreatment of their children.

Owners and caregivers are not ready to entertain comments specially which point out problems on the quality of their service delivery. Parents are not even allowed to enter and see the rooms where their kids stay. This behavior of the service providers harms the relationship between them and parents. It also hampers possible room for improvement of the service delivery, for the service providers will not get any feedback and comment on their gaps. A regular communication network needs to be established in some intervals between parents and owners for better improving quality and facilitate cooperation between them.

Government's move towards child day care center Services

The need for child day care centers is increasing and so is the number of child day care centers opening. Different countries child care choice experiences range from informal

arrangements with relatives and friends to registered family child care homes and licensed child care centers for which detailed rules and guidelines are in place with strict enforcement of the rules (Scarr, 1998). The imposition and enforcement of minimum standards on available child care services preempt the possibility of such harm being inflicted on children by eliminating low-quality child care services (Hotz & Kilburn, 1996).

In the context of Ethiopia, child care is the primary responsibility of parents and specially the mother though child care by relatives and friends are also prevalent. The growing number of mothers entering into work force, especially in Addis Ababa in recent years, however led to the expansion of day care centers in large condominium sites, which are mostly occupied by young working parents.

Nifas Silk Lafto Sub City, Health division and the Ethiopian Food, Medicine and Health Regulation Authority are government offices, which are currently responsible for issuing competence certificate and license for child day care centers in the study area. However they do not have regulatory requirements or guidelines designed to safe guard the safety and healthy development infants and toddlers using child day care center services. Data on the number of child day care centers, their location and other details are also not available. Paulsell (2003) argues that "the government should put standards below which substandard child day care centers could not be allowed to operate and these regulatory requirements for infant- toddler care should be designed to safeguard the health of this vulnerable population".

Customers (parents) depicted lack of information and knowledge that responsible government offices have on the childcare market as main impediments for lack of legislating minimum quality standards and the licensing of day care providers.

In addition to absence of regulation or guideline for day care centers, there is also no mechanism to follow up the proper functioning of these centers. This study has also pointed out that regulatory government offices do not have enough staffs to inspect the centers regularly; as a result of which they keep appalling centers opened. The absence of monitoring and follow up mechanism of the day care centers made impossible to take penalty against those day care centers that provide impaired service for the healthy development of the children. Hotz & Kilburn (1996) contended that providing child care is serious issue and that state agencies should be involved in enforcing regulations established to ensure basic safety, health, and general welfare for children. This is because various dimensions of children development and wellbeing have strong relationship with service delivery measures (Love et al., 1996).

License issuing offices at least need to consider whether child day care centers have fulfilled the basic requirements before issuing business-operating license. The responsible government body should also take care of day care centers, which have grave quality problems that could affect the healthy development of the children. Using research based components of quality and other countries best practices as a guide, the responsible government body can develop guidelines in Ethiopian context below which child day care centers providing child care service to infants and toddlers could not be allowed to operate. Research findings show that lower child-adult ratios, smaller group sizes, general education as well as specialized care giver training in early care and education for infant toddler care in centers lead to quality, so it is important to shape day care center licensing regulations in light of these findings.

This would also help to advance towards changing practices that promote better infant/toddler care giving at the child day care centers. On the other hand improving quality is a developmental process that centers must first address their own safety and survival needs by being

financially stable enough to keep their doors open and meet basic licensing and safety standards (Rohacek, P. 127). Moreover, although providing good quality infant toddler care is expensive and challenging many child care providers would be willing to add and improve services if they get technical assistance and support. Maintaining close communication among key stakeholders is therefore important.

CHAPTER SIX: CONCLUSION AND IMPLICATION TO SOCIAL WORK

Conclusion

Child day care services providing business is becoming very important to the current reality in which the number of working parents especially mothers are on the rise. The finding indicates that especially for people living in condominium houses child day care centers are becoming the preferred choice. Parents place their children in the nearby child daycare centers. The expansion of child day care centers at least among these groups of community is a very good start, which have to be encouraged and further strengthened. A substantial effort is needed to improve the quality of the service and adopt existing facilities to the parent's' needs.

The study found out that the services provided for children in these day care centers is solely or mainly custodial care. Most staffs have little or no training and the need for trained staff is not recognized. The higher ratios of children per caregiver affect individual attention to be given to the toddlers. Large group size, low wages and poor work environment affect caregivers' satisfaction, if not resulted in turnover. This in turn undermines the quality of the relationship between caregivers and children that are the heart and soul of early care. The daily program also makes little or no provision for planned activity, leaving the children to pass the day as best they can.

The physical setting lack adequate space and play equipment. In four of the child day care centers a very small room is used for children to stay all day long. In these day cares there is no separate room for dinning and sleeping. That same small space is used for multiple purposes. Moreover the toddlers are not offered outdoor play area or enough toys.

Other countries experiences suggests that child care is a very serious issue as good quality child care can influence positively the developmental outcomes and healthy development

of infants and toddlers and low quality child care can do the reverse. They also closely monitor child care service in day care centers. In addition, child care service in day care centers in other countries has captured the attention of the media, policy makers and the general public long ago and countries have regulatory and controlling mechanisms in their legislations.

However in the current context of Ethiopia specific regulatory requirement for child day care centers is not placed and there is no mechanism to follow up the proper functioning of these centers. In addition concerned responsible government offices show very little interest to improve the quality of the child day cares centers by taking the necessary measures. Moreover, the government has no systematic information available service providers and parents.

Though operating with a license is a good practice as it is a predicator of quality, the duty of the government body should not be limited to issuing license to whoever is applying to open a child day care, for it should not be seen merely from the business aspect. The life and the futures of the infants and toddlers who are using the day care service are in the hands of the service providers, the government and the parents and the whole society.

The challenge to plan and prepare for child healthy development is therefore a growing concern in Addis Ababa these days, and it is time for the government to take the required initiative and steps to come up with regulations, proper follow up of compliance and take appropriate measures against those who are found violating the regulations.

As beginners of this type of child care, it may be obvious to face challenges. To bring a marked improvement in the facilities available and the quality of service provision, it is clear that there is still much to be done. As child care has different dimensions, if we make sure that there is good quality of childcare it is not only protecting and safeguarding the health and safety of the child but also the healthy functioning of the family as well as the community.

Implication to Social Work

Practice - Social workers should provide social services to different types of care. Social workers should be critically concerned with child care issues and start to assess the role of social work in day care centers. Social workers should be actively engaged in child day care center services, as the profession is concerned about the mental and physical health of children.

Social workers should facilitate more day care centers to provide comprehensive child care services, to extend their services to infants as well and to work hours including night time and weekends, as to better accommodate the needs of larger portions of working parents. This will particularly enhance mother's employment and economic wellbeing as they will be able to work and sustain their family, relieved from their primary role of taking care of their children.

Social workers need to conduct Awareness raising activities on infant-toddler child day care service to the owners of child day care centers, the care givers, the responsible government officials and to parents or the community so as to enable them to have the necessary knowledge as to what should be done to improve the quality of child care service provision.

Lack of communication between child care service providers and parents is a barrier to improving the quality of service provision as the child day care providers do not get feed backs and comments on what the problem is and the solution as well. Social workers should intervene in facilitating for the Involvement of parents or co-operation with parents and child care staffs to enable them share knowledge between themselves about the child from home and day care perspectives.

Therefore, in helping to addressing the need to improve the quality of child care service provision which is essential to the health and wellbeing of infants and toddlers, the social work practice is indispensable and social workers should be actively engaged in child care services.

Policy - Social work is not a stranger to child care. In various countries social work professionals have been involved in day care at the direct service and policy making levels. Social workers should be involved at government levels for lobbying for child care issues.

The FDRE constitution in its Article 36 provides about safeguarding the rights of children. However specific regulations and guidelines concerning child day care center service provision management shall be enacted to protect those rights of children recognized in the constitution and aiming at ensuring the welling of infants and toddlers using the day care center services. Social workers should be critically concerned with child care issues, assess the role of social work in day care centers. They should involve in policy advocating so that the government body should come up with regulation and guideline, and provide guidance and support to child day care centers.

Research- As provision of center based child care to infants and toddlers is new to our way of life, there is little or no information available on the topic within the context of Ethiopia.

Hence, Systematic research on the infant and toddler care in child day care settings should be made to enhance our knowledge. Research is therefore very essential to resolve the existing problems.

Further research can target at exploring experiences of best practices to be shared for all with further exploration of challenges of social work with the aim of developing successful guidelines and frameworks so that the health and wellbeing of children using child day care services is ensured. Therefore, social workers with their skills of social work research should conduct various studies for the understanding of the issue and development of the services.

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Annex A: In-depth Interview Guide for Child Care Givers

Р	Α	RT	ľ

Name of Research Site				
Name of Child Day Care Center				
Date of Interview				
Name of child care giver	Sex	M□ F	□ Age _	
Educational Status (Qualification)	_			
Length of time of serving as a child care giver _			-	

PART II

- 1. What are the kinds of services provided in the child day care center?
- 2. What are your daily duties as a caregiver of infants and toddlers? Explain step by step what do you do throughout the day.
- 3. How many children do you take care in a day?
- 4. Do you as a care giver have education, qualification or training related to caring of infants and toddlers? Describe the type of education, qualification or training.
- 5. Do you believe that having a required education, qualification or training do have an impact on the quality child care service provision?
- 6. Do you feel that you have the capacity to provide child care?
- 7. How do you preserve the health, hygiene and sanitation in the child day care center?
- 8. How do you interact with the children as a child care giver?
- 9. Do you think your wage is good enough?
- 10. What problems and challenges related to quality you faced so far while performing your duty as a child care giver?

11. What do you suggest to improve the service provision to children in the Child day care centers?

Annex B: In-depth Interview Guide for Owner of the Child Day Care Center

	PART I
Name	of Research Site
Name	of Child Day Care Center
Date o	of Interview
Name_	Sex M F Age
Educa	tional Status
	PART II
1.	What is the organizational structure of the child day care center?
2.	Do you have documentation system in which you keep information of individual child
	profile and the child`s family background?
3.	What are the mission and vision of the child day care center in the service provision to
	the children?
4.	What are your working hours and days?
5.	What measures do you take as an owner/manager of the child day care center to hire a
	qualified child caregiver?
6.	What measures do you take to make sure that child care giver interaction is always
	positive?
7.	What measures are in place to keep the physical setting and the environment in which the
	children are kept to be safe and secure?
8.	Does the day care have license?

9. Is there child caregiver turnover in your day care center?

- 10. Who are most of your clients or the kinds of people who seek child day care services for their infants/toddlers?
- 11. do you have any kind of communication with the parents of children?
- 12. Do you believe the quality of child care service do have an impact on the child's healthy development?
- 13. What do you think is the challenge faced by child care centers in relation to provision of quality of service to the children?
- 14. What do you suggest to improve the quality of Child day care centers?

Annex C: In-depth Interview Guide for Parents

PART I			
Research Site			
Name of Child Day Care Center the parent e	enrolled h	nis/her child	
Date of Interview			
Name of the Parent	_ Sex	$M \square F \square$	Age
Educational Status	_		

PART II

- 1. How old is your child you enrolled in this Child day care center?
- 2. What are your reasons for preferring the child day care centers for your child? state things child day care centers provide that other child care options for example nanny, or family care do not.
- 3. Have you ever encountered problems in relation to the proper handling (care giving) of your child?
- 4. How do you regard the fee for the child day care center?
- 5. Do you believe the quality of child care service do have an impact on the child`s development?
- 6. What do you think is the challenge faced by child care centers in relation to quality of service provision to the children?
- 7. What part of the service need to be improved?
- 8. What do you suggest to improve the quality of service provision by the Child day care centers?

Annex D: Key Informant Interview Guide for Government Officials

Date of Interview	 		
Name	 Sex	М	F
Work Position			

PART II

PART I

- 1. What is the number of licensed Child day care centers in Nifas Silk Lafto Sub City?
- 2. Is there any regulation or guideline for licensing and regulation purposes for child day care centers providing service to infants/toddlers?
- 3. Is there any mechanism to monitor or follow up the proper functioning of Child day care centers?
- 4. Is there a mechanism to investigate impaired quality service provision by child care centers and imposing penalty?
- 5. What problems or challenges have you faced in relation to ensuring the proper quality of service provision by child day care centers in the selected sites?
- 6. What has been done so far to improve the quality of Child day care centers?
- 7. What do you suggest to improve the service provision of Child day care centers?

Annex E: Consent Form for Participants of the Study

Introduction

My name is Addis Seifu. I am from graduate school of social work at AAU. The purpose of the study is to assess quality Service Provision by Child Care Centers in Nifas Silk Lafto Sub City of Addis Ababa. As part of my assessment, I am interviewing the child day care service providers, users and concerned government officials. The study is conducted for the purpose of graduate study in Addis Ababa University School of Social Work.

Confidentiality and consent

Your answers are completely confidential and that every attempt will be made to keep your details confidential. Your participation is voluntary, you have the right to terminate the interview at any time and if anything is not clear you can ask questions at any time. If you have any question or concerns, you may contact me by the following telephone number 0911 65 24 63.

By signing below you have read and understand the above information, and would be interested in participating in the study.

Signature of the interviewee	Date
G:	D .
Signature of the interviewer	 Date
=	

Declaration

I the undersigned, affirm that this thesis is my original work and has not been presented for a degree in any other university and that all sources of information used for the thesis have been duly acknowledged.

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