

MIDLANDS STATE UNIVERSITY



*FACULTY OF EDUCATION DEPARTMENT OF EDUCATIONAL FOUNDATIONS
AND PRIMARY EDUCATION.*

A RESEARCH PROJECT ENTITLED:

**Strategies That Can Be Used To Ensure Good Practices In Health And Safety At Early
Childhood Education (Ece) Level In Warren Park / Mabelreign District Primary
Schools.**

BY

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R1814316H

A RESEARCH PROJECT SUBMITTED TO THE DEPARTMENT OF EDUCATIONAL
FOUNDATIONS AND PRIMARY EDUCATION IN PARTIAL FULFILLMENT OF THE
REQUIREMENTS OF BACHELOR OF EDUCATION IN EARLY CHILDHOOD
EDUCATION (BECE).

GWERU, ZIMBABWE

2021

APPROVAL FORM

The undersigned certify that they have read, and recommend to Midlands State University for acceptance a research project entitled strategies that can be used to ensure good practices in health and safety at Early Childhood Education (ECE) level in Warren Park / Mabelreign district primary schools.

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RELEASE FORM

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STRATEGIES THAT CAN BE USED TO ENSURE GOOD PRACTICES IN HEALTH AND SAFETY AT EARLY CHILDHOOD EDUCATION (ECE) LEVEL IN WARREN PARK / MABELREIGN DISTRICT PRIMARY SCHOOLS.

PROGRAMME:

BACHELOR OF EDUCATION IN EARLY CHILDHOOD EDUCATION

YEAR GRANTED:

2021

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DECLARATION

I, Shailet Chakanetsa, do hereby declare that this dissertation is the result of my own investigation and research, except to the extent indicated in the acknowledgements and references and by acknowledged sources in the body of the report, and that it has not been submitted in part or full for any other degree to any other University or College.

Student Signature:

Date:

DEDICATION

To my caring husband Josiah and my lovely children Tapiwa, Jonathan, Mary and Anesu,
without their encouragement this academic study might have been a flop.

ACKNOWLEDGMENT

I am grateful for the intellectual guidance from my supervisor Dr. E. Muguwe, she took the pain of guiding me at each step of the research process. Without her time and support this work would not have been completed.

I sincerely appreciate the M.S.U, faculty of education department of educational foundations and primary education for research introductory letter which I used to seek permission to carry out the study from the Ministry of Primary and Secondary Education.

My sincere gratitude goes to the participant of Kuwadzana 7, Kuwadzana 3, and Cold Comfort, the researcher is particularly grateful for the assistance and cooperation they rendered during this study. I would also like to acknowledge the steadfast support of caring and loving husband Madzivire Josiah who collectively stood by me offering moral and financial support.

Above all, I would like to extend my heart felt gratitude to the Almighty God for according me the much required energy life and courage to write this dissertation.

ABSTRACT

The focus of the study was to find out the strategies that can be used to ensure good practices in health and safety at Early Childhood Education (ECE) level. The study was a survey of Kuwadzana 3, Kuwadzana 7 and Cold Comfort primary schools in Warren Park /Mabelreign District. The study adopted a descriptive survey design and data generated was through interviews and questionnaires. Three (3) TICs and three (3) head teachers were purposively selected and thirty (30) ECE teachers were randomly selected for the study. The findings of the study showed that health and safety issues are not being observed fully in schools. Most schools fail to provide adequate safe water and proper sanitation, such as age appropriate toilets for learners. The study revealed that administrators should play a vital role in providing proper water and sanitation facilities for learners. The study also find out that, outbreak of diseases such as diarrhea are now common in learners. Lack of monitoring of learners as they visited toilets and hand washing is also a challenge in most schools. There is also no safety in learners as they engage in learning and play activities due to lack of monitoring by the teachers. Some teachers state the issue of high teacher-pupil ratio as the major challenge they face to properly ensure good health and safety practices at ECE level. The study recommends that education stakeholders may ensure provision of good health and safety practices in learners through following guidelines which are stipulated in Statutory Instruments (SI) which guide health and safety issues of learners. This can be effectively implemented through monitoring, supervising and evaluation by the responsible stakeholders. Support systems also need to play a pivotal role in supporting health and safety issues in schools.

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CHAPTER ONE

PROBLEM AND ITS CONTEXT

1.0 Introduction

This research intends to explore on the strategies that can be used to ensure good practices in health and safety at Early Childhood Education (ECE) level in Warren Park/Mabelreign District primary schools. Many children are failing to develop holistically due to poor safety and health practices. The researcher presented the background of the study, statement of the problem, main research question, sub research questions as well as the significance of the study. Assumptions, limitations and the delimitations of the study are outlined. Definitions of terms were highlighted as well.

1.1 Background of the study

Early Childhood Education (ECE) level plays an important role in the growth and development of children. There are various organisations, government policies worldwide that promote health and safety at ECE level. Organisations such as UNICEF and UNESCO encourage the provisions of sanitation facilities, good hygiene practices and safe water for drinking. These organisations further recommend monitoring, evaluation and reinforcement so that good practices on health and safety are in place. Midcentral Public Health Service (2014) in New Zealand highlights that, a Health Protection Officer (HPO) reviews relevant health and hygiene polices. It further states that, there must be documents with expected standards to be followed by HPO during inspection for example, examining of drinking water supply, cleaning schedules and food safety procedures. In order to establish good quality the European Pillar (2019) adopted a recommendation on high quality early childhood education and care system.

The report established an up to date analysis of the ECE systems in 38 countries in Europe so as to support policy development. The policy has educational, monitoring and evaluation guidelines. European Pillar (2019) postulates that, the results from the policy indicated that many European countries do not have essential policies to ensure quality health and safety and high quality services are still not in place. OECD (2017) states that Italy, Germany, France and Ireland inspect teacher pupil ratio, space specifications, health and safety standards to see if they comply with the guidelines. Germany ask parent's views on quality services rendered (OECD, 2017).

Child trends by Forry et al (2013) in United States of America (USA) indicated that, risks may be reduced if teachers and caregivers monitor children constantly thereby promoting their social, cognitive, emotional and physical health. In addition, it further encourage issuing of licenses, monitoring of programs and reviewing of the state regulations which showed that children were not being protected

City Council's Health and Safety for Schools (CCHS) (2017) in United Kingdom (UK), posits that, the authority should encourage all schools to implement the stipulated regulations on health and safety as well as being very sensitive. The document has minimum standards that allows everyone at school to be aware of his or her duties and responsibilities in order minimize injuries or ill health at work. It also pointed out that, top officials and teachers should ensure that these standards are in place. CCHS (2017) further states that, the school employer must ensure that staff and pupils are free from dangers that hinders their health and safety.

Child Australia (2012) states that, to ensure health and safe working environment there is need to identify health hazards and possible safety precautions to manage them. In addition Child Australia (2012) highlights that, this may help to create a safe working environment and reduce accidents and illness hence, the employer must do monitoring.

In order to promote the health and safety of ECE learners the Kenyan government developed a School Standard Manual (2008) whereby the ministry will carry out monitoring and evaluation on the implementation of the manual in order to ensure that progress is made towards the recognition of the goal for which it is developed. In Southern Africa the health of children may be hindered by the behaviour and personal hygiene of caregivers, parents and teachers as well as lack of basic hygienic services. The government of Zimbabwe puts up policies so that health and safety practices are in place for ECE. For example, the Zimbabwe Statutory Instrument (SI)106 of 2005 addresses the issue of health and safety, whereby the school should have age appropriate toilets with a ratio of one squat hole as to twelve children (1:12) at a ECE center and separate toilets facilities between staff and children. Use of running water by ECE learners was also recommended by the statutory. The SI 106 of 2005 further states that, centres which do not meet the recommended standards may not be allowed to operate, hence supervision and monitoring is recommended. The Ministry of Primary and Secondary Education (MoPSE) appoints health and safety personals at provincial, district, cluster and at school level for supervision and recommendations. Despite these responsibilities, the health and safety of learners at ECE level seem to be deteriorating. Learners suffer from diarrhea, communicable diseases and many cases of injuries while at school are at climax.

School Development Committee (SDC)'s main concern is for school environment to be conducive for teaching and learning which include safety and health issues. According to Education SDC Non-Governmental Schools Regulation(1992) the SDC has the role to apply its funds towards the promotion of its objects, thus managing funds towards building proper infrastructure, maintenance of school grounds, as well as provisions of first aid kits to mention a few for the wellbeing of learners. Speeuwenberg (2019) argued that, health and safety of children is the top priority that parents consider when searching for the right center or day care operator, such as cleanliness as this may prevent spread of diseases. To add on, parents in

Warren/ Park Mabelreign district are mainly concerned with the health and safety of their children because they usually complain about dirty toilets, failure of teachers to accompany the learners to the toilets and mixing of toilets with juniors as well as injuries that happens while children are at the school.

Donors such as UNICEF are much concerned on health and safety of ECE learners in Warren /Park Mabelreign. For example, they provided water tanks for learners which have running water for hand washing but the schools are failing to maintain them in good working order. Teachers also indicated high teacher-pupil ratio as a limitation to good health and safety practices. Spreeuwenberg (2019) asserts that, low teacher-pupil ratio ensures a basic level of child safety and set a stage for high quality caregiving. In addition, Spreeuwenberg (2019) highlighted that, small group sizes and low teacher-pupil ratio are associated with fewer situations that threaten child safety. In light of this background, the study therefore seeks to carry out a survey on the strategies that can be used to ensure good health and safety practices in Warren Park/Mabelreign District in Harare Metropolitan Province.

1.2 Statement of the problem

Ministry of Primary and Secondary Education (MoPSE) of Zimbabwe has some policies and Statutory Instruments (SI) which recommends health and safety issues at ECE level. MoPSE has some personals who supervise safety and health in schools at provincial, district, and cluster as well as at school level. School heads and teachers have the duty for monitoring health and safety issues for ECE learners. With all these in place, the health and safety of ECE learners seem not to be viewed seriously. Learners suffer from diseases such as diarrhea, communicable

diseases and many cases of injuries are reported while at school. Considering the vitality of this statement of the problem, this researcher seeks to carry out a survey on the strategies that can be used to ensure good practices in health and safety at ECE level in Warren Park/ Mabelreign district primary schools.

1.3 Research questions

1.3.1 Main Research question

How can good practices in health and safety be ensured at Early Childhood Education level in primary schools?

1.3.2 Research questions

- i. What are the strategies that can be used to ensure good practices in health and safety at ECE level in primary schools?
- ii. What support systems should be put in place to ensure that good practices in health and safety are implemented at ECE level in primary schools?

1.4 Significance of the study

The findings of the research have practical and theoretical implications to various users as follows:

1.4.1 Practical implications

1.4.1.1 The government

This research may allow the government of Zimbabwe to enforce strategies that can be used to ensure good practices in health and safety at ECE level. It also enables the government to formulate flexible policies through MoPSE so as to put in place policies that promote health and safety issues.

1.4.1.2 Education sponsors

This research enlightens educational sponsors to increase physical infrastructure in order to promote good practices in health and safety at ECE settings. It may also inform the education sponsors on the need of sourcing resources in order to maintain good health and safety practices at ECE level.

1.4.2 Theoretical implications

The research seeks to provide an understanding on the strategies that can be employed to ensure good practices in health and safety at ECE level. The research may also give a clear understanding of the impact of good health and safety practices on learners' holistic development. Through the in depth questionnaires the study may uncover the challenges faced by ECE teachers especially on matters relating to health and safety practices. The study may help other researchers to carry out further studies if it is approved.

1.5 Assumptions of the study

- Schools are failing to implement health and safety strategies due to high teacher-pupil ratio.
- Economic hardships being faced by our country led to inadequate resources needed to enhance maximum safety and health practices in schools.

1.6 Limitations of the study

The study has the following limitations:

i. **Time**

Collection of quality findings demands adequate time for which the researcher was limited due to work and study commitments.

ii. **Financial**

The researcher encountered challenges on financial support since the research requires finances for travelling, internet facilities and printing of the questionnaires.

1.7 Delimitations of the study

The study was restricted to Warren Park/ Mabelreign District in Harare Metropolitan Province. The researcher relied on data which was collected from three schools randomly selected within the district.

1.8 Definition of terms

Health

It is a general condition of one's body. World Health Organisation (2012) define health as a state of complete physical, social, mental and the absent of diseases.

Safety

Meggit and Granier (2012) define safety as behaviors and practices that prevent people from dangers or risks. Safety according to this study can refer to situations whereby one is free from harm, danger or a risk that affect the wellness of learners.

Early Childhood Education (ECE).

Santrock (2010) defines Early Childhood Education level as developmental period that extends from the end of infants 5 to 6 years of age and it is sometimes called pre-school years. Therefore ECE are educational programmes for pre-schools which include all educational experiences for children from birth to 8 years of age developing them holistically.

1.9 Summary

The chapter has unfolded the concept of the research which focused on the strategies that can be used to ensure good practices in health and safety at ECE level in primary schools. The chapter looked at background of the study. The researcher also highlighted limitations and delimitations of the study. Key terms of the study were also defined. The next chapter is meant to focus on review of related literature to the study.

CHAPTER TWO

REVIEW OF THE RELATED LITERATURE

2.0 Introduction

This chapter examines the literature surrounding the issue of strategies that can be used to ensure good practices in health and safety at ECE level. According to Okoli (2010) a literature review provides an understanding of what existing research has to say on matter. Meda (2013) claims that among other reasons a literature review is done to delimit the problem and have a deep understanding of the known and unknown around specific study area. The researcher discusses strategies that can be used to ensure good practices in health and safety and support systems that should be put in place to ensure good health and safety practices are implemented at ECE level in primary schools.

2.1 Theoretical framework

The research is grounded on human motivation theory of the American psychologist Abraham Maslow (1943) as a working theoretical framework. He states that human beings have a number of needs and these needs are arranged in a hierarchy, which he named hierarchy of needs. It is presented in a form of pyramid. It starts from bottom going upwards starting with physiological safety or security, social, self-esteem and self-actualization needs. The research is based on the two levels which are physiological needs (water, food and health) and security needs (safety and shelter). Many children at an early stage need these physiological needs in order for them to grow holistically. As humanist Maslow believed that, for children to develop fully, a number

of more basic needs must be met for example, the need for food and safety. As children learn through play, they need their health and safety needs to be met, thus, the learning environment must be safe from harm to ensure safety. Once the lower level needs have been met, children can move on to the next level of needs. However, children who lack the physiological and security needs cannot fully move to the next level of development. The researcher intent to carry out a survey on strategies that can be used to meet the health and safety needs of learners.

2.2 Strategies that can be used to ensure good practices in health and safety at ECE level in primary schools?

Grantham-McGregor (2007) states that, about 200 million children globally fail to reach their potential in cognitive development because of inter-related factors of poverty, inadequate care and poor health. It is important for the government to make sure regulations on health and safety are being monitored for the sake of staff and learners not just to develop them(UNESCO,2007). OCEC (2017) report states that the top-levels authorities evaluate individual setting in order to improve quality at ECE level. In a study carried out by OCED (2017) indicated that, state authority monitors and produce quality audits of the school in Swedish, including ECE. Early Childhood Education and Care Policy (2015) pointed out that, there is poor monitoring, evaluation and accountability at the Kindergarten stage, hence for this reason, the quality assurance for system for Kindergarten needs to be reviewed, evaluated and strengthened in Norway. OECD (2015) further states that, Italy monitors and evaluate ECE services so as to improve quality. Cubey and Dalli (1996) state that, lack of monitoring result in one failing to confirm whether services are reaching its aims and goals.

France and Ireland monitor the quality of the services so as to update the policy makers (Major and Jeffery). Major and Jeffery (2012) also propounds that, Australia make use of consultations in order to enforce good practices on health and safety and these consultations

became useful if the issues that hinder safety, health and welfare is deliberated with the workforces. Major and Jeffrey (2012) further asserts that good practices such as conducting safety inspection on daily basis on the equipment, building and packing of play material not in use is vital for safety and health precautions. To add on, Major and Jeffrey (2012) postulate that to minimize the spread of infections staff should be trained on how to control infections, hygienic practices such as hand washing and to have occupational immunization programmes. Spreeuwenberg (2019) states that clean environment help to prevent the spread of illness. Spreeuwenberg (2019) also highlighted that children usually get injured in classrooms hence it's a requirement of all ECE practitioners to have up to date first aid training and the first aid kit should be accessible at all times in case of emergence. In addition Spreeuwenberg (2019) states that at Early Childhood years, it is important that the little ones get the right balance of nutrients for their growth and development. Furthermore, Spreeuwenberg (2019) propounds that the employer should give employees necessary information, instruction, training or supervision to enable them to work in a way that is safe and without risks to health. Spreeuwenberg (2019) also stipulates that, caregivers of young children should be trained on daily cleaning, sanitizing, preparing clean environment, and health checks.

According to the United States Consumer Product Safety Commission (2015), 31000 children of the age 4 and below were treated in US hospital emergency room for injuries at child care setting. The research carried by UNICEF (2017) posits that Italy, French, Germany and Irish's good health and safety practices was exercised through inspection of space, staff child ratio, health, hygiene and safety standards to check compliance with the stipulated regulations.

The Convention on the Rights of Children (CRC) (1989) spells out the obligations of governments to facilitate children's rights to learn in safe and secure environments. UNICEF (2009) stipulates that, learning environment should not be exposed to dangerous substances

like asbestos, lead and air pollution and the classrooms require regular cleaning. Additionally, UNICEF (2006) advocates for age appropriate facilities such as separate toilets for boys and girls with adequate water for washing hands as well as constant supervision of the school yard is necessary. Spreeuwenberg (2019) states that at Early Childhood years, it is important that the little ones get the right balance of nutrients for their growth and development.

ECD handbook (2010) propounds that, caregivers and ECE practitioners should continuously check the environment for small objects and poisonous substances that could be harmful to ECE learners. Unsafe environment may cause injuries to the learners. Ackerman and Barnett (2009) posit that, poor standards of health are major obstacles that hinders the children's development and learning at ECE. UNICEF (2000) posits that poor sanitation causes some diseases thereby resulting in decrease of performance by children. Health and Safety standards (2017) of UK states that the school staff inspect the school environment daily in order to ensure that everyone who uses the place is safe. It further highlighted that an inspection is a means of finding out and assess on any safety and health dangers at school that may harm children. In addition, the Health and Safety Standards (2017) posits that when carrying out the inspection they should concentrate on physical and environmental hazards for example on unsafe equipment, uneven floors, trailing cables and poorly stored substances. Health and Safety Standards (2017) encourages the inspection process to focus mainly on ways to eliminate every hazard and to keep the records of the inspections. World Health Organisation (2018) propounds that learning difficulties experienced by children is as a result of lack of nurturing care at their early years. WHO (2018) also states that, conducive environment with programmes, policies and services that provide the caregivers, parents and families with knowledge and resources is required so as to offer nurturing care to young children. Children's health can be promoted by caregivers who monitors their emotional and physical state as well as protecting them from environmental dangers and good practices on hygiene so as to reduce infections (WHO, 2018).

Kenya's School Safety Standard Manual of 2008 serves as a blue print for enhancing the safety in their schools. The safety standard manual incorporates, safety on school grounds, physical structure, health and hygiene and disaster risk management. In the same vein, Kenya Safety Standard Manual for Schools of 2008 states that, facilities which include playground, equipment, toilets, classrooms should be age appropriate and enough to avoid dangers to the users. It further stipulated that the school should ensure classrooms, physical structures and toilets are kept clean and in a good state. A study by Armstrong (2009) argues that health and safety training should take place periodically in schools.

A study by Mwomwa et al (2018) in Kenya focused on the safety and security of the young children in pre-schools in informal resettlements showed that the government has come up with recommendations and minimum standards through its various policies but the preschools in resettlements experienced challenges that affected children's learning. These are inadequate space, play materials, poor infrastructure and small classrooms. In order to rectify the problems the government and stakeholders were encouraged to have a modal preschool informal resettlements so as to create an enabling environment. Mwomwa et al (2018) also asserts on the need for frequent inspection of preschools to ensure that safety and security standards are observed and implemented.

Additionally, Fresh (2013) states school health clubs should be formed as a way of lessening health and safety related problems which may disturb children's learning. This means that health and nutrition services should be introduced in school in order to improve children's health and nutrition status. Fresh (2013) urges that, schools should have adequate water and age appropriate sanitary facilities so as to minimize dangers that may affect children's development and health. According to Fresh (2013) unsafe water and lack of hand washing facilities causes infectious diseases.

Study Mbarath et al (2016) in South Africa posits that for ECD centers to operate they have to meet the standards presented by Department of Social Development (DSD) which include quality infra-structure that provide children with safe and health learning environment. These include proper sanitation, adequate safe water and conducive environment free from hazards. Moreover, Mbarath et al (2016) states that (DSD) do follow ups on the registered ECD centers to check whether the facilities are maintained.

A study by Chikutuma (2016) sought to investigate on implementation of Water, Sanitation and Hygiene (WASH) deliveries in by rural primary schools in Bikita found out that, WASH resources and related recommendations of SI of 106 of 2005 were too elicited and irrelevant. The schools did not have age appropriate toilets to mention a few. The study concluded that, some careful assessment are critical for the production of a research based WASH in school policy that is not only desirable but also feasible in terms of its capacity to address the educational and development needs of ECD children.

Research by Chimwamurombe (2018) which sought to find out the effects of nutrition, health and safety in the development of children at ECE level, indicated that there was lack of balanced diet which resulted in malnutrition in children and affect their normal development and lack of provisions of some hygienic toilet facilities standardized for young children. The researcher further indicated that, taps with continued running water and working toilets system should be well maintained .In addition the researcher encouraged school authorities to supply balanced diet meals in supplementary feeding programme in early childhood.

In another study, Chikutuma (2015) investigated the nutrition, health and safety status at ECD programmes and its impact on the quality of care and education. The study revealed that, some schools fail to maintain their sanitary facilities while others maintain them. The study further states that, ECD teachers did not have first aid skills. Moreover, Chikutuma (2015) asserts that,

recommended compulsory acquisition of accreditation certificates of operation as per SI 105 of 2005 and establishment of feeding programmes at ECD level which are nutritious to develop the whole child. The Zimbabwe School Health policy (2018) suggests that school health services must be available at all school settings. Therefore, this research seeks to explore strategies that can be used to ensure good practices in health and safety on ECE programmes in Zimbabwe.

2.3 Support systems should be put in place to ensure that good practices in health and safety are implemented at ECE level in primary schools?

UNICEF (2009) argues that the Convention on Children's Rights states that the government should ensure that children learn in a safe and protected environment. It further states that all staff members are responsible for implementing the policies as appropriate to their roles. World Bank (2006) developed an analytical framework for assessing the extent to which particular ECE policies achieve the extended development outcomes in Turkey so as to strengthen health and safety policies. City Councils Health and Safety Standards in schools document of United Kingdom (2017) outlines the minimum standards on roles and responsibilities to be followed by everyone who include the leaders, services users, partners, and all other stakeholders so as to avoid injuries and diseases. The document further highlighted that, the teachers and governing bodies should ensure the stipulated standards are being implemented.

In line with the foregoing view point, OECD (2015) states that, in Norway stakeholders such as parent representatives, local authorities and trades unions are consulted at an early stage in the decision making process. Moreover, it urges that stake holders play an important role in advising ECEC safety and health policy decision and implementation makers. World Bank (2013) suggests the involvement of private and nonprofit actors in the ECE system in Turkey to provide resources. World Bank (2013) further stipulated that, NGOs and private partnership

can support and complement the government of Turkey's effort to provide ECE safety and health services.

Forry et al (2013) states quality care and education can be attained by caregivers, teachers and administrators who work with children daily. Improvements start with leaders who involve themselves as well as their colleagues to find strength and growth areas through self-assessment and feedback from the parents and colleagues (Forry et al, 2013). In addition, Forry et al (2013) also highlighted that technical assistance and professional development facilitate growth in all areas. Forry et al (2013) further states that an effective ECE depend on strong collaboration among owners of early childhood centers with those who provide service, availabilities of resource and the provision of standards which promote quality care and education programmes with children and family needs. More so, Forry et al (2013) view that quality education and care depends on early childhood services systems that include social emotional development, access to health care, mental health services and medical homes for young children that deals with prevention and involvement of parents.

In the same vein, Major and Jeffery (2012) indicate that, it is the responsibility of employers and employees to ensure good practices on health and safety at work place in Australia. Kenya manual of (2008) views that, the school health committee which includes, the head and teachers should monitor safety and health at school level. Spreeuwenberg (2019) also argues that involving employees in health and safety issues can result in a safer workplace.

World Health Organisation (2018) developed the new Nurturing Care Framework which states that lack of nurturing care at early years may result in children having difficulties in learning. According to World Health Organisation (2018) Nurturing Care Framework was formulated as a guideline to help parents, national government, caregivers, private sectors, education and service providers so that all children acquire the best skills at early year. It articulates on vital

roles to be played by all sectors so that children develop fully from preschool. WHO (2018) stipulated that, children requires nurturing care which promote safety, security, health, nutrition and responsive care giving. It further states that, community is very important in the education and development of young children hence it has to participate fully. The framework addresses many stakeholders who include the education, social protection, policy makers, health, child protection and other sectors at local and national level. It addresses all government levels and sectors for example the health sector to collaborate with child protection and social protection so as to ensure that young children are protected from neglect, violence and abuse.

International Labour Organisation (ILO) (2012), indicated that, in Europe, Latin America, North America, the religious groups offer ECE. It further stipulated that, the religious, non-profit organisations help the government to improve, coordinate and expand ECE provisions.

Mwomwa (2018) states that, safety is crucial in enhancing children's learning and its measure to be observed by parents, staff and other stakeholders. Mwomwa (2018) further propounds that the measure are mend to minimize risks that may cause accidents, injuries emotional and psychological distress. In supporting the forgoing view point Mwomwa (2018) posits that, if accidents are not prevented they may result in death or disability, and may result in emotional, psychological trauma which reduces self-esteem that lead to poor performance in school.

UNESCO (2015) argues that, previous studies have shown that children nurtured within appropriate environment with adequate resources such as of health perform better than those who do not. In the same vein UNICEF (2015) suggest that, parental, community support, health and proper nutrition are vital components that facilitate the development of emotional, physical and sensory skills in children from birth. National Health and Safety Performance Standards (NHSPS) (2011) of United States of America recommends its standards to be used by caregivers or teachers to develop use of effective practices, policies and training of staff in

order to ensure health program and safety for every child in their care. NHSPS (2011) urged parents should work with teachers so as to promote health and safe behaviors. Health professionals were also insisted to help families and consult teachers on the use of standard guidelines on health and safety as well as age appropriate environment that facilitate children's developments. NHSPS (2011) also equip policy makers with effective services to help on developing challenges affecting children's developments.

(US) developed a policy statement on the health of young children which highlighted that its purpose was to help the community and support states to align, coordinate in order to enhance health development, wellbeing and early learning of children from birth to Kindergarten. The statement was mend for state, administrators, policy makers, programmes for children's health, agencies, and social emotional developments to understand their roles and make effort to improve integration of services of the young children (US Policy Statement). The US policy states child's health may affect his or her performance and growth hence they need access to quality health care, nutritional food, safe environment and stimulating relationships with caregivers and parents who provide strong foundation. The US Policy further pointed out that working together of health organizations and early learning help to identify children's needs and referring them to the required services and be completed so that services may not be repeated. In the same vein, Urban et al (2012) states that the quality of ECEC depends on the competence of people working with children, families and community. Urban et al (2012) also asserts that a competent system includes collaboration between individual teams, institution, pre-schools, schools, families and competent government policy level. Urban et al (2012) postulates that, children grow and develop in a family thereby making parents the most essential partners and their involvement is worth hence parents are responsible for children's wellbeing, health and development. ECE services should be developed involving parents at national, regional and local. (Urban et al, 2012).

European Commission (EC) (2014) also pin point that, high quality ECE is based on collaborative approach which encompasses community groups which value respect, beliefs, needs and culture of parents as well as of local organisations. In addition, EC (2014) argues that, working hand in hand of ECE staff, social services, health, school sector and local authority promote high quality such as health and safety.

UNICEF (2017) indicates that, stakeholder's participation is very critical when evaluating the Early Childhood Education and Development in the republic of Kazakhstan in Asia. The evaluation was conducted in participation way involving policy makers, service providers and partners, staff, beneficiaries and their partners and other people directly or indirectly involved in the ECE programs at all phases of the evaluation(UNICEF,2017).

A study by Kyei et al (2018) in Ghana which seeks to assess the early grades classroom environment and its influence on the teaching and learning recommends ECD training either pre-service or in-service should be a requirement for teachers in early grades to equip them with requisite skills to teach at that level. In addition Kyei et al recommends ECD training to be extended to the school heads, circuit supervisors and parents as well.

A study by Mbarath et al (2016) in South Africa indicated that the local government's Environmental Health Office ensures ECD centers meet the recommended standards so that children are not exposed to hazardous conditions. Mbarath et al (2016) asserts that, the government departments such as the social development, education sector, health and other stakeholders work together so as to ensure efficiency in ECE centers. Mbarath et al (2016) further asserts that, the health department inspect facilities for compliance and the social development focuses on registration and monitoring of ECD centres, provide funds, develop policies and the standards that regulate registration of ECD.

A study by Mutazu (2018) in Zimbabwe indicated that, NGOs such as UNICEF, government and SDC supported schools by giving them resources to construct boreholes and building of toilets in order to promote good health and safety practices. Therefore the thrust of this study is to cover the gap in literature on support systems that can be put in place to ensure implementation of good practices in health and safety at ECE level in primary schools.

2.4 Summary

In this chapter, strategies to ensure good practices and various literatures on support systems that should be put in place to ensure good practices in health and safety are implemented at ECE were reviewed. This discussion by various authors demonstrated that health and safety issues in primary schools are not up to expected standards. As a result of this gap the researcher aim to critically explore strategies that can be used to ensure good practices in health and safety at ECE level, so as to close the gap. The next chapter provides the research methods that were used.

CHAPTER THREE

RESEARCH METHODOLOGY

3.0 Introduction

The chapter presents the methods used to gather information by the researcher on the research problem. These include research design, population, sample instrumentation, data collection procedures and data analysis plan.

3.1 Research Design.

Descriptive survey was opted for by the researcher mainly because it allowed the detailed gathering of information in response to the focus of the study. Pilit and Beck (2004) propound that a descriptive survey is used to designate any research activity in which the researcher gather data from a portion of a population for the purpose of examining the opinions, characteristics or intentions of that population. In this study, the researcher described the views of school administrators and teachers towards health and safety in their schools. Mouton (1996) states that, the purpose of the research design is to plan, structure and execute the study in order to maximise the validity of the findings. The research design is directly related to the questions which guide the study. The research design is the method of research which help the researcher to answer research questions of the study. In this case, the study intends to find out the strategies that can be used to ensure good practices in health and safety at ECE level in `primary schools in Warren Park/ Mabelreign district in Harare Metropolitan province.

3.3 Population

According to Cohen (2000) population is a group of people which the researcher expects to get valuable information and come up with the conclusions. Creswell and Miller (2013) also define

population as all elements involved in the study from which a sample is drawn. This refers to all target group which generalisation of the results of the study was selected. Therefore, from the above mentioned definitions population is a group of people who are of interest to the researchers. The study population comprised of three (3) primary school head teachers, three (3) Teachers in Charge (TICs) and fifty four (54) ECE teachers in the three schools which were selected by the researcher in Warren park/Mabelreign district.

3.4 Sample size and sampling technique

3.4.1 Sample size

Creswell (2014) states that, a sample is a small part drawn from the population but representing the qualities of the whole group. On the other hand, Jones and Owen (2012) define sample as selected individuals from the targeted population for examinations. In this study, the total sample comprise of 3 school heads, 3 TIC and 30 ECE teachers selected in Warren Park/Mabelreign district. The sample of this research study was considered to be sufficient to answer the research questions of the study.

3.4.2 Sampling Technique

Punch (2009) defines sampling as a process of coming up with individuals from the population for the research study. To come up with correct conclusions the researcher should determine sample size. Sampling technique is used since it gives the researcher a privilege to select samples from intended population to answer research questions of the study. Sampling technique also ensures proper representation of the universe and prevents unnecessary and irrelevant items. It gives better results if the investigator has the capacity of keen observation and sound judgment.

3.4.2.1 Simple random sampling

Simple random sampling was used to select schools to be used in the study. The researcher intended to limit the number of schools to engage in the study since she did not have enough time to interview all the participants within the time frame of the study. Polit (2013) expressed that, simple random sampling entails the process by which participants of a study are recruited randomly and having equal chances of being recruited. Names of the schools in Warren Park/Mabelreign district were written on pieces of paper and were put in a bowl. The names were randomly picked using the fish bowl draw and this gave each of the participants a chance to be selected. This resulted in the selection of three (3) schools. ECE teachers who become the basis of enquiry were also selected using the simple random sampling on selected schools. Paula (2003) supports that, this method is feasible if the population is very small. This sampling procedure was used because it was simple to administer and it took less time to complete as compared to other techniques.

3.4.2.2 Purposive sampling

Three head teachers and three TICs from the selected schools, were purposively selected to be the informants of the study due to the position they held at the school. Punch (2009) defines purposive sampling as selection done deliberately with a purpose in mind. The main purpose of purposive sampling is to reach the right sample that can adequately answer research objectives. Cohen (1994) states that, purposive sampling can be applied to a limited number of people who hold expertise in the area being researched.

3.5 Data Collection Instruments

3.5.1 Questionnaire

Questionnaires were used in this research. According to Best and Kahn (2006) a questionnaire may be used when factual information is needed or views rather than fact are desired like in this research. Punch (2009) posits that, a questionnaire is composed of open and closed questions. In addition Punch (2009) argues that, open-ended questions do not provide pre-determined answers which allow the respondents to answer the questions using their own words, whereas closed questions provide room for different answers which the respondents may select the correct answer by putting a tick. A questionnaire can therefore be described as a document with either open-ended, closed or both questions for research purpose. The questionnaire method assured privacy usually preferred by respondents. The questionnaires were distributed by the researcher to the ECE teachers from the (3) schools selected.

3.5.2 Interviews

The researcher carried out face to face verbal interviews. A face to face interview is a dialogue between the interviewer and the interviewee while the interviewer value and respect the interviewee. The researcher interviewed school administrators of the three (3) selected schools in Warren Park/Mabelreign district in Harare Metropolitan province. Interviews are recommended due to their high response rate and they also allow the researcher to draw some conclusions from non-verbal expressions. However interviews may be bias on both sides, that of the researcher or of the participant. Manser (1985) explains an interview as a meeting with someone to discuss something for meaning. In this study, the researcher and the participants created conversation related to the strategies that may be used to ensure good practices in health and safety at ECE level in primary schools. The interview questions were guided by the research questions. For descriptive qualitative studies like this, the interviews were the most prominent data generation tool that allows participants to describe the phenomenon under study (Punch, 2009).

Similar to the studies by Marshall and Rossman (2006) and Punch (2009), in this study the researcher regarded interviews as a reliable approach for accessing participants' perceptions, meanings, and definitions of situations and their constructions of reality in relation to strategies that can be used to ensure proper health and safety practices at ECE level in primary schools. The researcher also had the option to record non-verbal communication language, such as facial expressions or gestures. Chikoko and Mhloyi (1995) define interviewing as gaining access to what is inside a person's head, therefore, the purpose of interviewing did not to put information in someone's mind but generate the perspective of the person being interviewed.

3.6 Data collection procedures

A letter from the university was provided to seek permission to carry out a research. A letter which explains the purpose of the research was submitted to the MoPSE head office to seek authorization to carry out a research. The researcher used the letter to ask permission from the school heads of the selected schools to carry out the research at their respective schools. The researcher issued the questionnaires to the respective respondents for filling. Interviews were also done having the researcher had informed the respondents.

3.7 Data analysis plan

Data analysis plan is a document that pronouns the means by which the data is kept during and after completing the research project. Joppe (2010) indicated that use of technology made the storage, retrieval and analysis of information much easier and accessible. In this research, data is generated and kept in a flash disk, laptop, and served in an email for permanent storage. That guarantee safety for the data. The data may also be stored in hard copies so that it can be used in future. Data gathered during the research was held privately and was used for its intended purpose.

3.8 Data analysis and presentation

Rubin and Rubin (2005), state that data analysis is the process of interpreting information given and presenting it. Punch (2002) also describes data analysis as a process of resolving data into its constitutional components to reveal its characteristics. The researcher used thematic approach in classifying research data. In this study, the data was organised, themes generated, data coded, interpretation offered through analytic memos and a report was written. Rubin (2015), views thematic approach analysis as a way that is commonly used in qualitative data where coded data is counted and weighted and this helped the researcher in viewing the strategies that can be used to ensure good practices in health and safety at ECE level.

3.9 Summary

Main aspects of the research methodology were outlined. The researcher used qualitative method to carry out the survey. The population size and sampling procedures were explored such that the researcher acquire sample size. School heads and TICs were purposively selected due to their expertise and simple random sampling was used to select schools and ECE teachers to be used in the study. The researcher chose interviews and questionnaires as correct research instruments to collect data for the research. Data collection, presentation and analyses procedure to determine validity and reliability of the study results were also explored

CHAPTER FOUR

DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.0 Introduction

The purpose of this study was to investigate on the strategies that can be used to ensure good practices in health and safety at ECD level in primary schools in Warren Park / Mabelreign district in Harare. The chapter presented data presentation, analysis, discussion and the interpretation which was guided by the research questions. The researcher used the interview guide to process data from the school heads and the TICs. Their responses were paraphrased and quoted. Questionnaires were also used to collect data from the ECD teachers and was processed through coding. The researcher used tables and graphs to present the findings and the data was also analysed, interpreted and discussed. A summary was also presented to conclude the chapter.

4.1 Data Presentation, Analysis and Discussion

4.1.1 Response rate

Table 4.1: Response rate

	Teachers	Heads	T.I.C	Total	%Response rate
Interviews		3	3	6	100
Questionnaires	27			30	90

Table 4.1 outlines the number of participants of the study and the number of the interviews and questionnaire's which were used by the researcher. The table show that there was 100%

response rate from the participants who were interviewed and 90% respond rate from the questionnaires. This indicates that almost everyone randomly or purposively selected for the study participated in the study except very few. According to Nulty (2008) the response which is above 70% is accepted. Basing on this assertion the results of this study are valid.

4.1.2 Respondents demographic data

Table 4.2: Age and gender of participants

Age and gender	ECD teachers		Administrators		Total
	Female	Male	Female	Male	
0-25years	0	0	0	0	0
26-35years	8	1	0	0	9
36-45years	8	2	0	0	10
46-55years	8	1	2	1	12
Over 55years	2	0	3	0	5
Total	26	4	5	1	36

Table 4.2 shows data of participants of this study by gender and age. The study had eight (8) females and one (1) male ECE teachers who were between 25- 36 which made up 25%. There were six (6) females and two (2) ECE teachers who were between 36- 45 years which is 28%. Five (5) female ECE teachers, two (2) female administrators, one (1) male ECE teacher and one (1) male administrator were in the range of 46- 55years which made up 33,3%. Two (2) other female ECE teachers and three (3) administrators were over 55 years, which is 14%.

From the 36 participants only five (5) were males and 31 were females. Female percentage amounted to 86, 1% and male percentage is 13, 8%.

More females participated in this study than males because in the selected schools there were more female ECD teachers. The study was in line with the findings of the Nziramasanga Commission of Inquiry into Education which found out that the School Development Committee(SDC) were not supporting the employment of ECD males at ECD centres, when they were interviewed. In supporting the fore going findings Morrison (2007) also states that parents consider gender when choosing schools for their ECD learners, thus they prefer females than males. However, Morrison (2011) also discovered that children may lack staff from male models. This means there should be gender balance at ECE level. In Zimbabwe the rearing of young children is mostly done by females and this may contribute to the belief of most Zimbabwean people that young children should be nurtured by females.

Data presented on the age of the participants showed that the eldest ECD teacher was over 55 years while the youngest was between 26-35 years. This revealed that the Ministry of Education consider the age of teachers when recruiting them since the young ones still requires motherly care which can be effectively done by mothers basing on the experience they gained from their families. This means that maturity is a requirement when recruiting ECD teachers. The findings revealed that the administrators were mature people who may consider the interest of the young children. Click (2000) pointed out that mature ECD female teachers work very well with young children than the mature male teacher who are not used to look after the young children at their homes.

4.1.3 Distribution of the participants by professional qualification

Table 4.3: Professional qualifications of the participants

Professional qualifications	Frequency	Percentage %
Certificate in Education	4	11.1
Diploma in Education	9	25
Diploma in ECD	10	27.7
Bachelor of Education Degree in ECD	7	19.4
Bachelor of Education Degree in Primary	6	16.6
Other qualifications	0	0
Total	36	100

Table 4.3 show professional qualifications of the participants. The study revealed that four (4) participants are holders of certificate in Education which is 11.1 %.Nine (9) teachers have diploma in Education which yielded 25 %.Ten (10) participants are holders of the diploma in ECD and this amounts to 27%.Seven (7) participants has a Bachelor of Education Degree (BED) in ECD which yielded 19.4% and six (6) participants have a Bachelor of Education (BED) in primary which yielded 16.6%.

The professional status of the participants revealed by the study reflected that the majority of the teachers and administrators are holders of relevant educational qualifications. This implies that they are well versed with teaching and learning of young learners.

From the findings, ten (10) teachers were specialized to teach ECD learners and seven (7) of them has BED in ECD. Sammon (2010) supports that, specialized education is associated with

better child outcomes and improved staff competences to provide quality education. One study found out that pre-school teachers with BED were the most effective practitioners (Eliot, 2006). Research studies revealed that more specialized staff education and training are strongly associated with stable, sensitive and stimulating interactions (Shonkoff and Phillips, 2000). However, Bruce (2010) states that qualifications does not guarantee an effective teacher but it's the ability of the qualified personal to create a conducive environment for quality education.

4.1.4 Distribution of participants by working experience

Table 4.4: Experiences of school heads

Years	Number of school heads	Percentage %
0-5	0	0
6-10	1	33.3
11-15	2	66.7
Total	3	100

The above table show the school heads experience under the study which was presented in terms of years. School heads who were interviewed in this study 33% have teaching experience ranging from 6-10 years. 66, 7 % had been in schools for the period 11-15 years range. There was no head on the range between 0-5 years. Their experience is important since they may be in a position to know the strategies that can be employed to ensure good practices in health and safety for ECE in primary schools. Thus, the researcher intends to find out the reliability and the validity of the collected.

As such, the data collected from the school heads of the schools selected was useful since they were able to respond honestly and correctly on the strategies that can be used to ensure good practices in health and safety in primary schools. In supporting the fore going point, Borg in Mashingaidze (2006) states that the importance of the research results depends on the participants' validity. This means that if the participants are relevant to the research study quality data is composed to come up with research results.

Table 4.5: Teachers in charge (T.I.Cs) working experience

Years of experience	Number of TICs	Percentage %
2-5	1	33.3
6-10	0	0
11-15	2	66.7
Total	3	100

From table 4.5 above, TICs were interviewed too and it was noted that they have been in the teaching field from the period ranging 2-5 years. One (1) participant was on the range 2-5 years amounted to 33%. There were three (3) TICs who were between 11-15 years of experience which yielded 66%. This was very important to the study, having been in the teaching profession for a reasonable period of time as this will enable them to respond to the questions on the strategies that can be used to ensure good practices in health and safety questions without problems. Having collected such quality data the findings of the research may be useful for the study.

Table 4.6: Teachers' teaching experience

Teachers experience	Frequency	Percentage %
2-5	4	13,3
6-10	12	40
11-15	2	6,7
16-20	4	13,3
Above 20	8	26,7
Total	30	100

As highlighted on Table 4.6 above, teachers who participated in answering the questionnaires had teaching experience ranging from 6.7 % to 40%. They have been in the in the teaching field starting from 2 years to above 20 years which is a reasonable time. The majority of participants were between 6-10 years which amounted to 40%. There were eight (8) participants who were over 20 years of experience which amounted to 26.7%. Other four (4) participants were between 16-20 years of experience and yielded 13.3% and other four (4) participants were ranging from 2-5 years of experience which amounted to 13.3%. Participants between 11-15 were only two (2) with 6.7%. This revealed that most teachers are experienced in the teaching and learning of young children. Mavhundutse (2014) believes that experience contribute to effective practices. This means that an experienced personal may produce the best results during teaching and learning. However, all teachers require continuous in-service training for them to be always updated with ECE curriculum.

Basing on the results of the findings from the school heads, the TICs and the ECD teachers' experience the researcher concluded that the participants may respond to the questions basing on the fact that they have been involved in health and safety issues of ECE learners for a long time. Thus the data collected and research findings became more valuable.

4.1.5 Strategies that can be used to ensure good practice in health and safety at ECE level in primary schools.

Table 4.7: Teacher's responses on strategies to ensure good practices in health and safety at ECE level

ITEM	YES		NO	
	Number	%	Number	%
Are you aware of health and safety precautions?	30	100	0	0
Do you have age appropriate toilets?	10	33.3	20	66.7
Do you have regular supply of safe water?	20	33.3	10	66.7
Do you monitor cleanliness of learner's toilets?	1	3,3	29	96.7
Do you accompany learners to the toilets?	4	13,3	26	86.7
Do you monitor outdoor and indoor activities for learner's safety?	7	23,3	23	76.7
Do you do health checks regularly?	5	16,7	25	83.3

The findings from the teacher's responses showed that 100% are aware of health and safety issues. The data in the table 4.7 show strategies done by ECD teachers who participated in the study. For clarity of findings, the strategies done by the ECD teachers were further shown on

the graph below in percentage. Graph underneath show the findings on the strategies done by ECE teachers under the study.

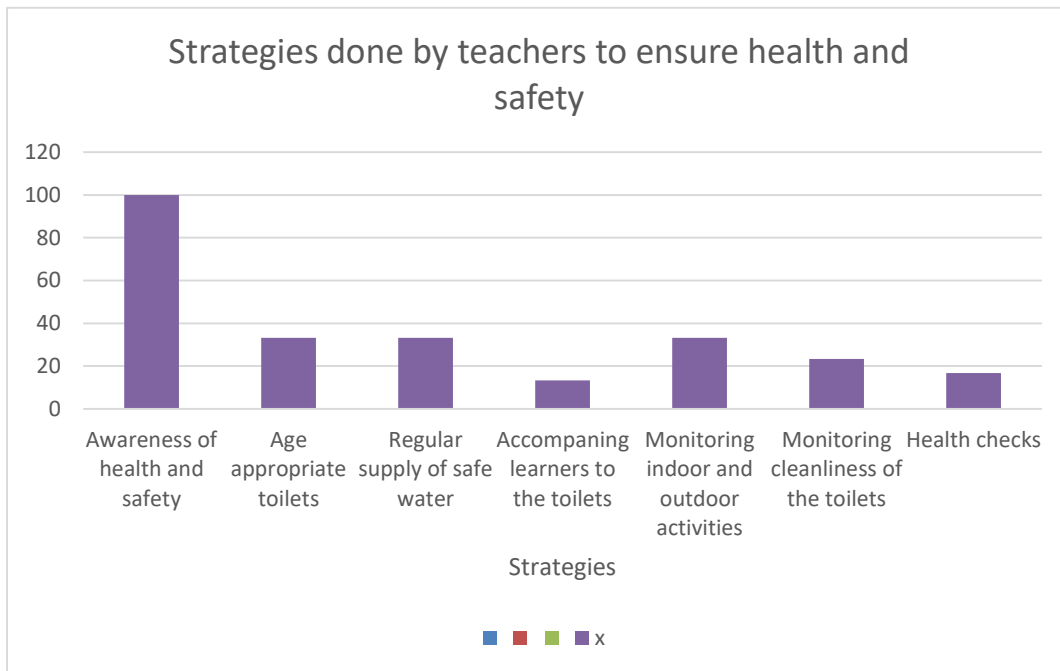


Figure 4.1: Strategies done by teachers on health and safety

It was also noted that 33.3% has age appropriate toilets and 66.7% do not have age appropriate toilets. This shows that most schools do not have age appropriate toilets and this may contribute to the spread of diseases since young learners touch messed toilet as they may not be able to use toilets seats meant for juniors. UNICEF (2006) advocates for separate toilets for boys and girls with enough water for hand washing using age appropriate facilities and constant supervision of school yard.

Regular supply of safe water had 33.3% and 66.7% do not have regular supply of water which shows that most schools do not have regular safe water for drinking. Myers (2004) propounds availability of safety and health measures such as classroom maintenance, adequate space, proper sanitation and safe water supply facilities has influence on excellence health and safety practices. SI of 106 of 2005 further recommend, that for ECD centers to function well they have to meet stipulated standards like having supply of sanitary facilities and water. In the same vein

Fresh (2013) urges that, school environment should be free from harms that can affect children's health and development like having age appropriate sanitary facilities and availability of adequate safe water.

13, 3% accompany learners to the toilets and 86.7% do not accompany learners to the toilets. This shows that learners may fail to wash their hands after using the toilets. In the same vein, Fresh (2013) asserts that lack of hand washing facilities, unsafe water or poor sanitation may cause infections.

Monitoring of indoor and outdoor activities had 76.7% of the teachers who do not monitor their learners as they play whereas 23.3% monitor the learners. From the findings a large number of teachers do not monitor the learners as they play so as to promote their health and safety. WHO (2018) supports that, caregivers should monitor young children's physical and emotional conditions as while as protecting them from environmental dangers so to safe guard their health. In addition WHO (2018) states that, caregivers should also have good hygienic practices which reduce the spread of infection. ECD handbook also (2010) propounds that, caregivers and ECE practitioners should continuously check the environment for small objects and poisonous substances that could be harmful to ECE learners. If learners are well monitored it means less injuries may occur at ECE level. Injuries affect learner's health and development, thereby decreasing in performance.

4.1.6 Interviews on strategies to ensure good practices in health and safety of learners

4.1.6.1 School heads interviews

From the interviews carried out with 3 school heads on the strategies that can be used to ensure good practices in health and safety, it was noted that all of them cited provision of clean water and sanitation facilities as the top priority. They also states that, staff development, supervision, consultations and delegation of duties as strategies to be used. Head A asserts that;

To ensure good practices in health and safety at ECE level, proper sanitation facilities and supervision by the administration should be done to see if teachers are implementing good practices in health and safety. Teachers to be responsible in monitoring learners always.

Head B also posits that;

There is need for staff development on health and safety issues so that everyone working with young children is fully equipped and provision of clean water, sanitation like age appropriate toilets as while as safe and conducive environment when implementing good practices. There is also need for inspection by supervisors.

Head C stipulated that;

Schools need to have health committee so that it supervises and update the school administration on the health and safety situation. Apart from having the necessities of health and safety at ECE level, delegation of duties by the administrators may help in the implementation of good practices in health and safety.

All the school heads state that there must be provision of water and proper sanitation. Fail to have these necessities learners are prone to diseases such as diarrhea and typhoid. This is supported by SI 106 of 2005 which stipulates that, for a center to operate they should meet stipulated standards like the provision of water and sanitation, it indicated that there should be flush toilets provided in the ratio one (1) squat hole as to twelve (12) learners. Study by Mbarath et al (2016) in South Africa also posits that for ECD centers to operate they have to meet the standards presented by Department of Social Development (DSD) which include quality infra-structure that provide children with safe and health learning environment. These include availability of proper sanitation, adequate safe water, electricity and protected areas free from dangers. Head A stipulates that there must be supervision by administrators to ensure good health practices at ECE level. To support this notion, Mwomwa et al (2018) states the

need for frequent inspection of preschools to ensure that safety and security standards are observed and implemented.

From the interviews, Head B is of view that staff development may help in the implementation of good practices in health and safety. To support the forgoing view point by head B, Spreeuwenberg (2019) propounds that the employer should give employees necessary information, instruction, training or supervision to enable them to work in a way that is safe and without risks to health. In the same vein, Spreeuwenberg (2019) also stipulates that, caregivers of infants and toddlers should be trained on following daily cleaning, sanitizing, disinfecting practices for example, preparing clean environment, infant toys and health checks. To add on, Armstrong (2009) supports that health and safety training should be done periodically in schools. In their findings, Major and Jeffery (2012) also advocates use of consultations in order to enforce good practices on health and safety. Major and Jeffery (2012) in addition argues that for the consultations to be effective the information that affect the health and safety of learners should be shared among all the employees. Major and Jeffrey also view that, staff must be trained on infection control and on good hygienic practices such as hand washing as well as on occupational immunization programs.

In the same vein Head C posits that, delegation of duties at ECE level may help to ensure good practices in health and safety. Having delegated the duties, there will be strong supervision and monitoring. The findings of this research are congruent to OECD (2015) who states that, through monitoring and evaluation quality may be achieved at ECE services. Cubey and Dalli (1996) are of the view that, monitoring of services gives room to see whether the goals and aims are being achieved.

The school heads were further asked on the challenges they counter in trying to ensure good practices in health and safety at ECE in primary schools. They all pointed out lack of finance

as a major factor. Hence, basing on the foregoing challenge it will then be a challenge to construct age appropriate toilets for the ECE learners. High teacher pupil ratio in ECE classes was also raised by both of them, since the facilities like a classroom to accommodate a large number of learners. This may lead to transmission of infections due to less ventilation in the classrooms. Robson and Witterbols (1986) asserts that, small student teacher ratio is vital to quality programmes. High teacher pupil ratio may also be a challenge to teachers to closely monitor learners as they play or going to the toilets. Thus, smaller class size benefits learners by allowing for individual attention and making it possible to ensure good practices in health and safety. High teacher pupil ratio compromise the practices. In the same vein, Spreeuwenberg (2019) asserts that, low teacher-pupil ratio ensures a basic level of child safety and set a stage for high quality caregiving. In addition, Spreeuwenberg (2019) highlighted that, small group sizes and low teacher-pupil ratio are associated with fewer situations that threaten child safety. Directors' circular number 12 of 2005 stipulated the ratio one teacher as to twenty children (1; 20) which is manageable.

4.1.6.2 Interview for TICs

TIC A states that;

Provision of safe environment, clean water and sanitation facilities are the strategies to ensure good practices in health and safety at ECE level in primary schools.

TIC B had to say that;

Supervision should be done for example to inspect all classrooms on regular basis on hygiene standards, and overall cleanliness on the school environment. ECE learners need health checks. Above all, schools should have safe water.

TIC C had the opinion that;

Establishment of participatory health club which will identify and give notice of health and safety risks in the school environment may be a strategy to ensure good practices in health and safety. Hand washing equipment should also be placed at strategic points around the school yard.

TIC A encourage the provisions of proper sanitation facilities, clean water, and safe environment as strategies to ensure good practices in health and safety at ECE level. TIC B echoed the same sentiments on the availability of safe water and proper sanitation facilities. OECD (2017) alluded that, Italy, German, France and Ireland inspect to see if the setting comply with the regulation set on health, hygiene and safety standards. TIC B views that supervision is the best way to ensure good practices in health and safety at ECE level. That is, inspection of all classrooms on regular basis on hygiene standards and general cleanliness of the school environment. Inspection was also encouraged by ECD handbook which asserts that, caregivers and ECE practitioners should continuously check the environment for small objects and poisonous substances that could harm the learners. Health checks were also identified as a strategy to ensure good practices in health safety for learners at ECE that is part of inspection. This may help in early detection of infections or injuries and learners may be assisted in time. TIC C had the opinion of establishment of participatory health club as a way of ensuring good health and safety practices in health and safety at ECE level. TIC C further pointed out that the health club will identify and give notice of the major health and safety risks in the school environment. This was in support by OCEC (2017) which postulate that, top level authorities should evaluate so as to improve quality. In addition TIC C suggests, that there must be washing hands equipment placed at strategic points. This is very important since learners will be always reminded to wash their hands and it became their habit.

From the TICs responses it was noted that supply of clean water, hygienic practices such as hand washing and provision of proper sanitation as strategies to ensure good practices in health

and safety at ECE level. In addition to the mentioned strategies, TIC B encouraged the supervision as a way of ensuring good practices in health and safety. Statutory 105 of 2005 states that, for ECE center to operate it has to meet standards set like provision of safe water. Fresh (2013) propounds that lack of hand washing facilities and use of unsafe water leads to infectious diseases. Hence supervision is of paramount important. Therefore, it is vital for the government to do follow ups, not just to make some recommendations that promote health and safety for the interest of the children (UNESCO, 2007). This means supervision and monitoring is essential in order to apply good practices in health and safety. TIC C had the opinion of having health clubs which will identify and give notice to major risks. This was supported by Health and Safety Standards (2017) which encourages the inspection process whereby the inspections are recorded and such duties can be handed to the health club members.

4.1.7 Support systems that should be put in place to ensure good practices in health and safety at ECE level in primary schools.

4.1.7.1 Teacher’s response on how influential are support systems in the implementation of health and safety at schools.

Table 4.8 Support systems to ensure good practices in health and safety

Provider	Very important		Somewhat important		Not important	
	Number of teachers	percentage	Number of teachers	Percentage	Number of teachers	percentage
Parents	14	70%	4	20%	2	10%
Donors	15	75%	2	10%	0	0%
Civil society	90	50%	5	25%	5	25%

Government	18	90%	5	25%	0	0%
School {SDC, teachers, Administration}	19	95%	10	5%	0	0%

Data in the table reveals that the school, which comprises of the SDC, teachers and administrators has 95%. This means they play an important role in order to ensure good practices in health and safety to learners at ECE levels in schools. Other support systems noted are Donors who has 75%, Government 90%, Parents 70% and civil society 50%.

These observations were clearly shown in the figure below.

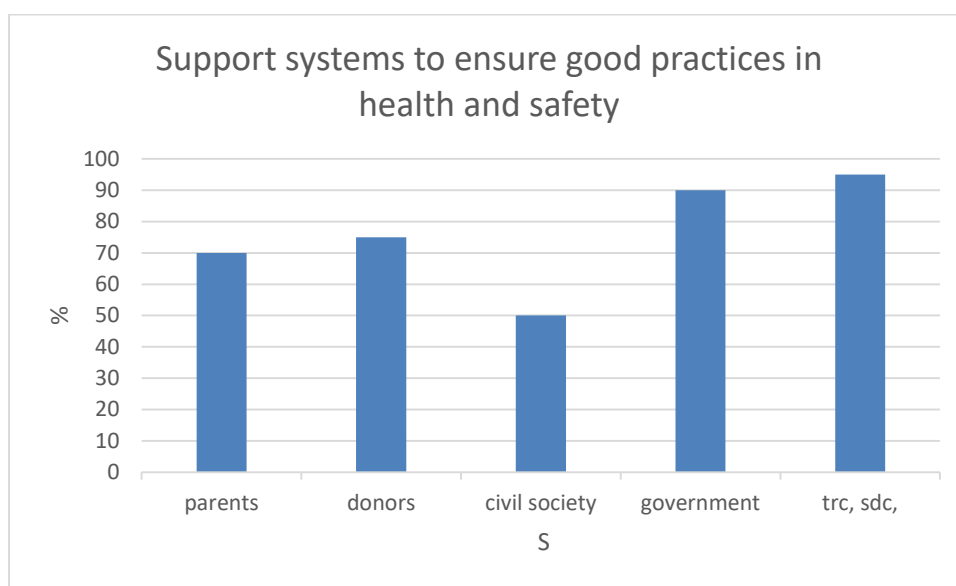


Figure 4.2: Support systems to ensure good practices in health and safety

From the teachers responses it was noted that school has 95%. It comprises of teachers, SDC and administration, they effectively play their role to ensure good practices in health and safety. Forry et al (2013) states that, teachers, administrators, and caregivers work with children every day and are the ones should create quality education and care. The government provide 90%. Donors provide 75%. This scenario matched with the notion that was raised in the literature

review by World Bank (2013) which postulates that NGOs and private partnership can support and compliment the government of Turkey's effort to provide ECE safety and health services. It was also noted that civil society and the parents played a crucial role by ensuring that learner's development. Tulsia (2018) propounds that, parent or guardians are required to work in partnership with their ECE services to ensure good practices in health and safety of their children. From the findings, if all the mentioned stakeholders work together they may ensure good practices in health and safety.

4.1.7 Interviews on support systems that should be put in place to ensure good practices in health and safety of learners

4.1.7.1 School heads interviews

From the heads comments on the support systems that should be put in place to ensure good practices in health and safety, it was noted that all the head indicated partnership of all stakeholders. The government, make some regulation which should be followed by the institution such as the S1 of 2005 which stipulates that for an ECE to operate it has to meet the stipulated regulations like sanitary facilities and availability of water. NGOs and parents, civil society may provide the resources. Study by Mutazu (2018) indicated that NGOs such as the UNCEF and the government as well as the SDC supported good practices in health and safety in schools by drilling boreholes and building of toilets. Tulsia (2018) indicates that all staff members are responsible for implementing the policies as appropriate to their roles. From the findings, teachers and administrators are not doing their duties fully therefore they need to implement the good practices in the health and safety of learners. Tulsia (2018) further propounds that, parents and guardians are required to work in partnership with the ECE services to ensure good health and safety practices of their children. From the school heads' response,

parents were identified as effective support systems that should be put in place to ensure good practices in health and safety. From the researchers view they may provide resources and labour

Findings from the interviews pointed out same results on the available support systems that should be put in place to ensure good practices in health and safety.

Head A said;

We have received assistance from donors, they build water tanks near the toilets so that learners can wash their hands after using the toilets. Health workers from the government sometimes visits the schools to monitor hygiene on the school environment such as on the toilets.

Furthermore head B had to say that;

A lot of support comes from the parents or guardians of the learners. For example they provide financial resources and sometimes they provide labour. I also encourage ECE teachers to do their duty wholeheartedly.

Head C posits that;

The government, donors, school staff parents and SDC should work hand in hand so that good practices in health and safety of the learners is attained. The government should provide schools with finance so that the schools can meet the conducive standards which will not hinder learner's health and safety.

All the school heads, indicated that they received assistance from the donors community in terms of financial and material resources. For instance, the UNCEF funds were donated towards construction of toilets for ECE learners. It was also noted that teacher's involvement in an effort to make sure good practices in health and safety at ECE level was hindered pupil ratios. For example a teacher cannot manage a class of fifty learners thereby exposing them to

injuries and safety. The government should stick to its regulations and teachers should also have in service training so that they keep updated on good practices in health and safety.

From the school heads responses it was noted that the financial and resource support from the stakeholders will help to insure good practices in health and safety at ECE level in primary school.

4.1.7.2 Interview for TICs

TIC A states that;

All stakeholders should be involved in ensuring good practices in health and safety and also highlighted the partnership of the health sector and social service with the ECE. She pointed out that the health sector should fully participate by visit schools and monitor on health issues and social services on safety issues

TIC B postulated that;

The SDC and the administration should make sure that good practices are ensured at ECE level through provision of resources and monitoring since they are the ones on the ground.

TIC C indicated that;

The government should play a large part ensuring good practices in health and safety at ECE level it can do this by enforcing regulations and it must make sure they are implemented by monitoring and supervising. It should also provide financial assistance.

TICs from three different schools deduced that the stakeholders should fully participate to ensure good practices in health and safety at ECE level. Partnership of stakeholders help the school reach their goals. In addition, EC (2014) argues that, ECE staff should work hand in hand with local authorities, social services and health to promote high quality such as health

and safety. Apart from the stakeholders mentioned some respondents cited health sector and social welfare as support systems that should actively play a part to ensure good practices in health and safety. These sectors may visit the school and educate as while as monitoring. As much the researcher concluded that all the support systems highlighted should work together so as to ensure good practices in health at safety.

4.2 Summary

The chapter presented the data presentation, analysis and discussion. The chapter identified strategies that can be put in place which include provision of water, sanitary facilities, monitoring, supervision, staff development and evaluation. These strategies were presented, analyzed and interpreted. Further in the charter the support system that should be put in place to ensure good practices at ECE level in primary schools were highlighted. The chapter also sought to identify the link between the literature reviewed and the findings. The next chapter focused on the summary conclusions and recommendations of the study.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENTATIONS

5.0 Introduction

This chapter intends to highlight on general summary, conclusions and the recommendations of the research findings of the study. The summary is centred on the results of the data examined in chapter 4. The research findings were discussed linked to the research questions in the first section. In this chapter, review of the research questions were also provided. The summary of the findings were given as well as the implications to the future studies.

5.1 Summary

The study focused on investigating the strategies that can be used to ensure good practises in health and safety at ECE level in Warren Park/ Mabelreign district in Harare Metropolitan province. Chapter one indicated the problem and the context. The background of the study, statement of the problem, research questions, significance of the study, assumptions of the study, limitations, delimitations and definitions of terms were also explored in Chapter one .In Chapter two, review of the related literature on the strategies that can be used to good practises in health and safety were given as well as the theoretical framework. In addition, chapter two also illuminated on the review of the literature on the support systems that can be put in place to ensure good practises in health and safety. Chapter three, discuss on the methodology. The researcher presented the research design, population, sample and sampling procedures. In chapter four, major research questions were used in presenting, analysing and discussing data and the discussion was supported by the literature reviewed in chapter two.

Many challenges were faced by the researcher during data collection, as a result of lockdown which was caused by the Corona Virus (Covid 19) pandemic. Due to lockdown restrictions the researcher used technological instruments to collect data and the participants were not knowledgeable to answer questionnaires which were distributed online. To solve the challenge the researcher had to teach them such that twenty seven out of thirty questionnaires were answered. In addition the researcher had financial constrains for data bundles to solve the problem the researcher was assisted by a relative.

5.2 Conclusions

- **Strategies that can be used to ensure good practises in health and safety at ECE level.**

The findings show many strategies that can be used to ensure good practises in health and safety at ECE level in Warren Park/ Mabelreign district. These were, provision of conducive and safe environment. Thus, provision of water and sanitation. From the findings teachers indicated that most school do not have age appropriate toilets and adequate water supply which is a great problem that may cause diseases in learners. Hence, there is need for the school administrators and the School Development Committee consider the issue of water and sanitation as a top priority during their budgeting so as to ensure good practises in health and safety for ECE learners. From the findings it was also noted that monitoring, supervision and evaluation as strategies to ensure good practises in health and safety. The findings from the teachers showed that teachers do not monitor learners always for example when visiting the toilets and during free play. Lack of monitoring from the researchers view cause injuries and diseases. This was evidenced by the teacher's responses when they indicated that learners got some injuries frequently while at school. Hence teachers need to monitor learners always. From these findings the researcher can conclude that, the school administrators should also supervise and monitor the teachers as they carry out their duties and ensure that all the precaution that safe guard the health and safety of learners are observed. In addition, the Ministry of Primary and Secondary Education through its personals should supervise the practises at ECE centers in terms of health and safety.

- **Support systems that can be put in place to ensure good practises in health and safety at ECE centres.**

The research findings show that there is need of all stake holders to work hand in hand so as to ensure good practises in health and safety at ECE level. It is also felt that that the government should ensure that the ECE policies are being fully implemented. Administration and teachers should exercise their duties fully. Health ministry and social service should also work in collaboration with ECE centres.

5.3 Recommendations

5.3.1 Recommendations to the administrators

Administrators need to attend ECE workshops in order for them to appreciate the value of ECE in learners' learning and development focusing on their health and safety in order to meet the ECE goal which is total development.

5.3.2 Recommendations for education stakeholders

Education stakeholders may find the best ways to motivate teachers in both career development and economic wellbeing because without motivating teachers may not do their duties proficiently. The government should ensure that policies that govern the ECE centers are being applied by monitoring, supervising and evaluating that may help in ensuring good practises in health and safety.

5.3.3 Recommendations for all stakeholders

All the stakeholders need to work hand in hand to ensure good practises in health and safety at ECE centres.

5.3.4 Recommendations to the parents

Parents need to play a pivotal role in supporting children's learning and development by providing the resources such as payment of fees and provisions of age appropriate teaching and learning materials

5.4 Implications for future research

The researcher, recommend further studies to be carried on a broad context. There is need to carry out more research on strategies that can be used to ensure good practises in health and safety at provincial level with a view to come up with structure that could ease such concerns. However, it is of paramount importance to consider financial, time and resources available bearing in mind challenges encountered by the researcher during the research process.

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Instruments

Interview guide for school heads and Teachers' in Charge.

My name is Chakanetsa Shailet working towards a Bachelor of Education Degree in Early Childhood Education at Midlands State University. I am carrying out a research on strategies that can be used to ensure good practices in health and safety at Early Childhood Education in Warren Park/ Mabelreign District Primary Schools. Your full participation will be highly appreciated. I am kindly requesting you to respond to each of the questions of the interview guide. The information you will provide would be strictly confidential and strictly for academic purpose.

Section A: Demographic Data

1. Gender

Female	
Male	

2. What is your age?

25 years and below	
26-35 years	
36- 45 years	
46-55 years	
Over 55 years	

3. Please indicate your teaching experience

0- 5 years	
6 - 10 years	
11-15 years	
16-20 years	
Over 20 years	

4. What is your highest qualification

Certificate in education	
Diploma in education	
Diploma in ECD	
Bachelor of Education in ECD	
Bachelor of Primary Education	
Other qualifications (specify	

Section B:

1. What strategies should be used to ensure good practices in health and safety at ECE level at your school?
2. What support systems should be put in place to ensure good practices in health and safety at ECE level at your school?

Thank you

MIDLANDS STATE UNIVERSITY

FACULTY OF EDUCATION

DEPARTMENT OF EDUCATIONAL FOUNDATIONS

QUESTIONNAIRE FOR TEACHERS

My name is Chakanetsa Shaiet working towards a Bachelor of Education Degree in Early Childhood Education at Midlands State University. I am carrying out a research on strategies that can be used to ensure good practices in health and safety at ECE level in Warren Park/ Mabelreign District Primary Schools. Your full participation will be appreciated.

Do not write your name anywhere on this questionnaire and the information you are going to provide is strictly private and confidential.

Section A: Demographic Data

Please respond by ticking in appropriate box or writing your information in the space provided.

1. Gender

Female	
Male	

2. What is your age?

25 years and below	
26-35 years	
36- 45 years	
46-55 years	

Over 55 years	
---------------	--

3. Please indicate your teaching experience

0- 5 years	
6 - 10 years	
11-15 years	
16-20 years	
Over 20 years	

4. What is your highest qualification

Certificate in education	
Diploma in education	
Diploma in ECD	
Bachelor of Education in ECD	
Bachelor of Primary Education	
Other qualifications (specify	

Indicate health and safety practices in your class by ticking the appropriate response.

Item	Yes	No
Are you aware of health and safety precautions?		
Do you have age appropriate toilets?		
Do you have regular supply of safe water?		
Do you monitor cleanliness on children's toilets?		
Do you accompany children to the toilets?		
Do your children wash hands regularly with water and soap?		
Do you monitor outdoor and indoor activities for children's safety?		
Do you do health checks every day?		

2. How often do you experience injuries among learners?

Often Sometimes frequent

3. What other strategies can be used to ensure good practices in health and safety at ECE level?

4. What challenges do you face when practicing good health and safety at ECE level?

How influential are support systems in the implementation of health and safety at your school.

Please tick in the appropriate box.

Item	Very important	Somewhat important	Not important.
Parents			
Non-Governmental Organisations (NGOs)			
Government			
Civil society			
School (SDC, Teachers, Administrators)			

Are there any other support systems that should be put in place to ensure good health and safety practices at ECE level?

If yes
 specify.....

Appendices

Appendix A: Permission letter from the university

MIDLANDS STATE UNIVERSITY



P. BAG 9055
Gweru
Zimbabwe

Telephone: (263) 54 60404/60337/60667/60450
Fax: (263) 54 60233/60311

FACULTY OF EDUCATION DEPARTMENT OF EDUCATIONAL FOUNDATIONS AND PRIMARY EDUCATION

21 JULY 2020

TO WHOM IT MAY CONCERN

The bearer Shailet Chakanetsa student number R1814316H is a B.Ed student at this University. She has to undertake research and thereafter present a Research Project in partial fulfilment of the degree programme.

In this regard, the university kindly requests both your institution and personnel's assistance in this student's research endeavours.

Your co-operation and assistance is greatly appreciated.

Thank you

A handwritten signature in blue ink that reads 'E Muguwe'.

.....
Dr E Muguwe

(Chairperson – Educational Foundations and Primary Education)

NB: Please note that there is no date stamp due to lockdown restrictions on movement. Thank you.

Appendix B: Permission letter from the ministry

