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**An Assessment of the Management of Child Day care Services in Federal
Governmental Offices: The Case of the Ministry of Education and Ministry of
Health, Addis Ababa Ethiopia**

**A Thesis Submitted to the School of Graduate Studies in Addis Ababa
University in Partial Fulfillment of Requirement for the Degree of Masters
Art in Gender Studies**

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This is to certify that the thesis prepared by **Tsige Tadele** entitled “*An Assessment of the Management of Child Daycare Services in Federal Governmental Offices: The Case of the Ministry of Education and Ministry of Health, Addis Ababa Ethiopia*” and submitted in partial fulfillment of the requirements for the Degree of Master of Arts (Gender studies) complies with the regulations of the University and meets the accepted standards with respect to originality and quality.

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DEDICATION
“For My Persistence and Inspiration”

Abstract

The study was conducted and assessed the Management of Child Day Care Centers in Federal Government offices. From the Ministry of Education and ministry of health, twenty-three participants were selected through the use of the purposive sampling technique. The data collection methods comprised in-depth inteinterviewscus group discussions, key informant interviews, non-Participatory observation, and a review of related literature were used. The data was systematically analyzed using content analysis of various data sources. The findings have shown, there is a gap in the implementation of the revised Civil Service Proclamation particularly enacted the mandates given to government offices to establish child day care at workplaces and the national child day care center directives. Moreover, the government hierarchy is difficult to coordinate and monitor the service, to avail quality workplace child daycare service. The main findings of the research show that there is no formally trained staff in early child daycare services. Education and/or specialized qualifications have a huge impact on the overall quality of caregiving. Much attention has to be paid to the education and/or training of child caregivers. It was recommended that the Ministry of Education should make all the possible strives to start new caregiver training programs at least diploma level and th curriculum and syllabus should be prepared to produce child care professionals with better knowledge, skill, and attitude on child development and care so they become professionals in their careers.

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Acronyms and Abbreviations

ACRWC- African Charter on the Rights and Welfare of the Child
CDCC- Child Day Care Center
CEDAW— Elimination of All Forms of Discrimination against Women
CG- Care Giver
CRC - Convention on the Rights of the Child
ECCE- Early Child & Care Education
ECDE- Early Childhood Development Education
FCSC- Federal Civil Service Commission
FGD - Focus Group Discussion
GTPI- Gross Transformation Plan First
KII- Key Informant Interview
ILO- International Labor Organization
MoE- Ministry of Education
MoH-Ministry of Health
MoWCAY-Ministry of Women, Children & Youth
MoWSA-Ministry of Women & Social Affairs
NGO- Non-Government Organization
NCDCCD- National Child Day Care Directives
SDG –Sustainable Development Goal
Un-United Nation
UNDP- United nation Development Fund

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CHAPTER ONE

Introduction

This chapter highlights the purpose of proposed study; it provides details related to the background, defines the statement of the problem, objectives and research questions. Furthermore, it emphasizes on the significance, limitations, scope of the study and organization of the study

1.1 Background of the Study

Ministry of Education was established in 1942 G.C The Ministry of education is one of the oldest governmental institutions in Ethiopia. In the 2022/2023 academic year of there are 26,082,698 students attending pre-primary, primary and secondary schools under the mandate of the ministry year (<https://moe.gov.et>). At tertiary level, there are 46 government universities administered by the ministry. The Ministry has established a daycare center in 2018 with the financial and technical collaboration with support of an international NGO. The center is found at the back, on the ground floor of the building of the ministry.

In the same way Ministry of Health is also one of the oldest ministries and was established in 1940 G.C. It is one of the 22 Ministries established by Proclamation No.1263/2021 issued to determine the powers and functions of the executive organs of the Federal Democratic Republic of Ethiopia. According to the information that has been taken from the human resource department there were 1248 (550 female, 698 male) staff in the ministry. The day Care center was established in 2018 using the government budget and is located at 6th floor of the building in central compound of the ministry.

For parents who work for income or would like to work, childcare is a concern that is almost universal. One way that workers have been receiving various kinds of assistance with childcare is through support that they can access through their workplace. Workplace programs are not the only, nor even the primary, means of accessing assistance with childcare. However, they are nevertheless helping many working parents and are attracting increasing interest as a way of meeting the overall societal challenge of finding mechanisms for making childcare more accessible and available to working parents (Hein Cassirer,2010).

Women's participation in paid labour and access to decent work is particularly affected by the burden of combining reproductive and paid work. This adds stress not accounted for in traditional conceptions of decent work, which focus on paid work and do not examine related changes in reproductive labour (ILO,2017).

In 2018 the female employment to population ratio is 45.6 percent compared to almost 71.2 percent for men with women's opportunities to work for pay or profit remaining 25.6 percentage points lower than those of men. On the other sides, the Global Gender Index (2022) reported that the global gender parity for labor force participation had been slowly declining since 2009. It further shows from 54% of the global working-age population, men's share of time spent in unpaid work as a proportion spent in total work was 19%, while for women this was 55%. With rising childcare costs, there is a high risk that an asymmetric demand to provide unpaid care work will continue to be imposed on women.

The report of UN Women, (2014), declares that report shows although more women may be working for wages, their hours spent doing unpaid household work have not diminished, increasing their overall work burden, time poverty, and stress.

The research paper that conducted by IMF (2019) shows women who noted household work responsibility as a reason for being out of the labour force were much higher than men. To overcome the balance between men's and women, workloads, it should implement the strategy for the unpaid workload to be reduced and redistribution through technological intervention and making awareness.

Similarly, increasing the availability of childcare can lead to more and better women's employment a lack of childcare affects working parents across all income levels and geographies, it is affecting women's employment and economic opportunities due to women disproportionately shouldering the burden of care in households (Saidur, Hirane, et,el, 2020).

The child day care center is a new phenomenon in Ethiopia, there has been a positive trend of women's care giving burden being reduced due to access to child care. This also benefits the child and keeps the women in the workforce. Considering this, the Ethiopian government has passed a proclamation to avail day care facilities at every government office on

Proclamation 1064/2017 sub-article 48(6), which mainly narrates that all government female staff should be able to access day care facilities in their workplace.

This proclamation isn't only devised for befitting women, Children will also be able to be stimulated and get quality care service. In the proclamation, all government offices are obliged to offer a free day care service. After the proclamation was enacted few government offices have been set up for child day care services. The purpose of the study is to study the management of Child Day care Services, current practices of child day care facilities, especially those set up by government institutions in Federal Governmental Offices.

1.2 Statement of the Problem

The unequal distribution of care, because it is both time-consuming and resource-intensive, is holding back women from advancing in other areas of their lives. Work-life balance is one of the most challenging issues being faced by Ethiopian women employees in the 21st century because of the type of roles they play at home and the spillover of personal life over work-life (Hiwot, 2019 & Frehiwot, 2021).

Likewise, due to the increasing engagement of women in the workplace, urban women are forced to leave their infants and toddlers under the care of inexperienced caregivers or older grandmothers. Besides, there are many urban working women who leave their young children with maids who did not get formal child care service trainings. What is worse is that no rigorous screening is taken before maids are employed to explore their past history particularly in relation to issues of child abuse and neglect. All these factors can put children at risk of neglect, poor physical and mental development, abuse, infection, or other health hazards (Maundeni, 2013, Bretherton, 2010).

Basically, public service institutions are established with the sole mission to provide society with a bunch of various services either for free or with the least amount of service charges. They could be established in the form of ministries, boards, councils, institutes, universities, schools, colleges, agencies, bureaus, and offices (Ministry of Finance, 2019). After conducting the evaluation of GTPI (2011-2015), Ethiopia has adopted the ILO convention (156) that requires governments to take measures to ease the burden of women in the household. Accordingly, the Growth and Transformation Plan GTPII (2016- 2020) provides for the introduction of daycare

facilities for working mothers. Besides, in the public sector, in recognition of the fact that burdens of child care hold women back in the labor force, the Government has adopted a new proclamation of establishing daycare services for female workers. A regulation was passed in 2017 governing the establishment of such day care centers in each and every public institution. Hence, it has got the plan from MoWCAY's plan to open only 30-day care centers at the federal level.

Similarly, the Beijing +25 National Report (2019) asserted that under GTPII, the Government planned to establish very few daycare centers. However, there is a huge gap between the demand and the quality and affordable daycare centers that female workers face challenges. Due to the lack of proper standards and monitoring tools, it is not possible to find the services and general quality of daycare centers in these institutions. There are several models of daycare centers in Ethiopia Public, communal and private, and NGO-owned owned. However, the proclamation in No-1064/ 2017 mainly focuses on enforced childcare services in government offices run by the government budget. This service was prioritized after the proclamation in 2017 and quality standards and other guidelines are still under formulation. The government institution mandated to follow up establishment of child day-care centers and quality of the care service in the public sector, the former MoWCY, has enacted a national child day care directive on the details of the child day-care service provision. The directive specifies the physical components of the child day-care centers and manpower requirements.

Accordingly, every child day-care center to be established in public organizations is required to have convenient play rooms, resting rooms, washing room, food preparation and feeding room. Besides, all government institutions are required to exert utmost effort in order to make the day-care centers free from risks to children's health, be located far away from chemicals, dust, radiation, health hazards of any kind, main road, factories, loud noises and should have adequate sunlight and air exposure.

Various studies have been conducted on child daycare services in Addis Ababa, Ethiopia, and Mukuru Kwa Njenga, Kenya on the Contribution, effects, Challenges, and quality service provision for working mothers in working place care and private daycare center. In addition to

this, daycare services and women's participation in informal employment conducted in Kenya (Addis,2014, Birahne,2020, Friewet,2021, Tefera &H. Yesus,2015 &Ruth,2014).

Addis (2014), assessed that quality service provision by child day care centers in Nifas Silk Lafto sub city of Addis Ababa in private day care center and the researcher found the service provided in these day care centers is custodial care for toddlers. Large group size, poor physical setting, low wages and poor work environment for the caregivers are also other features of these day care centers which compromise the quality of the child care service provision. A study conducted by Birhane, (2020) on the contribution and challenges of work place child day care service in Addis Ababa and found that the daycare center service creates an opportunity for the empowerment of professional women who were deprived of working in the office due to cultural and social domination. Further, Friehwot (2021) conducted the use of workplace child care and its effects on working mother the case of Mechare Child center. The assessment pointed out, working mothers testify the economic benefits both from not losing their work and being able to access better childcare services, without having to pay for the service, especially for low income generating mothers. Additionally Ruth(2014) studied daycare services and women's participation in informal employment in Kenya and pointed the ideology of day care in itself is a measure that has in a significant way contributed to women's participation in informal employment activities.

However, the above-mentioned researches focused on the child day care service and its contribution and challenges for parents, the current practice and implementation of child day care service in federal government offices as per the given proclamation and National day care service directives remains understudied. Additionally, there are many gaps in knowledge about public institutions' child daycare service as per the implementation of proclamation 2017/21064 and National Child Day care Directives (2018). Limited data has been documented on the accessibility of childcare in government offices.

As far as the researcher's knowledge, there is no research conducted on issues related to the implementation of proclamation and child day care center service Directive for child day care center in the context of Ethiopia. Thus, in order to fill the existing knowledge gaps in the implementation of directives, the current study is conducted focusing on the implementation status, practice, effectiveness of the National child day care directives in government offices and

challenges in child daycare service. Additionally, the study seeks to investigate the daycare facilities at government offices for instance the services offered, the daily routine that daycare operates, caregivers' competence, communication and interaction and other quality measures taking the case of Ministry of Education and ministry of Health child day care center in Addis Ababa, Ethiopia.

1.3 Research Objective

1.3.1 General Objective of the research

The main objective of this study is to assess the implementation status of day care center as per the national child day care directives in Work place of Ministry of Health and Education of Addis Ababa.

1.3.2 Specific objectives of the research

The study has been aimed to achieve the following specific objectives

1. To assess the status of child daycare centers at government office.
2. To explore components of service provisions in child daycare centers.
3. To examine the administration's role in the accessibility of child daycare services.
4. To find out factors that affect the quality-of-service provisions in child daycare centers.
5. To assess major contributions of child daycare service in federal government offices.

1.3.3 Research Questions

The aim of the research is to assess the implementation status of daycare centers as per the national child daycare directives in the Federal Government office, Addis Ababa. The main question of the study is 'what is the implementation status of daycare centers as per the national child daycare directives in the Federal Government office, Addis Ababa? Based on this the research questions include: -

- What are the service provisions in the child daycare center in the government office?
- What are the components of service provisions in a child daycare center?
- What is the role of the administration office regarding the accessibility of child daycare services?
- What are the factors that affect the quality-of-service provisions in child daycare centers?

- What are the contributions of daycare service in federal government offices in Addis Ababa?

1.4 Significance of The Study

This study examined the existing experience of the implementation of government policies and directives on the accessibility of child daycare services in government working places. The study will also be relevant to the increasing participation of women in employment activities, due to the fact that a rising need for alternative caregivers is present in Ethiopia. There is a huge gap between the demand and the affordability of daycare centers that female workers face challenges at the government, private, and community levels. It will avail useful information on the service provisions of daycare centers, the administration's roles to practice the services, contributions, and challenges to realizing quality daycare service in Ethiopia.

Additionally, the findings of the study will act as a springboard for further research work and it is also anticipated that the research will yield information that could provide useful feedback to policymakers, implementers, and in the current dispensation the government that is tasked with the provision of daycare centers. Lastly, the study will also provide important information for the Ministry of Women and Social Affairs, Civil Service Commission, and Ministry of Plan and development and in particular those who are interested in working on Child daycare services.

1.5 Definition of Operational Terms

- **Child day care Services;** -The type of service out of home care for children before four years of age by government, private or NGO's. Also, daycare can range from a service just providing a safe place where children are taken care of while their mothers work (Hein & Cassirer:2010)
- **Decent Work**-Involves opportunities for work that is productive and delivers a fair income, security in the workplace and social protection for families.
- **Montosorri Education**- is a method of education that **is** based on self-directed activity, hands-on learning and collaborative play (<https://montessori-nw.org/about-montessori>).
- **Public Service Institution**-is a service intended to serve all members of a community include services provided by a government to people living within its jurisdiction, either directly through public sector agencies. (https://en.wikipedia.org/wiki/Public_service).

- **Social Protection**-is concerned with preventing, managing, and overcoming situations that adversely affect people's wellbeing. It consists of policies and programs designed to reduce poverty and vulnerability by promoting efficient labor market(https://en.wikipedia.org/wiki/Social_protection).
- **Working Mothers-** are woman with the ability to combine a career with the added responsibility of raising a child.

1.6 Scope and the limitation of the Study.

The research focused on the Child care centers established in federal government offices as per the 1064/ 2017 proclamation and National Child Day care Directives 2018. The study will focus on the government offices as the enforcing proclamation focuses on these same institutions conceptually, the study focused on provision, service delivery compared to the national directive, and the components of service provision. Furthermore, the study will be delimited to the federal government office taking the cases of the Ministry of Health and education child daycare center in Addis Ababa. The study will be not focused on local government, private, and community daycare centers. During the study problem faced by the researcher was that there were no budget tracking reports or documents and impact assessment reports in relation to childcare centers at the national level.

1.7 Organization of the paper

The paper has been organized into five chapters containing different topics. The first chapter presented the introductory parts which are the background of the study, the statement of the problem, the objective of the research, the research questions, and significance of the study, the scope of the study, and the limitations of the study. The second chapter deals with the review of related literature of the study. The third chapter has the methodology and procedures used to conduct this study. Chapter four discussed the findings of the study. Finally, Chapter five includes conclusion, and recommendations.

CHAPTER TWO: -Review of Related Literature

Introduction

This Chapter provides a review of the literature regarding the nature of child care, arrangements of child care, perspectives of child care services, and significance of child care service within subtopics. In addition, the chapters dealt with the components of childcare services and legal frameworks in the Ethiopian context. Following this, the existing research gap was discussed. Finally, theoretical frameworks were discussed to understand the topic of the study.

2.1 The Nature and Type of Child Day care Center

According to the definition which was given by Encyclopedia Britannica, day care center is an institution that provides supervision and care of infants and young children during the daytime, particularly so that their parents can hold jobs. It further described as the institution of day care appeared in France about 1840 and the Société des Crèches was recognized by the French government in 1869. Day-care centers were established in most European cities and industrial centers during the second half of the 19th century; the first in Great Britain, for example, was established in 1860.

Day care center, also called day nursery, nursery school, or crèche (French: “crib”), institution that provides supervision and care of infants and young children during the daytime, particularly so that their parents can old jobs or engaging employment. Such institutions appeared in France about 1840, in other European cities they had expanded after the outbreak of Industrial revolution.

As Inter-American Development (2015) stated, a child daycare is the activities of care service that is provided during the day by a person other than the child’s parents or legal guardians. It elaborated further the services of daycare refer to services that offer childcare outside the family home for young children, particularly children who are not yet of an age to be covered by the formal school system. There are different settings of child day care service government, private, community and others. Among the child care settings, government assisted public childcare

center for infants and toddlers. These can be set up in hospitals, Colleges, Universities, government offices and even in shopping malls.

World Bank (2020) also stated childcare is a broad set of activities that are undertaken to ensure the basic needs of the child are met such as food, clothing, sanitation; health etc. together with providing an environment that is loving and invigorating the social and psychological development of the child. As children are not able to take care of themselves, they are always under the care of family member, a non-family member or no one depending upon the situation they are forced to pass through.

According to Hein & Cassirer (2010) stated a child can be in the care of a family member and outside the family. Nonfamily Childcare Services are the type of services needed to look after children during the working hours of parents when there is no family member available. The type of childcare services is different from country to country, as well as the age groups of the children who are attending the service center. Moreover, day-care centers vary in type and one of the main services provided is the care of children while parents are away. As the same writers indicate also, the center may provide daytime child care for babies, toddlers, and children aged under 4 years and also provide the same physical environment, including rest, play, and sanitary facilities, as for daycare.

As Un women (2017) stated the twin objectives of child daycare service are ensuring gender equality and the advancement of women in the workforce, and good childcare is encouraging children's development and learning and helps them grow up under conditions that are suitable for their wellbeing and effective physical, social, emotional, and intellectual development. Moreover currently, comprehensive early childhood education and care services attuned to the needs of working families are scarce, particularly for younger children and in many developing countries, where public childcare provision is uncommon and most parents cannot afford market-based solutions. As a result, accessibility and affordability of child daycare services are often low and highly unequal.

The International Labor Organization (1981) adopted the Workers with Family Responsibilities Convention (No. 156), which seeks to promote policies to reduce work-family conflict and combat the labor market discrimination resulting from family responsibilities. Today, while far from meeting demand, many examples exist from around the world of governments, trade unions

and employers' organizations actively working at the policy level to promote and improve workers' access to childcare.

Many examples also exist of actors taking action at the workplace, adopting programs to help workers cope with their childcare responsibilities. For instance, the experience of Nordic countries could present a good model for countries that understand the need and strive to provide public childcare centers as a welfare service. Due to the increase of women's participation in the labor force, early childhood care became part of the labor market strategy and family policy of the Nordic countries. As a result, many children day-care centers are established in public institutions which enabled the countries to ensure gender economic equality (Karila, 2012).

The report of Un Women (2017) also stated, Sweden and Germany have been a leader in providing public child care service for all children, independent of their parents' employment status. They have guaranteed a slot at a day care facility for children in between six months to 12 months of age hoping to boost female employment. And also, the Nordic early childhood education and care policies have commonalities in the sense that they are founded upon the principle of sharing child care responsibility between families and public institutions.

The government of Ethiopia is also following such a model by sharing the female staff load of child care by establishing a day care service. Other African countries have also reached at consensus regarding importance of early childhood care and education (ECCE) services to African children. The African Common Position (Organization of African Unity 2001, para. 6, cited in Aidoo, 2008) stated the position of Africa towards children. Besides, Agenda 2063, a document composed of development initiatives adopted by the African Union on January 2015, stated that there is an agreement among all African countries to avail and create access to quality early childhood development and education services (FDRE,2020).

Ethiopia has ratified international and regional conventions on the rights of women and children. These are the international Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) 1981, the international Convention on the Rights of the Child (CRC), 1991, international convention on Worst Forms of Child Labor, 1999 and African Charter on the Rights and Welfare of the Child (ACRWC), 2002. For instance, CEDAW, Article 11 clearly indicates "...Women are to be provided with the right to social security on the same basis as men, and the right to protection of health and safety at work, including in relation to reproduction. Specific measures are to be taken to prevent discrimination against women in

employment on the basis of marriage, or maternity”. Moreover, CRC under Article 3 states ensuring the child such protection and care is necessary for his or her well-being, taking into account the rights and duties of his or her parents, legal guardians, or other individuals legally responsible for him or her, and, to this end, shall take all appropriate legislative and administrative measures.

Recently, in 2017, Ethiopia has formulated a national child policy. One of the areas of emphasis of the child policy is taking all the necessary measures to ensure the survival and development of children including creating conducive environment for the provision of proper care and support for children with special needs (FDRE,2017).

Despite presence of all these policy, legal and institutional frameworks, absence of work life balance is one of the factors that still affect women’s economic empowerment in Ethiopia. In the recent decades, the number of women joining the workforce in Ethiopia has increased (World Bank, 2016). However, women’s access to public jobs has made them sandwiched between responsibility of work and the pressure of family responsibilities. Especially, women are not able to care for their infants and young children due to presence of long and rigid formal working hours, inflexible working requirements and inconsiderate supervisors (Hiwot, 2019).

2.2 Arrangements of Child Care center

There are different arrangements of childcare; Family care is one them. Families, especially women are responsible for provision of the basic needs and the environment that the child needs for its healthy growth. For any parent childcare starts just after the birth of the child. Maternity leave granted as one of mechanisms to facilitate childcare for working parents in many countries. After the maternity leave ends, up until the child goes to school, there may come a time and condition which might force the parents to look for help from grandparents or other relatives which is usually at no cost almost in all societies. When the child starts attending school, care provision still continues. That is, a child no more need care arrangements. In fact, this stage is subjective to any given society and is under the influence of culture and context (Kriviradeva, 2014).

In developing countries, childcare centres may take children from 3 months to school age .Besides, the main actor and provider of the center are families. At birth, usually the round-the-clock care needed is provided by the family and a baby is not normally left with no one

responsible. Someone has to ensure their basic needs are met (fed, washed, clothed, housed, and so on) as well as to provide a loving and stimulating environment that will foster social and psychological development (Hein and Cassirer, 2010).

As Birhane (2020) & Frehiwot (2021) stated, a child can be in the care of a family member or someone from outside the family. Accordingly, there are 3 main types of none-family day care services namely: Daycare in the child's home, in which someone called a nanny or babysitter, who is an employee of the parents and living in the child's home, cares for children in their own home. It is private care for children of all ages during the daytime usually in their own home. Child-minders are self-employed and they earn income while looking after their child. Day care given by childcare centres- given at the institutional level. Hence child care service which is organized and given by the institutional level will be the focus area of this study. The center is recently guaranteed by national policies, especially in developing countries.

The provision of affordable and reliable day care services is a potentially important policy lever for reducing gender inequality, improving health and socioeconomic well-being, and empowering women. For mothers, access to day care might reduce barriers to labour force entry and generate economic opportunities, which is one of the building blocks for empowerment. Additionally, access to day care might improve women's mental health. For example, women report that they perform domestic duties out of compulsion rather than choice. Access to day care could alleviate time poverty of women lower stress levels, and improve mental health and subjective well-being by reducing the conflicting demands on women's time and increasing women's autonomy. Moreover, it may also benefit children and adolescents by removing the responsibility of caring for younger children, which limits educational opportunities (Harper, 2018),

Under-nutrition and illiteracy remain challenges, and day care programs could also improve children's health and development outcomes through the provision of meals and learning programs. The services can have a positive influence on children's development and school readiness by providing valuable educational and social experience (Gilbert, 2013).

2.3 Perspectives of Child Care Center

There are different perspectives to child care which are stipulated by different Authors. Child care can be regarded as a service to parents (parents' perspective); a way of enhancing children's development (development perspective); the government or regulatory perspective; the provider and staff perspectives (Huntsman, 2008, Scarr, 1998). Furthermore, the primary function of a daycare center is to provide a safe and secure environment with quality caregivers, so that parents have the peace of mind of knowing their children are safe while they work. As the number of mothers of very young children entering the workforce grew, so did the concern about the effects of non-maternal care on children (Huntsman, 2008). The late 1970's was the time that researchers recognized the quality of child care varied widely, and that there was evidence of an association between low quality care and risk on the healthy development of the child (Ibid).

2.4 . Components of Child Care Quality

In recent decades, early childhood care services for children under 3 have become a matter of serious public concern. Affordable and good-quality day care services may improve the reconciliation of work and family life and thus, foster labour market participation and gender equality (European Commission, 2014).

As Megalonidou (2020) observed, the level of quality in day care centres has been shown to have significant implications for children's immediate and long-term development. As Berk (2009) suggests, the quality of child care during the first 3 years of life can impact cognitive skills, language, school readiness, social and emotional development, and resiliency to life stress.

Many findings have shown that the need to assess and enhance the quality of day care centres. There is broad acceptance that quality in childcare services can be addressed by examining two commonly accepted components structure and process (Howes and Rubenstein, 1983). According to the findings of the study of (Cassel, McNamara et al, 2007), finding affordable and good quality childcare center becomes a huge challenge for low income and single mothers, in spite of the availability. In choosing a childcare center the quality, availability and, affordability are the main concern of most working parents. Although this is what these working parents aspire to find in one childcare center, but now a days they are left with no choice for such services. This is mainly due to the fact that the cost of childcare centers are exceeding the income they generate particularly for those single, low income mothers and, parents that have more than one child. According to the research undertaken by Minton and

Durham(2013), lack of affordable and quality childcare hinders many working mothers not to return to work.

1. Structural Quality Component

Structural Quality refers to components such as physical environment (buildings, space and materials), child–staff ratios, staff education and training, and curriculum that are more easily measurable in determining quality (OECD 2006). Quality focuses on the nature of interactions between the children and teachers, among children, and among adults-teachers, parents, staff, and on the nature of leadership and pedagogy.

Examples of structural quality indicators include child to teacher ratio, group size, caregiver education, program enrollment, and caregiver salaries and benefits. The indicators are typically easier to measure than are those representing process quality. Additionally, structural variables are often subject to regulatory agencies that set guidelines and limits for what constitutes appropriate caregiving environment. Despite research indicating positive developmental outcomes for children receiving high-quality care and increasing numbers of young children in out-of-home care, daycare centers are often plagued with poor structural and process quality, and the least prepared and lowest compensated workforce. Further, whereas the situation is worse in developing countries (OECD, 2015).

2. Process Quality Component

Process quality component is typically defined as the interactions and activities that happen on a day-to-day basis that has the potential to enhance children’s cognitive, physical, and social-emotional development. Using a slightly more narrow definition, Cassidy and her colleagues contend that process quality requires human interaction (Hestenes, 2005). This definition differs somewhat from others who include interactions with materials as part of process quality. Careful observations provide information about children`s social interactions with adults and with other children`s` as well as their activities with toys and other items (Berk,2009). That is positive care giving is a measure of care quality that is based on direct observations of caregiver behaviour. Though structural features of child care indicators of child care quality are easy to assess, observations of each child care setting provide more detailed information about day-to-day social interactions and activities (NICHD, 2006).

In conclusion, it can be said that regulated (structural) and process features of child care quality are related to each other. The more structural features of care that are regulated by public agencies or by states are indirect indicators of the quality of the child`s experiences in care. Process features, measured through careful observation of children in the child care setting, provide more direct information about the child`s experience in care. In general, the structure of child care (structural features) predicts the process features or the children`s daily experiences of child care (Slot, Leseman & et al, 2015).

3. Service Quality

As childcare service provides, the primary of focus of every center should to provide the children there with utmost quality care and education. When it comes to parents, they obviously want the best for their children. Here are some ways you can enhance the level of customer satisfaction at your day care center (Hestenes, 2005).

Building the trust of customers toward your center will probably be one of the biggest challenges as parents will always seek the best option for their children. In order to measure and improve your level of customer satisfaction, it is important to communicate with parents routinely to hear their feedback/concerns. Understanding what they think of your service and what exactly they want is crucial for providing excellent customer service. Having the opinions of parents integrated into your business will always be reflected positively by your customers.

Having meetings with parents to discuss the progress and growth of a child, updating them on schedule changes, and daily activities can build a strong relationship with the parents. It is important to keep them in the loop by maintaining consistent communication, informing and updating parents so they can feel comfortable.

The team is the foundation of your day care and if you plan on delivering excellent customer service then getting your staff onboard is a must-have. Having high ratio of satisfied customers depends on the infrastructure and staff at your center. Managers need have a procedure in place for checking up on the processes for training staff. When hiring, ensure candidates have the right certifications and meet all the qualifications, experience of working with children and the know-hows of handling different types of children. Your staff should have a positive attitude in order to gain and build trust of parents. The team should also have a say to how the day care should be run and come up with different strategies to plan for children (OECD 2006).

The ambiance of your day care center needs to be welcoming for children and parents, giving off a happy presence. Ensuring the center is clean and presentable, having a maintenance procedure is important. Choose the colour theme and have the right resources (books, notebooks, toys, pencils, etc.). When parents see that their child is healthy and happy with your setting, they will be satisfied enough to retain their child at your center. Providing an environment which is comfortable, safe, healthy and appealing should be monitored regularly by those managing the center. Remember the saying “you are a product of your own environment” when designing and maintaining your day care environment. With these tips, there is without a doubt that your day care will see improvements (OECD 2006). Not only will your day care improve internally but you will also see increased customer satisfaction arise from these positive changes. Remember it is more expensive to attract a new customer/parent than to retain one.

2.5. Significance of Childcare Service

This part discusses the significance of the accessibility of child day care centres at working place for working parents and its contribution to gender equality, women's empowerment, and the national economy.

2.5.1. Working Parent

In most countries, looking after children was traditionally considered to be a responsibility of families alone mainly the women. It was not an issue of concern to trade unions or employers. As for governments, childcare was often regarded as mainly a matter of providing welfare assistance for poor families (Hein & Cessaier, 2010). Working parent can use parental time to fill in the childcare gap by, for example, working at different times in the case of dual parent households or reducing their work activity (typically that of the mother) and consequently their income. Or they can leave the child with poor-quality care or no care at all. Whatever their choice, the child will probably suffer, as will the parents. The consequences of lack of access to affordable, good-quality childcare go beyond the welfare of individual children and their families and affect the social and economic development of the whole society.

2.5.2. Promoting Gender Equality

As Sikiric (2021) noted, traditional gender roles affect a greater burden of unpaid care work on women than men. Child care reduces gender inequality in the labour market. According to

Gender Equality Index (2017) women are still disproportionately burdened by household work and childcare. The reports further discussed the burden of women with unpaid work eliminates equal opportunities in paid work, leaving women unable to reconcile family and professional life. UNDP (2009) stated, the unequal position and exclusion from the labour market, women become more financially dependent on men, which in turn restricted their ability to control their own lives, creating a hierarchical relationship of subordination between equally valuable social groups. The reality has been differently shown in spatial distribution as per the report from Unwoman (2019) revealed, in many developing countries decent employment opportunities have no progress due to the fact that the failed structural transformations in the economy. As a result of this, the labour force participation rates among women with one constraint being women's disproportionate share of unpaid care and domestic work.

Moreover, gender inequalities resulted in the labour market, and significant gaps in access to social protection also have an impact on income and time poverty among women. Unwoman, (2019, pp 15), coined "*without affordable childcare services, women often struggle to gain access to decent work, which would allow them to secure social protection entitlements through employment*". Additionally, the reports stated the poverty rates are different in women and men and that women are particularly vulnerable to poverty between the ages of 25 and 34 years. 125 women between the ages of 25 and 34 years for every 100 men in the globe are in the same age group living in extreme poverty. This happened due to according to the same reports, the life course of family formation and child-rearing, during which women and their families face increased expenses associated with having children, while also experiencing time constraints on engaging in paid work. The pattern is slightly similar globally, but the depth and duration of the gender gaps vary between regions.

In Latin America and the Caribbean and sub-Saharan Africa Unwomen (2019), according to the same report, the high variation of time spent between women and men in 24 hours, that the data has taken from 88 countries and areas indicate that women on average spend 18 per cent of the day on unpaid care and domestic work, whereas men allocate 7 per cent of the day to the same activities of which mostly women undertake time taking activities are childcare responsibilities. Hein & Cessaire (2010) have observed, as women are often the parent with major responsibility for children, lack of access to affordable, reliable childcare can be a

major factor in gender inequality, undermining women's ability to work and their opportunities for employment. In the European Union, childcare is recognized as a critical factor in meeting its goal of full employment and a concrete way of eliminating barriers to women's participation in the labour market. Hence, where governments support the costs of widely available childcare, these countries tend to have higher rates of women's labor force participation and fertility and lower gender inequality, as is particularly the case in Nordic countries. Childcare can help parents, particularly mothers, ensure continuity in their careers. If they are compelled to resign for lack of affordable, quality childcare and do not work at all for a long period, they tend to have difficulty re-entering work, particularly at the same level as they were when they left (Stephanie LaRae, 2010 & Hein & etal, 2010).

Another crucial point raised countries where girls continue to be removed from school to look after younger siblings, lack of childcare can be a factor in the lower educational level of girls. This is shown that childcare is particularly useful for women, this does not mean that it is basically a women's issue: the whole family benefits if women have a fairer deal on the labor market. Men also benefit from childcare support and they also use and appreciate it when available (Hein & Cessaire, 2010).

2.5.3. National Economy Context

Childcare not only increases women's access to employment, but also increases employment opportunities in childcare, and contributes to job creation in the service sector to replace some of the unpaid household work such as cleaning and food preparation. Omar & Ahmed (2014) & Hein & etal (2010) studied, one estimate of the job creation effects of women's employment is that ten jobs are created for every hundred additional women in work. Indeed, in most industrialized countries, there has been an increase in employment in childcare.

Moreover, when the accessible and affordable childcare services that can help parents who wants to work do so, promoting economic growth in the short term. It further elaborated, the study using data from Maryland, finds that for every 100 additional child care slots, the women labor force participation rate increases by 0.3 percentage points. And also, The child care industry is an important economic driver within states. In fact, throughout the country, child care has an economic impact of \$99.3 billion (<http://www.earlylearningpolicygroup.com>), Accessed by Researcher, 14/1/2023.

According to Doshi (2022), Childcare service is a critical infrastructure that supports working families, businesses, and the economy. He has studied on economic benefit of child care service that the expenditure on childcare draws on local resources and labor, generating local and regional economic growth. An economic analysis by Warner found that for every \$1 directly spent on childcare, the state-wide economic impact was double. These economic linkages make cities attractive to a diverse range of individuals, especially parents.

Chamussy (2013) observed the economic impact of child care matters because it helps drive local economies. When parents can access child care, they are more likely to enter the workforce and stay employed. Access to affordable child care also supports parents who seek additional education or job training, which can result in higher earnings over an individual's lifetime. There's the impact on children who have access to quality child care that supports their healthy development.

2.6 International Legal Instruments

Labour market policies and conventions are important to provide essential protection to the carers to whom they apply, and to their children. Labor market protection for parenthood sends a powerful signal that the state recognizes parents' rights to care for their children and children's rights to be cared for. Childcare has been an issue in global and national policy arenas for at least years (Williams,2010).

The UN on its declaration on the article (CEDAW), article 112(c) stated that, the UN member countries have signed an agreement that they shall take actions that are favorable to provide social support services, so as to enable working parents to undertake their family and work responsibilities in combination with their public activities. And this is to be achieved through network of childcare facilities which the member countries pledged to promote and establish and develop. According to ILO (1981), on its convention on Women with family responsibility has shown its concern on the issue by stating that, its member countries shall establish, promote and develop community service such as childcare and family services and facilities in cooperation with public and private organizations.

Likewise, SDG target relating to unpaid care, a key target for the fifth Sustainable Development Goal 5 which calls for gender equality and women and girls' empowerment is to 'recognize and

value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate (UNDP,2015). However, despite some improvements relating to efforts to record and value the time that women spend on unpaid care and to recognize the constraints that women face, governments are still failing to create solutions that align well with the realities of women's lives.

2.6.1 Legal and Policy Frameworks of Ethiopia on Child care service

Ethiopia's commitment to gender equality and women's empowerment is reflected in the legal, policy frameworks and in the ratification of international conventions. Accordingly, as member country to both the UN and ILO, Ethiopia, has declared a law that comply with the conventions of both international institutions. Several legislative and procedural measures have been taken to protect families and women's rights at work. To mention a few, the GoE enacted new legislation in 2017 (Civil Servants Proclamation No. 1064/2017) that guarantees more favorable working conditions for civil servants, particularly women.

Recently, the Ethiopian government has taken initiative to enact a law that could enable women's economic empowerment and their access to quality job by providing for establishment of child day-care centers in each and every public institution. This responsibility of public organizations is enshrined under Article 48 (6) of the Federal Civil Servants' Proclamation No. 1046/2017 which runs as *“Any government institution shall establish a nursery where female civil servants could breast-feed and take care of their babies; the details of its implementation shall be determined by directives to be issued by the appropriate government institution.”*

According to statistics has got from CSC (2020-2021), there are a total of 1,817 public service institutions. As per the MoWYC's directive for child day-care centers' establishment, every public service institution needs to have one child day-care center. This provision requires the number of child day-care centers needed to be established in the public sector to be equal with the number of the public service institutions. Nonetheless, the directive has also stipulated that civil service institutions that share the same building or are adjacently located could share the same child day-care center. In such scenarios, the number of child day-care centers could be less than the number of public service institutions operating all over the country.

According to the child day-care service directive of the former MoWCY (2018), the regulated staff-child ratio for Ethiopian public institutions' child-day-care centers is 1:5. That is, one child care worker will be assigned to take care of five children who are within 4 months-3 years age category. Therefore, favorability of this care-giver-child ratio is rated as moderate as per the OECD's standard.

On top of that, domestic policy and legal frameworks are also laid down in order to enable contextualized implementation of the international and regional instruments ratified by Ethiopia. The first domestic legal instrument that gives recognition to the social, cultural, political and economic problems continually faced by Ethiopian women was the Ethiopian women's policy of 1993. The policy provided for strategies and directions that should be followed to solve women's multifarious problems. The strategies were expected to create conducive environment that facilitates all rounded equality of women with their male counterparts. Among others, the policy states that a women's affairs department should be established in each government institution and work on organizing women and promoting their interests. Besides, the policy stipulated that, government shall take all appropriate measures, including legislation to ensure respect of;

- a. The right of women to work in the civil service in any capacity they prove to be competent for,
- b. The right of women to equal pay for equal work, and Women's right to perform public functions including decision making in their local communities as well as at the national level.

Due to the natural interdependence between women's rights and the rights of the child, article 36 of the constitution is dedicated to provisions on rights of the child. Accordingly, *every child has the right to life, name, and nationality, to know and be cared for by his/her parents or legal guardians, be free from any form of corporeal punishment and exploitative practices.* The constitution goes further to state that “*in all actions concerning children undertaken by public and private welfare institutions, courts of law, administrative authorities or legislative bodies, the primary consideration shall be the best interest of the child.*”

Recently, in 2017, Ethiopia has formulated a national child policy. One of the areas of emphasis of the child policy is taking all the necessary measures to ensure the survival and development of

children including creating favourable environment for the provision of proper care and support for children with special needs. The policy also aims to ensure economic empowerment of parents and guardians, by especially setting conducive working environment for mothers, in their workplace to enable them give the necessary love and care for their children's comprehensive development.

The policy calls for involvement of a broad range of stakeholders namely government bodies, the private sector, religious institutions, indigenous charities and societies, regional and international development partners, family and community structures. It has also specified the role expected from each stakeholder in order to ensure effective implementation of the national child policy. The responsibility to monitor and evaluate implementation of the national child policy is placed within the mandate of the MoWCY. This ministry together with its regional affiliated bureaus is expected to monitor and evaluate the policy's implementation based on pre-defined policy implementation strategy, action plan, performance indicators and by organizing annual meetings of all stakeholders.

Taking the above stated policy and legal foundations as an umbrella, Proclamation No.1097/2018, a proclamation to provide for the definition of the powers and duties of the executive organs of the federal government, under its article 28, stated that the MoWCY has mandate to;

- a. Design strategies to ensure that government and private actors carry out their obligations to guarantee that children are beneficiaries of the development of the country and follow up implementation of same.
- b. Coordinate actions of all stakeholders to protect the rights and well-being of children.
- c. Devise means for the proper application of women's right to affirmative action guaranteed at the national level and follow up the implementation of same.

Despite presence of all these policy, legal and institutional frameworks, absence of work life balance is one of the factors that still affect women's economic empowerment in Ethiopia. In the recent decades, the number of women joining the workforce in Ethiopia has increased (World Bank, 2016). However, women's access to public jobs has made them sandwiched between responsibility of work and the pressure of family responsibilities. Especially, women are not able

to care for their infants and young children due to presence of long and rigid formal working hours, inflexible working requirements and inconsiderate supervisors (Samman, Presler-Marshall & Jones 2016, Hiwot, 2006).

In 2010, Ethiopia designed an ECDE policy framework via collaboration of three ministries namely Ministry of Education, Ministry of Health & Ministry of Women, children and youth Affairs (Cuninghame et al.,2018). In December 2019, that framework get revised and developed in to a full-fledged national early childhood growth, development, care and education (ECGDCE) policy. This policy covers the care and education provided to children starting from pre-birth up to seven years of age. The care aspect of the policy emphasizes on children between pre-birth and 3 years of age. The first 3 years after birth are very important because, it is at this stage that the child's brain grows very rapidly. Thus, due attention should be given to this stage in order to nurture healthy, productive, capable, ethical, and responsible citizens (Mustard, 2010). Hence, parents and care givers should be aware that the way they handle the early years of their children has a lasting impact on their future personality and success.

Based on the proclamation, all government-funded institutions must provide onsite childcare services. Consequently, 385 government institutions, including Ministry of Women and Social Affairs, have started to provide daycare services within their compounds. In addition, the data are taken from (MoWSA, 2022) annual report, CDCC are given services for 5685 Children at a national level. Furthermore, child daycare centers have started to provide service not only in government but also in private, and community care. These figures show there is a huge gap between demand and supply according to the population number of working mothers' children who are below 3 years and mothers.

2.7 Social protection and Child care service

Social protection policies have the potential to mitigate the negative impacts of caring on women, particularly those who lack access to labor market protection and are otherwise vulnerable (Samman,Presler,Jones,etal,2016). According to the study on the Women's work, Mothers, Children and the global childcare crises in 2016, Current policies however, while offering necessary income supports, largely assume that 'families will provide the care required'. As a result, despite the fact that a growing number of programs have begun to recognize the care

that women give, very few offer solutions for the care-related time constraints that women face. Social protection has targeted with in different circumstances that focused on providing care services for young children. UNICEF (2019), a care perspective, however, recent attention to ECCE has centered almost entirely around the nutrition and health of infants and toddlers and the school-readiness of older preschoolers, with the aim of improving their future economic output.

2.8 Theoretical Perspectives

This part describes some of feminist ideas concerning care and their effect on understandings of gender divisions. It also discussing care's unique economic properties and its role in constituting social and economic relations. Moreover, the gendered and unequal patterns of care provision are discussed how is structured by inequalities embedded in economic and other relations.

2.8. 1 Feminist Perspectives on Child Care: theory and Practice

Feminist perspectives have common framework which figure out the world as a male-dominated, patriarchal system where women and their contributions are underacknowledged, and where women are directly and indirectly stride towards positions of lesser societal power (Himmelweit and Plomien:2014). They further elaborate Care is a key concern because it is gendered activity and its provision has important implications for what men and women can do. It has also a consequence for the functioning of economies and the wellbeing of societies. As a result of the high profile that care and gender equality have attained in the recent years, policy remains underdeveloped and the importance of care is often inadequately reflected in mainstream policy. According to UN women progress Report, (2015-16), traditionally, care is gendered unpaid care system has never worked for everyone, and has never covered all care needs and has always been backed up by other forms of care. The most visibility of the care system is child care which is the most crucial and time taking which is seen the unpaid work and encompasses all non-remunerated job activities, and it is reasonable to conclude that it is socially unrecognized. Also, this unrecognized extends to the economy where unpaid care work entails a systemic transfer of hidden subsidies to the rest of the economy however unrecognized, causing a systematic time tax on women throughout their life cycle. The level of economic development influences not only the duration but also the distribution of time between paid and unpaid work and the allocation of unpaid time among various activities.

On top of that, Matello (2019) studied, the existence of extra family child care asserts that mothering doesn't have to be a women's exclusive full-time occupation and that children can be nurtured effectively by more than one person and in nonexclusive relationships. Furthermore, on the outside the home with a full-time career, and a mother who, does the child-rearing stated about the existence of extra family care and motherhoods, mothers without sacrificing or subordinating other valued dimensions of themselves the all or nothing approach to motherhood is challenged. On the other side, (Burman&Stacey,2010) discussed feminists have largely focused on challenging women's positions in relation to children, rather than on feminist approaches to children and childhood. The care characteristics and its interdependence with the labor market has policy implications are analyzed.

According to Himmelweit and Plomien (2014) focusing on the care strategy that reduces gender inequalities entail a redistribution of care work: from the unpaid to the paid economy, from market to state sector, from women to men. They stated as "...The redistribution of care from unpaid to the paid economy, from the market to the public sector and from women to men is not addressed. As feminists have shown, unless these issues are addressed the provision of care will remain a source of gender and other inequalities.

2.8.2 Feminism Institutionalism

The theory of institutionalism is an approach of the study which focuses on the constraining and enabling effects of formal and informal rules on the behaviour of individuals and groups in institutions. It has a different thought, feminist institutionalism is the newly emerged approach. For Meyer(1997) Feminist institutionalism looks at "*how gender norms operate within institutions and how institutional processes construct and maintain gender power dynamics*". Moreover, feminist institutionalisms see females as crucial actors in initiating change within these institutions. Having more women in these institutions acts as a resource for other women to feel more comfortable and operate better within these positions.

According to Bogaards (2022), the approaches to feminist institutionalism tend to the formal and informal institutions, focusing on the explanation of institutions on the rules, norms, and outcomes of formal and informal institutions. A common view is that Institutions matter

profoundly in the production and reproduction of gender inequalities. The main focusing area of this study is child care service in government institutions which is categorized as formal institution. The formal institutions are characterized by rules and procedures are generally defined as written-down rules and laws that are created, communicated and enforced through channels widely accepted as official and violations of these institutions are legally sanctioned. Hence, child care service government institution is guided by defined policies, proclamations and rules. The approaches of feminist institutionalism discussed with how the formal and informal institutions (the policies and rules) affect the growth of female participation in the labor market, are reasons for increased interest in the balance between work and family.

The approaches systematically link to the institutional child care service to change dynamics, power relations of the labor force using laws, policies and other formal structure. Institutional feminists pay particular attention to both endogenous sources of institutional change and stasis including dynamics of institutional power relations, resistance, and reproduction (Mackay, Kenny & et al, 2010). At the same time, they are alert to external change drivers and are especially attentive to the impact of changes in the wider gender order within institutional environments (Waylen, 2007, 2011). On the critical questions of the nature and processes of institutional transformation (and stability), feminist approaches to institutionalism bring a number of insights: These insights increase the capacity of 'new' institutionalists to model causality; gendering new institutionalism in this respect would contribute further important insights into the dynamics of agency and change (Lovenduski, 2011; Waylen, 2011).

The notion of children as public goods fits the institutional perspective. In such an institutional-feminist context, it is possible to restructure care obligations as collective rather than individual, and as universal rather than targeted. This may in turn lead to the new social contract with redefined gender relations. In general terms, the feminist perspective asserts that the institutional child care service changes and enhances working parents' productivity, contributes to gender equality and women empowerment, and social protection. Moreover, it changes the power relations of the labor force using laws, policies, and other formal structures.

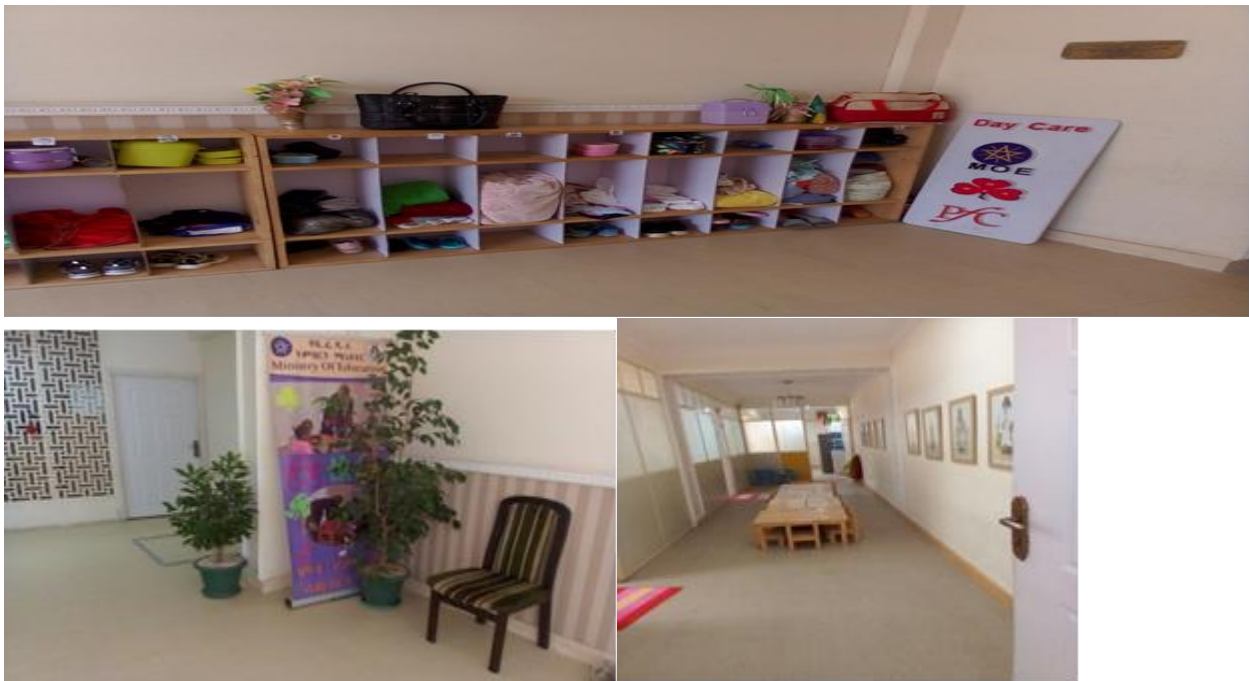
CHAPTER THREE: Research Methodology

Introduction

This chapter briefly describes the research methodology used in the study. The chapter is divided into six sections. The section that comes immediately after the introductory section presents the type and method of the research of the study, followed by the data source and data collection instruments. The study area and study participant, appropriate tools and techniques to collect relevant data analysis and ethical consideration were discussed.

3.1 . Description of the study area

The study undertaken included Ministry of Education and the Ministry of Health. The study consisted of 23 caregivers, working mothers, managers (focal persons of the center), administrative staff, and higher officials. The study site was selected with purposive sampling, primarily, the researcher assumes that they have enough experience while they have established and implemented the child daycare center for the last four years. Moreover, these institutions were chosen as best performers that the researcher wanted to study in the area.



Source: Photo taken by researcher, May27, 2022 Daycare Center in MoE



Source: Photo taken by Researcher: May 22/2022 Parts of Daycare in MoH

3.2. Research design

The study relied on a qualitative cross-case and exploratory research design. (Miles and Huberman, 1994) note that a primary task of qualitative research is “to explicate the ways people in particular settings come to understand, account for, take action, and otherwise manage their day-to-day situations” and that qualitative data “often have been advocated as the best strategy for discovery, exploring a new area.

Cross-case analysis involves comparing patterns across cases to increase the potential for generalizability and to enhance understanding of the relationship between context and individual characteristics and behavior. In addition, in cross sectional research, the researcher observes at one point in time and the research can be exploratory (Kreuger & Neuman, 2006). Hence, case narratives were also introduced to give detailed experiences on caregivers and parents in child day care center while getting the type of care service at the center.

Under the method of the researcher can take a cross case study strategy applied for the purpose of this study. Further, it is a very popular and involves a careful and complete observation of the contribution and challenges of the child care service center in Ministry of Education and Health as government initiative project. Additionally, the great strength of the case study method is that it allows the researcher to concentrate on a specific situation and to identify various interactive processes at work.

Key informants' interview was employed to bring expert opinion from selected government offices were identified and interviewed on their experiences working with the childcare sector. The interview guides were translated from English into Amharic for participants of respondents and key informants by the researcher and the interview was held in Amharic language. The data collected was analyzed in line with the study objectives. Verbatim quotes were used during data presentation to represent the voices of the informants.

Moreover, academic literature was studied to understand how the scholars have attempted correlate and quantify the role of child day care center in supporting development of gender equality and child development to leverage government policies.

3.3. Sampling Techniques

3.3.1. Selection of Study sites

The study selected two child day care centers (MOE & MOH) which are found in Addis Ababa were chosen as target to assess the implementation of Child Day Care Centers to study the contribution and challenges of child care service. The researcher selected the two ministries because they were the starters in having child care center from among the other ministerial offices. The researcher also purposively chooses Addis Ababa because currently most of the workplace child daycare centers are established in many governments' office. The researcher selected the two federal offices based on the fact that firstly both sectors have the leading role in establishing child daycare centers and the researcher assumes that both are responsible to implement ECDE policy in Ethiopia. And also, the on-site childcare centers are established after the establishment of 1064/2017 proclamation announcement and have experience in implementing the services (MOWCA, 2018).

3.2.2 Selection of Study participants

The selection of the sample considered the research questions which need to be answered and been crucial. And then the study population was comprised of working mothers, center managers, and higher officials as key informant interviews. During the selection of participants for the interview, a purposive and availability sampling method was made in this study on the convenience and relevance of their participation. For Creswell (2014), purposive sampling (also known as judgment, selective or subjective sampling) is a sampling technique in which the researcher relies on his or her own judgment when choosing members of a population to participate in the study.

The initial sampling consisted of 10 respondents of working mothers who were service users at the center. since it is considered representative and inclusive in the study area. According to Collis & Hussey (2003), the sampling population is considered representative and inclusive in the quality of the demographic. The researcher, however, was able to get 6 participants due to the fact working mothers from the Ministry of Health didn't bring their children to the center. Accordingly, six working mothers were selected (5 from the Ministry of Education and 1 from the Ministry of Health). Furthermore, the main targeted participants of the study are working mothers as the study focused on the contribution and challenges of the service users, and addressed the research questions of the study. In addition, six caregivers were selected from two study sites and they were recruited for in-depth interviews. Daycare managers/focal points were interviewed from the selected study sites they were also selected using purposive and availability methods.

Four key informants were also purposively selected for interviews based on their work with child day care services and they were responsible for policy and planning issues on the research objectives (the Ministry of women and Social Affairs, Ministry of Finance, Ministry of Planning and development, and Federal Civil Service Commission.

Moreover, the researcher facilitated Focus Group Discussion at a place where the study site and agreed to form a group and discuss in detail the questions that would be given by the interviewer. To do so, the study site is not convenient for group discussion since the sites are located at

different places, and the researcher was not able to implement group discussions for the entire respondents.

Therefore, the researcher decided to conduct the discussion in the study site that grouped Five participants who were working in administrative staff were selected and employed discussion from the Ministry of Health, the researcher used a moderator and recorded data. The participants were selected with availability and purposive technique and they were working mothers who were service users at a service center.

3.3 Data Source and Tools

Data collected from both primary and secondary data sources. The primary data was mainly collected from the target participants which consists of working mothers, caregivers, managers and key informants through interview and discussion. Besides, secondary source information was used, published and unpublished documents, books policy documents, progress reports, National child day care Directives were reviewed and used in the study. Furthermore, Observation was employed for issues that require special attention. The researcher used the following different data collection tools which are in-depth interview, FGD, key informant interviews and observation.

3.3.1 In-depth Interview

In-depth interviews are a qualitative research collection method that allows for the collection of information about the behavior, attitude, and perception of the interviewees. It is also the most appropriate data collection technique for case study research (Yin,2009). Accordingly, the researcher found that the total number of service users within the study site from Ministry of education was twenty-five of which five of the participants was the services users of the organization for one year whereas the researcher selected 1 service user using purposive and availability methods. From the two study sites 6 employees (working mothers) were invited to take part in the interview using the purposive and availability method. It was decided to include such number of participants in order to gain in-depth information on how child day care service play a significance role in helping working mothers for their development and the implementation of the guideline. Besides, the researcher found 7 care givers in the study site of

which 6 Caregivers were selected to gain in-depth information on their specific experience of the service given in the center.

Additionally, the day care center was coordinated by focal person and 2 persons that were assigned by the researcher to conduct the in-depth interview on the overall coordination within the study site. The interview was conducted in the month of May 2022 and the researcher used 20-40 minutes. All participants were informed about the purpose of the interview before they share their idea on the issue. The researcher recorded and taking notes all interviews.

However, the data collection was completed there were different challenges faced by the researcher. especially, in Ministry of Health, the researcher missed the service users during the data collection time. There were also shows the challenge of unwillingness. Only one was interviewed the rest four service users remained to provide information. The researcher tried to meet the service users (working mothers) however they were missed in the interview.

3.3.2 Focus Group Discussion (FGD)

The researcher employed FGD which can involve gathering people from similar backgrounds or experiences together to discuss a specific topic of interest. It is a form of qualitative research where questions are asked about their perceptions attitudes, beliefs, opinions, or ideas. In a focus group, discussion participants are free to talk with other group members; unlike other research methods, it encourages discussions with other participants. Hence, the discussion was about the service quality of childcare center, practice, challenges, and measures to take improve the service. Accordingly, one FGD session was conducted which constituted 5 participants from administrative staff of Ministry of Health. The participants have got briefing before starting the discussion to conduct the discussion using appropriate guidance. The discussion was lasted for the range of 40-60 minutes. The data were collected in May/2022.

3.3.3 Key Informant Interview

Key informants were selected on the bases of their expert's knowledge and their interaction with child care services and directly or indirectly the policy implementer on Women empowerment and child development. A total four key informant interviews were conducted with purposely selected higher officials from Ministry of Women and Social Affairs, Ministry of Finance,

Ministry of Planning and Development and Civil Service Commission. The interview lasted 20 - 30 minutes. The interview was conducted in the month of May 2022. All of the interviews were recorded using tape recorder as well as written notes. The information was disclosed before they share their information. The researcher faced problems during data collection the selected informants were un able to express right things this because the child day care is the new phenomenon some of informants have not enough information on the issues.

3.3.4 Observation

The field observation technique is used as a primary data collection method. The researcher visited the two centers and observed the physical setting of the center, the materials that are provided in the center, attachments of child to caregivers, routine day-to-day activities.

3.3.5 Document analysis

Document analysis is a systematic procedure for reviewing or evaluating documents both printed and electronic material. Like other analytical methods in qualitative research, document analysis requires that data be examined and interpreted in order to elicit meaning, gain understanding, and develop empirical knowledge (Bown,2009). Thus, for this study, relevant documents of the center were reviewed such as websites, brochures, assessment forms, monthly and annual reports, policies, and other relevant documents.

3.4 Data Analysis

The researcher used qualitative data analysis methods. Accordingly, the audio taped and data collected from in depth interview. Key informants' interviews, FGDs. Were transcribed in Amharic while the memory was fresh so as to not to lose crucial data then translated into English. After the interview were translated themes were identified in line with the study objectives. The data was arranged in accordance with the research questions and the themes that emerged. Verbatim quotes were used during data presentation to amplify the voices of the participants and to convey actual meaning intended in the discussions.

As indicated above, the researcher used Non participatory observation to triangulate and the cases which are under investigated. The package of services was observed using prolonged observation to certain the availability of services given in the center. Hence, data brought from persistent observation supported for the analysis of the study.

Furthermore, data from secondary sources were supported for the supplementary of the analysis on which findings are presented by giving codes for participants to maintain certainty.

3.5 Ethical Considerations

The Central feature of social science research ethics is the principle that participants should be fully informed about a research project before they agree to take part (Dawson, 2002). In this study, special emphasis is given to ethics in the data collection process and in the overall research process. The objectives of the study are clearly stated in the proposal and the participants are properly informed about those objectives, the plan of the study is reviewed by the thesis advisor and the Addis Ababa University research format.

Moreover, the data were gathered based on the consent and confidentiality, of the participants. The respondents were informed that the information used only for academic purpose. Furthermore, brief description about the title, purposes and objectives of the study made clear for the concerned body when the data were collected.

CHAPTER FOUR

Data Presentation and Analysis

4.1. Introduction

This chapter discusses the findings of the study are organized and presented from the data collected using different methods, the data keeping the perspective of objectives set on the status of the child-care centers. The chapter consists unit of analysis and the area description. And then a brief description of the respondents was discussed in this section. The findings also concern the current Status and Practices of Child Day Care Centers regarding policy, regulation, and administration implementation of government working place child care service in the Ministry of Education and Ministry of Health. Components of service provisions obtained by child day care services. Finally, the chapter presents major significance and hindering factors of child daycare service.

The data were notified by coding using abbreviations using the first letter as per the nomenclature of the ministry. Based on this, caregivers of the Ministry of Education are coded with MECG and working Mothers are also MEWM, as well as caregivers in the Ministry of Health, are coded MHCG and parents as MHWM. Moreover, several secondary documents have been reviewed and discussed to triangulate the information.

4.2 Unit of Analysis and Area Description

The child daycare centers were the main unit of analysis in this study. The target sites were the child day care centers located in the Ministry of Education and the Ministry of Health. The study consisted of 23 caregivers, working mothers, managers (focal persons of the center), administrative staff, and higher officials. The study site was selected with purposive sampling, primarily, the researcher assumes that they have enough experience while they have established and implemented the child daycare center for the last four years.

4.3 Brief Description of Interview Respondents

This section details characteristics of respondents. The researcher started the work of data collection with taking note starting from personal back ground of the interviewees including their age, education level, marital status, Occupational status. When we look at the education level, 50 percent of respondents holds bachelor degree and other three were below 10th and below 10th grade. In terms of occupational status all respondents were administrative staff who were low states work and low paid staff.

The data has shown, of the respondents of Care givers were female and 70 percent were married the rest 20 and 10 percent were single and divorced. As the table shown above, education status of care givers was below Diploma level. It shows the minimal qualifications for caregivers are lower for child care service. The following tables shown detail profile of respondents.

Table 1 – Demographic Profile of Working Mothers interview participants

Code	Sex	Age	Educational Status	Occupational Status	Marital Status
MEWM-1	F	32	Degree	Secretary	Married
MEWM-2	F	34	Degree	Secretary	Married
MEWM-3	F	27	10+3	Courier	Married
MEWM-4	F	28	Degree	Officer/Expert	Married
MEWM-5	F	32	8	Janitor	Married
MHWM-1	F	24	10+2	General Service	Married

Source: Participants of interview, May 2022.

Note: - Code No represents the code name given to the participants, MEWM1-5 as Ministry of Education Working Mothers, WHWM-1 as Ministry of Health Working Mothers.

Table 2: Demographic Profile of Caregivers Interview Participants

Code	Sex	Age	Educational Status	Marital Status	Work experience	Work Staff Status
MECG-1	F	38	10	Married	4	Not Permanent
MECG-2	F	40	12	Married	4	Not Permanent
MECG-3	F	37	10	Single	4	Not Permanent
MECG-4	F	42	12	Married	4	Not Permanent
MECG-5	F	40	12*1	Married	4	Not Permanent
MHCG-1	F	32	10	Single	4	Permanent

Data Source: Participant Interview, May,2022.

Note: - Code Represents Code No represents the code name given to the participants, MECG 1-5 as Ministry of Education Care Givers, WHCG-1 as Ministry of Health Working Mothers.

Table 3- Profile of Key informants Participants

Code	Sex	Age	Education level	Occupational Status
KIW-1	M	40	Master Degree	Child Right Director
KIF-2	F	58	Master Degree	Treasury Director
KIP-3	M	35	Master Degree	Planning Director
KIC-4	F	43	Master Degree	Women Affairs Director

Source: Interview Informants

Note: Code Represents Code No represents the code name given to the participants, KIW as Ministry of Women and Social Affairs, KIF-2 as Ministry Finance.KIP-3 as Ministry of Planning and Development and KIC-4 as Civil Service Commission.

Table 4- Profile of Administrative Staff FGD Participants

Code	Sex	Age	Education Status	Occupational Status
ADS-1	F	35	Master of Science	Adviser
ADS-2	F	36	Master of Science	Director
ADS-3	M	44	Master of Art	Director
ADS-4	M	34	Master of Art	Director
ADS-5	M	37	Master of Art	Director

Source: Participant Interview, May/2022.

4.3. Current Status and Practices of Child Day Care Centers

4.3.1 Policy, Regulation and Administrative Issues

According to the objective of this study, policy is critical in ensuring the proper functioning of a child care service and setting. In order to implement workable effective policies, it needs to have a complete development strategy and Regulations. Policies provide a legal framework for administrators, and other stakeholders to understand how situations will be handled. On the other hand, administration is the central practices what the policy and regulation indicated to able to manage the program and lead the staff in offering stimulating, enriching and nurturing early learning experiences. Accordingly, this part of analysis describes the status of implementation of policy, regulation and administrative issues on child day care service the country has experienced and also laid down in order to enable contextualized implementation of the international and regional instruments ratified by Ethiopia. As discussed, previous, the former MoWCY enacted the National Child Day care Directive (2018) defines a number of terms which operators of child day care service at government offices.

In an interview made with the Director of the Ministry of Women and Social Affairs, the lack of coordination and cooperation among the different organs for the realization of the rights of children and women and overlapping mandates among stakeholders attributed to the inefficient implementation of policy and other regulations. The Ethiopian government has adopted several policies with the purpose of ensuring that children are given opportunities, services and facilities to develop in a healthy manner pointing out the measures and strategies for the realization of the rights of children. The FDRE constitution ensures the right of women and children. The National

Policy on Ethiopian Women (1993), the National Child Policy (2017) and the recently ratified Early Child Development Child (ECDE) (2019) some of the key policy documents on the rights of women and children.

Ethiopia has ratified the Convention on the Rights of the Child (CRC) and the African Charter on the Rights and Welfare of the Child (ACRWC). As mentioned in the KIW (1) certified, Early Childhood right is becoming the priority of the ECDE policy; however, the main implementers of the policy namely the Ministry of Women and Social Affairs, the Ministry of Education, and the Ministry of Health lack coordination between them. In addition, the Ministry of Women and Social Affairs lacks sufficient resources and the ability to establish coordination at the regional, zonal and Woreda level. As Ministry is the principal coordination mechanism, its limitations are apt to have adverse effects upon the overall implementation of children and women rights.

The key informant from the MoWSA in his own words testified as follows.

“There is lack of adequate budget or financing for ECDE program. Overall, ECDE is poorly implemented both at the policy or strategy level and do not exist at the regional or facility level” KIW (1), May,29,2022.

The research also explored through KII with MoWSA the legal framework on female worker empowerment. Accordingly, the policy measures taken to empower women employees include the revised Civil Service Proclamation 1064/2017.

To certain the above-mentioned, the researcher made an in-depth interview with Women Affairs Director in Civil Service Commission, she replied as follows;

“According to the monitoring and evaluation we have got a few government institutions that have established workplace child daycare. This is because of a lack of commitment, and awareness in organizational culture. Government institutions that want to make the Caregiver structure work should pay attention to realizing the proclamation No1064/2017. There are a number of government institutions that work only on a voluntary basis. They should be accountable for the implementation of the proclamation. Institutions have to take into account the realities of the situation when it comes to building a structure. The

big question, however, is whether the institutions' human resources are trustworthy (4) May,2022

This has shown that there is gap in the implementation of the revised Civil Service Proclamation particularly the mandate given to all government organizations shall establish day care center for female workers. According to the study by Imamura (2015) daycare as an essential public service, requires fairness and equality on top of economic efficiency that needs government attention to implement the policy implementation. He discussed further, different sectors need to coordinate and where appropriate, integrate their policies, services and information. The same finding shows (Birhane:2019) regarding the policy implementation issue, the government hierarchy is difficult to coordinate and monitor the service. This is also discussed by her study, on the challenges that are caused by policy issues and lack of organizational and individual commitment. Most officials believed in the role of the child daycare center to enhance gender development. However, practically they do not take measures in facilitating the establishment. For instance, employment of human power in the capacity of caregiver and specific budget is not allocated.

4.3.1.1 National Child Day Care Directive implementation

The establishment of workplace child daycare is coordinated and supported by MoWSA according to the mandate given to it in the Revised Civil Service Proclamation No.1064/2017. Proclamation No,1064/2017 states: *“Any government institution shall establish a nursery where female civil servants could breast- feed and take care of their babies; the details of its implementation shall be determined by directives to be issued by the appropriate government institution”*. Federal Government Offices Child Day Care directives /2018 were issued by The Ministry of Women and Social Affairs in accordance with the authority of Article 48 (6) of the amended Federal Civil Service Proclamation No. 1064/20. The following statement is raised that is shown how government offices will be implemented childcare services: *“The government offices have to be implemented their activities and setting according to the directives”*. Article three of the directive stated the ratio of caregiver to CDCC. It puts clearly, *“a caregiver should not care for more than 5 children”*. The research finding shows they have been implemented according to the directives.

Accordingly, MoWSA has prepared guidelines for workplace child day care in 2018 and the guideline is now serving as a working document at the national level. Regarding the implementation of the guideline, the researcher asked the ministry of Education center focal point, and responded the following:

“Establishing day care centers according to the guideline issued by the Ministry of Women and Social Affairs, is challenging to implement for other government institutions, especially as the facilities are not feasible. The cost is high. For example, the guideline says as mandatory that the bedroom must contain the heater & Air Conditioner, depending on the number of children. In particular, the institutions must be encouraged to set up child day care, especially because we do not have enough space” Center Focal Point.

Considering this issues Key informant 4 from civil service Commission mentioned the following:

“The Guideline puts the education level of Care givers must be 10th grade completed and level 4, when the vacancy notified using this criterion it is difficult to get in the labor market such professionals. Moreover, Children use service in the center up to 3 years old in the center, but kindergarten starts at 4 years old, which is difficult for parents” KIC (4), May,2022.

The researcher asked about the familiarization and availability of the guidelines in the centers, for care givers they replied there is no guideline document in the center and they couldn't refer it to deliver the services. They are following the instructions from the training they received from an International NGO facilitated by MoWSA rather than the guideline. MECG (1) said this *“I didn't see any document of the guideline drafted by MOWSA but we are working using the Montessori approach which we received during the job training from NGOs facilitated by MOWSA”*.

Therefore, as indicated the above quotes, respondents reported that some of the guidelines' articles are difficult to implement by government organizations, which forced them to revise and implement according to the decisions of the organizations.

4.3.1.2 Administrative Issues

When the researcher investigated the two study sites, they had the same administrative issues. Both centers are responsible to the Women and Social Affairs Directorate and then the directorate has assigned focal persons to liaison with the centers. This helps to facilitate administrative issues within the ministry. However, the status of employment of caregivers' is in the Ministry of Health caregivers, nurses and janitors are permanent staff whereas, in the Ministry of Education, they are hired on contract basis and their salaries are paid by NGOs.

The researcher asked MECG (3), she has reported the following:

“The benefits of CDCC are unknown to the organization. They considered the responsibility of the center as only that of Women and Social Affairs directorate and bring in children and throw them away. They should be given priority. Sometimes we feel deprived. They couldn't give attention to the center. This is a place where children are molded for over all development. But they do not seem to understand it at all. They exclude us from many of the benefits of the organization that other permanent staffs receive because we are not permanent staff. Even our salary is not paid monthly, we are paid after 3 and 4 months
“(MECG (3), Monday, May-2022).

MECG (2) added more explanation on the above points:

“Even though I love my job, we are very upset because we are not being paid on time. They should understand that we, the organization staff, are taking care of the children. We are working for the achievement of the goals of the organization indirectly. The MoWSA Directorate is working and we are being paid in the form of allowances, not regular salaries. We have not been paid yet. A wage should be paid properly and it should be paid morally” (MECG (2) Monday, May 2022).

The Working Mother explained personal feelings *“I wonder what I would have done without this center. This is a question for me. The Ministry must respect the right of caregivers”* (MHWM (1), Monday May 20, 2022).

The researcher asked the Director of Women Affairs from MoE, she replied that:

“Regarding the fixed budget, there is no work structure, no category is allowed, and no programming budget is included. When we requested Civil Service Commission, it could not be allowed, that is why we are looking for funds from partners to pay their salaries to sustain the service” Center Focal Person May, 2022.

The above quotes raised that, the organization has left the responsibility and administration issues tend to Women Affairs Directors. As indicated above policies and regulations are implemented with the coordination of all responsible bodies however especially, major administrative sections like planning, human resource, minister office general service, and finance administration were not mainly involved in the center's day-to-day service. There were administrative gaps at the organizational level regarding the issues raised by respondents.

4.3.1.3 Contribution of Leadership

Leadership is key to supporting and sustaining quality in CDCC settings and for creating a stimulating environment for both staff and children. It is obvious that the leadership system consists of the children, parents, childcare unit, and organizational system and its culture. Participants from the MoE reported that the leadership is not as such proactively working with CDCC. The researcher interviewed the informant on the contribution of leadership on CDCC; she replied that:

“The organization does not consider CDCC as part and parcel of the institution. The management of the organization does not visit us but all the work is done by the women directorate and the directorate cannot do more than it can handle. We have seen leadership variation as of the establishment of CDCC. But now we have never seen such kind of visit. When we have seen the higher officials visit us and they can kiss the children, we feel a sense of ownership” MECG (5) Monday, May,2022.

In this regard, when the researcher interviewed the individual who has taken the position of director of Women Affairs, she has disagreed with the above statement. She certified that *“the leadership is working with it (the CDCC). Women's Affairs Directorate is one of the management organs that have the mandate to coordinate the CDCC”* Monday, 20/05/2022.

On the other hand, the researcher made an in-depth interview with MoHCG (1), about the organization's leadership on the ownership of CDCC, she answered *“The commitment of the leadership is very interesting, they encourage as much as possible. When we requested any materials, they will avail them immediately. We are happy with the action of the leadership”*. According to the research findings from MoH manager interview, the higher officials support

and encourage the staff of CDCC. He testified his information “*all staffs in CDCC are permanent and they are secured their employment. They are getting their salary monthly this is the decision the leadership made*”. MoHCG (1),

In general, as we have seen from the responses of participants of the study, even the rule and regulations of the organization sets that there is equal work administration, but there are different administrative barriers between leadership and Women's Affairs toward the CDCC in Ministry of Education. It has been observed that there is no coordination between the line directorates in the ministry on CDCC. The leadership has lacked ownership of the CDCC. From what has been mentioned by the participants in the interview, the researcher has perceived that there is coordinated work in the ministry of Health center regarding CDCC service, and the administrative issues are visible to facilitate the activities in the center. And also, the implementation and coordination of policy and regulation of CDCC are differently implemented in the two ministries. The researcher observed the different administrative issues and ownership in ministries and it further advise to research topic for researcher.

4.4 Components of service provisions in child daycare centers.

4.4.1 Service Provisions in Child Day Care Center

The child day care centers, service hours are scheduled by the government offices working time. Child day care services are a set of package activities that mainly include cleaning, feeding, clothing and other services that are done to enhance the development and growth of the child. These services of activities are indicated by Federal Offices Child Day Care Directives. Article four stated about the type of service provided and the nature of delivery in child care, the following should be provided at the center:

- (1) Provision and service of bed and rest areas
- (2) Playground supply and service
- (3) The supply and service of the cooking area;
- (4) Dining Supply and Service,
- (5) The provision of sanitation and toilet facilities for children;
- (6) Care and follow-up services;
- (7) Primary care service (Directives:2018)

This study investigated the childcare services that are provided, and whether the services are in accordance with the directive. The participants were asked what services are given and answered as follows: MECG (1) stated *“We accept children as of 8:30 AM. The services are provided within working hours Monday to Friday starting 8; 30Am to 4:30 PM - We start with a daily meal; you will have access to sanitation, bedding, play and singing services”*.

She further discussed, breastfeeding mothers come every 2 hours to have a place to breastfeed, the daily package services are given by trained caregivers using the Montessori approach, which they have learnt through trainings provided by NGOs and facilitated by MoWSA. As elaborated in the literature review the central method of Montessori is to guide the child through the classroom and the way of learning that is designed to support the child’s intellectual, physical, emotional, and social development through active exploration, choice, and independent learning. In addition, the purpose of the education system is to allow the child’s optimal development (intellectual, physical, emotional, and social (Marshall: 2017). According to the Montessori approach, the service has to be scheduled into what is called Daily routines. The researcher further asked MECG (1) on the schedule of daily routine provided and activities of care performed. List of activities were summarized (See Annex 8).

The researcher asked on the schedule from the Ministry of Health, MoHCG (1), and she replied as follows:

We have taken the Montessori approach as much as possible we are trying to apply it. The Toddlers feed 4 and 5 times. It is quite different in infants because they pass their time with sleep at times. When it comes to cleaning, we often change their diaper to keep the hygiene of the children. In terms of their health, we measure their weight and temperature. We see that they are happy” (MoHCG (1)

It is obvious that any listed activities need appropriate materials and trained human resources. To check this requirement, the NCDCCD (2018) states that it is necessary to have nurses available on the staff of the CDCC to look after the health condition of children. As mentioned above, the Ministry of Health Child Day care center has two nurses whereas the Ministry of Education no longer has a nurse as staff as she has resigned. The researcher asked how the caregivers are going to look after the health condition of the children without a Nurse. MECG-(2) Said:

“As a nurse is not available, the MoE uses the Government Health Center which is nearest to the organization. Fortunately, we have not encountered any serious health problems; if the children have high temperature, we use cold with water to reduce their temperature. This is considered as first aid as per what we are trained” (MECG-(2), May,2022).

The daily routine is scheduled as per the training on the Montessori approach, even though it has been difficult to implement especially the time schedule as CDCC working hours terminated 4:30 pm, which is not compatible with government working hours which end at 5:30 pm. The researcher observed the time when mothers are coming to the center and they took their children from the center at 4:30 pm. The researcher considered this as a drawback both from the mother's side and the caregivers, MECG (2) was interviewed she said the following:

“The services are provided within working hours Monday to Friday starting 8: 30Am to 4:30 PM. I know this is difficult for mothers that can't be compatible to their working hours. We are closing at 4:30pm, because we encounter transport problems. We cannot use the public Transport, so I use taxi or other means of transport to go my home” MECG (2) May,2022.

Hence the schedule has forced mothers to take their children to their office; this is in turn difficult to perform their duties and for other co-workers. As Sosinsky (2020) stated the same views on the child care challenges when parents work schedule is key to job quality which is important to child and family working that supporting the ability to request changes in work hours for job security. Parents' work schedules may also increase parents' stress and work-family conflict, such strains are known to contribute to reduced parental sensitivity, less positive parent-child interaction, and less involved parenting motivation. Moreover, Friehwot (2021) shows in her study that the flexibility of parent work schedules is important for reducing stress, improving family relationships, decreasing absenteeism and turnover, and increasing job satisfaction and perceptions of work and family balance.

4.4.2 Regulation of Child Day Care Center

The regulation of CDCC is mainly derived from federal government Childcare directive. According to the directive Part two Sub article 5 *“The place chosen for the child day care should be ... Free of chemicals, dust, radiation and odors, no noise pollution, away from roads, noisy and production areas, with enough sunlight and enough air”*. According to the KIW (1) from MoWSA, the directive was used as an internal policy of the CDCC however the researcher

certified from in-depth interviews with CGS' that there is no copy of the Directives in the research sites.

MECG (1) and reported "*I didn't see the copy of directives and never referred to it*". On the other hand, in the center service provision in CDCC, some of the regulations are taken from the training on the Montessori approach that the CGs' have taken during the on-the-job training.

All government institutions are required to exert utmost effort in order to make the day-care centers free from risks to children's health, be located far away from chemicals, dust, radiation, health hazards of any kind, main road, factories, loud noises and should have adequate sunlight and air exposure. From a service provision point of view, the researcher reviewed the regulation form or sheet from the notice board at the gate of CDCC. One can easily notice that there is regulation and restriction, every person who wants to enter the center should take off their shoes, instead, they must wear the center's slipper. The mothers also change their dresses when coming to visit or giving breastfeeding to their children. Besides that, the caregivers wear white gowns. In addition, the parents are expected to bring food and diapers daily, and one soft paper and soap monthly.

The researcher reviewed the document of the NDCCD Part 3 sub-article 2 and 3 stating the following core points on the CG discipline and ethics:

"The government agency may, when necessary, arrange for child care workers to be screened for infectious diseases. Care Givers assigned to the day care center are also have a responsibility to submit to screening when asked to do so. If child care workers intentionally or negligently harm a child in a day care center, they shall be charged with a serious disciplinary offense, subject to criminal and civil liability" (MoWSA,2018: PP7-11).

These Articles have clearly indicated that CGs' have great responsibility to provide services, however, when it comes to implementation; there is no quality standard measurement as per the directive's standard stated above. The researcher interviewed government officials such as from KIW (1) and Directors from MoE. Regarding the quality standard measurement and the whole service provision, they are implementing as an emerging service without standardized quality standards and competence certificate.

KIW (1) reported that *“lack of standard, regulation and competence certificate has a negative impact on the service provider in CDCC. The Ministry is working and developing National Standard which would have been a working document both government and other models of CDCC in the country”*. He added his point on the necessity of quality standards; the National Standard document considers both the structural and process quality of CDCC.

4.4.3 Communication and Interaction

The researcher interviewed parents and CG and has taken notes through non-participatory observation. The interaction between children and care givers has also been observed.

Accordingly, MECG (4) has reported the level of communication at organizational level.

“The organization does not consider CDCC as part and parcel of the institution because they do not understand the benefits. The main problem with this is the lack of communication. I don't think there is a good deal of awareness about the benefit for children who are taken care of in CDCC”. MECG (4), May/2022.

Another MECG(3) stated that: *“We have a relationship with parents but some parents may ask why they are being asking for soap and sanitary materials because of their low income and believe that the government should support these costs”*.

The researcher interviewed parents from the Ministry of Health; she replied *“our relationship with the caregivers is very good. They treat our children like their own children. We discuss and solve many problems”*. The researcher also interviewed CG about interrelation; she stated that question :

“We meet each other at work on Fridays. We do not have a regular day for discussion with parents but I think in the future there should be fixed regular meeting between parents rather than discussing in a personal way”(MECG (2), May/2022).

During the observation the researcher made in CDCC CG interaction with children are good. They have given care as per the knowledge from the training they have. To certain this when the researcher asked the CG about their interaction with children, she answered as follows:

“Relationships with children are very lovely. We have a good relationship with the children. They call us “Miss”. They come to us as mothers. We send them to their mothers, who say we don't even do their hair. I feel that, We consider to spending time with children is a form of self-renewal” (MECG(3) , May/2022).

Communication and interaction are very crucial for any work therefore, we can understand from the discussion, that communication within the organization on the importance of CDCC is not well developed. However, the interaction between parents and CG is good the researcher perceived that personal interaction doesn't ensure that interactions will be sustainable unless formal interaction would be established. On the other hand, the parents also have high desire and expectation for improved communication between organization and CDCC for better.

4.4.3.1 Child - care giver interaction

The ability to have relationships and interactions is one of the most valuable skills Caregiver professionals can develop in CDCC Service Provision. As it is known CDCC is an institution that provides service directly for children and parents. Hence attachment between children and their caregivers must be in a professional way considering the child's development. The researcher interviewed CGs' who described the relation with children, respondents revealed that:

“I am very happy with children because I am the mother of babies. Sometimes some of the children refuse to leave when the time is up. Children are happy and when they stay in the center. I believe that this makes because of the good relationship we made in the center” MECG-3(May,2022).

The researcher held an observation of activities in the CDCC in May 2022, in MoE. The caregivers and children had a good relationship, it was also observed that caregivers were seen playing together and the researcher saw one CG carrying infants in the shoulder singing a lullaby *“to get him/her to sleep”*. In addition, the researcher observed in May 2022, MoH, CDCC, that there was a good relationship between caregivers and children. On the other hand., parents who were interviewed described about the interaction between CGs and Children, they reported as follows:

“When I go to visit my daughter, I see the caregivers playing close to the children. My daughter loves them so much that she is happy with what they care about more than I do. I want to be able to give my children the same care when we go home and I desire to have parents get training in playing care with playing for the kids.”

MoHM (1), May, 2022).

The research has investigated the relationship between caregivers and gender roles, MoHCG (1) Also said:

“It connects to my sex because I am a woman, I can have a baby so it is natural because the work is related to child care I believe it is given to women. We are mothers and that the rearing of children is our responsibility due to the fact that the attitude from society was given to mothers.” (MoHCG (1). May,2022).

Moreover, another care giver stated that, *“I do not think men are as patient as mothers as women, so males cannot be caregivers rather women are good caregivers in the Child care Center because they are inherently given to caregivers”* (MECG (1), May,2022).

On the other side another respondent revealed different opinion regarding this, she reported as follows:

“I believe there is a relationship between sex and caregivers and we take care of it here at home. We have a relationship in nature. I think all men believe that all child-rearing is the work of women. This attitude has to be changed. People can change as long as they are human. I believe they will do better if they get proper training. Training and interest is an instrument to have better behavior. So, male can be good caregivers if they get proper training” MECG-3, May, 2022.

As we have seen the finding of the study also confirmed with the statement show that care giving is related to gender bias. Once, society has accepted women's care giving as the natural order of our culture has given the roles of caregivers and we can see the unpaid care economy become the roles of women. As the theoretical perspectives on feminist and care service pointed out, the world as a patriarchal system where women and their contributions are unrecognized, they are directly and indirectly steered less positions and care is highly gendered activities. Care activities are becoming a crucial feminist concern because its provision and has important implications for what men and women can do (Himmelweit and Plomien:2014). Moreover, the caring process is contradictions with respect to organizing the caring process. As feminists noted the ideal of women status, they occupy lower-level positions despite the image of women as natural care givers, they are always figured as ignorant (Fisher&Tronto,1990).

4.4.3.2 Care giver and Parent interaction

Caregiver and parent interaction should be a positive partnership with sharing knowledge and information as well as, experience to understand a child's situation. The researcher used to investigate the interaction of parents and CG using the following tips:

- Choosing time and place to discuss the service provision and the children.

- Mutual Caring, supportive, respectful between Parents and Caregivers.

MoECG (4) from the Ministry of Education said:

“Our relationship with our parents is not good in the beginning however it is showing good progress over time. Our interaction is made based upon the benefit of the children and most of the parents give respect to us” (MoECG (4, May,2022).

Also, another caregiver from the same research site stated:

“There is no parent regular meeting however we are discussing with parents when they are coming in the morning, during breastfeeding time, and at the end of the day to know about the situation of their children. I think this is not a formal discussion, parent meetings are not regular” (MoECG (1), May,2022).

On the other hand, the researcher asked MoHWM (1) from Ministry of health about the interaction of CG, she replied:

“We do not have a regular session with caregivers to discuss the general behavior of my child and service provision however when I want to have information about my child, I can get time to discuss it with caregivers. If there were a regular meeting between parents and staff in the center, we would have experience sharing among us” (MoHWM (1) May,2022).

Parents and caregivers who participated in the interview stressed having strong and formal meetings between parents, caregivers, and officials to meet the needs of children and parents. From the perspective of quality services, the parents and caregivers also have a high desire and expectation for improved interaction between higher officials and women Affair directorate for better child care service provision.

4.4.4 Caregiver to child Ratio and Group size (Staff child Ratio)

At the study site of MoH, there are 8 children aged from 6 months to three years old and there are 2 child caregivers. The ratio becomes one caregiver to four children. In addition, there are two, janitors, two nurses, and a supervisor. The number of children in this study area is very small. The researcher further investigated and asked the manager/focal person of the center from the Ministry of Health, and he stated that there is an insignificant number to use the center however the capacity of the center is enough for 20 children. And also, the center has enough

space and is well furnished except for the location of the center which is placed on the 6th floor. This is because most of the employees are working in the field.

As the one implementer and coordinator of ECDE Policy, which is going to have a model of the promotion and implementation of National child day care services at the national level, however, the parents would have to use the center.

Therefore, the numbers of children were small to get service in the center and then the researcher understands that, there is an awareness problem regarding the significance of child care service. As indicated above Ministry of Health is one to be implementer and coordinator of ECDE policy in Ethiopia. According to UNICEF (2021) child day care is not only used for the parents' benefit it also keeps children safe and healthy. In addition, it helps children develop skills they will need for success in school and in their lives outside of school.

At the second research site, MoE, there are 30 children who are 6 months to 3 and six months old. There are five caregivers. The ratio of children is one child caregiver to six children. Also, one janitor provides service in the center. According to the information from MoE, services are given by grouping the children based on their age. The researcher interviewed the caregiver in MoE about the grouping of children, she replied that *"we are working through sharing the tasks according to the age, for example, my responsibility is caring to toddlers who are less than one year. They have separate bedrooms"* (MECG (2), May,2022).

Besides, the researcher observed the caregivers have busy daily schedule activities. The Directives, Part 3 subsection (2) stated that one childcare giver shall not care for more than 5 children. On the other side, according to the information that has got from CG and managers of CDCC there are more than ten waiting parents who are registered to look for services from the center. From the findings the researcher understands, the organization didn't give affordable daycare services for working mothers who need to use care services.

The researcher found out that although the same National directives and policies are used among the study sites, there is varied implementation and attention. The number of child care work force required to run child day-care centers in the Ethiopian public institutions should be determined based on the number of public institutions operating at the federal, regional and city

administration levels, the number of female workers within the fertility age category, the national fertility rate of the country and the staff-child ratio. The number of public institutions is already addressed in the previous section. Here, the number of female public servants within the high fertility age range. Staff-child ratio is an important aspect of childcare giving work. This is so because the number of children placed under care of a single care giver affects quality of interaction between staff and children, and the amount of time and attention paid to each child. Usually, staff-child ratios are regulated with the lower number of young children per staff and higher number of older children per staff.

4.4.5 Environment Aspect of child care center

One of the key factors that contribute to quality childcare services is the environment where the services are being provided. According to the CRC, "*In all actions concerning children, whether undertaken by public or private social welfare childcare institutions, the best interest of the child shall be a primary consideration*"(UN-Convention on the Rights of the Child). The researcher investigated the two research sites whether the CDCC environment fulfilled the requirements as per the UNCRC and NCDCCD using interviews and observation.

Considering the above statement, the researcher investigated the physical setting of the CDCC using interview and personal observation. An interview was made with the Director of Women Affairs from MoE, she stated that:

“Child day care environment should be safe, secure for the service providers and users. The facility requires a number of rooms based on the function of rooms and the staff such as nurses, trained caregivers, and different accommodations and materials however a minimum standard has been fulfilled. We have indoor games but no playgrounds. Though, we know that a playground is beneficial for a child's physical, social, and self-esteem development the space does not have enough space to be ready for play grounds” (Director of Women Affairs, May 2022).

MOE daycare has 7 rooms for dining, playing, bathroom and toilets, and different bedrooms for toddlers and infants. Separate toilets with different size as per the age of children are available even though the materials are Ethiopian made. Cultural paintings are hung over the wall. The second study site MoH has 5 rooms and toilets that are furnished with imported materials.

MoHCG (1) from MoH stated on the physical facility answered as follows:

“The internal setting of CDCC is well organized, occupied with children and a janitor who cleans the area very frequently. The place is comfortable, furnished with all the needed materials, and there are modern bathrooms: one thing lacking in the site is a playground which is very essential for child development” MoHCG (1). May 2022).

On the other side, the mother from MoEWM (4) stated:

“When I used this childcare, I am very happy because the center is comfortable, we feel like home and it provides my child with things that I can't afford to access in my home” (MoEWM 4), May,2022).

MoEWM (5) and MoHWM (1) have discussed the same notion on the following points:

“The officials have to decide about playground (Outdoor play ground) which is essential for child development. It needs a place for this purpose the children will not play outside and are restricted to stay indoors all daylong which do not have much space for them to move around as they want”. The researcher conducted personal observation and reviewed national documents and international standards to compare and contrast the implementation made at the study site.

. The following statement indicated about the physical criteria of CDCC: *“The place chosen to establish the CDCC should be a place that cannot harm the children's health and body, free from chemicals, dust, radiation, and odors, free from noise pollution, away from roads, noise and production areas, with enough sunlight and enough air”* (MoWSA,2018 p.7).

In addition, it states the type of rooms that need to be used for services for CDCC: *“The CDCC includes a play area, sleeping and resting room, food preparation and dining room, clothes and toiletry storage, and changing room that provides various services. The playroom is the room where the children spend their time playing, so it should be safe and free from things that can cause harm to children”* (MoWSA, 2018 P.8). Furthermore, the directives indicated that the playroom should be designed to have enough space for the children to move around, and the location should allow enough natural light and shade and should not be exposed to direct sunlight. And also, the layout should be able to provide children with freedom, safety, and comfort (Ibid.p.10).

The researcher conducted an FGD with administrative officials in MoH regarding the physical setting of CDCC.

“The center in MOH, is located 6th floor which makes it is not an accessible for having a playground. The interior part of the site is well-furnished and equipped. If the children come out of the indoor center and want to play outside, they will find the towers and other offices. In general, CDCC has to be established in pleasant, green, and attractive for children. However, the compound of the ministry has clouded with many of offices, we couldn’t make such settings. The management has considered the center should give suitable services for the best interest of children” (FGD, June/2022).

Women Affairs Director from MoE also stated: *“The place where CDCC is located is not comfortable. However, the site of MoE is located on the ground floor and it is surrounded by other buildings and offices. Also, the other study site”.*

The researcher has observed the interior and external physical setting of the study site, the researcher believed that the study site of MoE has a better physical setting. Concerning material Provision, the childcare facilities and material provisions have to be child-oriented and developmentally appropriate. Based up on the fundamental concept raised above, the researcher conducted interview, observation, and document review. According to NCDCCD: 2018, the material provided is categorized into six categories as per the type of services given in the center. They are cooking materials, dining room materials, sanitary materials, bedroom materials, playing materials, and teaching materials. Furthermore, the Directives identify and listed materials and facilities under each category:

Table 6: - shows the material provision

No	Categories of Services	List of Materials
1.	Cooking materials	cooking stove (electric and cylinder), refrigerator, water filter and heater, a sink for cooking an electric water heater
2.	Sanitary & Bathroom Materials	a baby toilet, a first aid kit, a baby sanitary diaper, a waste basket children's beds and mattresses
3.	Dining room Materials	eating utensils and a storage/shelf box a baby wash basin, baby table and chair

4.	Bedroom Materials	Beds, mattresses, blanket
5.	Playing Materials	playing materials, television, toys, alphabet charts, traditional pictures and sculptures for children, and other play materials for children.
6.	Teaching Materials	learning and playing materials, television, children's chairs and tables, alphabet charts

Source: NDCCD:2018

The researcher made observations critically on the availability of these materials on the site and how they are used in a child-oriented approach. The materials are almost there except the heater and air conditioner as well as the television. In the MoH, the materials are imported. Where as in MoE study site they are found locally made. The researcher made an interview with MoHCG (1) on the reason why the absence of these material provisions. She stated the following: *“The center is well-furnished and equipped with imported materials. Personally, I choose homemade materials, they can help children are learned to know about national pride and their culture”* (MoHCG (1) May /2022).

The researcher also undertook an interview with a focal person from MoH, he replied: *“There are no child-friendly materials in the market so we are forced to purchase imported materials at a high cost. So, we have to advocate the private sectors to produce child-friendly materials”*. The study conducted by Seifu (2014), found that there is no adequate space (playground) for the children to get out and run around. They restricted their movement in the interior part of the center. He also stated that age-appropriate and child-friendly outdoor area and play equipment is important for health, physical, and self-esteem development. Besides, a similar study conducted by (Belay&Hawaz,2015pp.12), *“The children were confined only to the classroom environment. They were not allowed to go out. There was no adequate outdoor play”*. Therefore, the researcher understands from the information, materials are differently used in the study sites and there are no material standards to be set.

4.5 Contribution of child day care center

The researcher investigated the contribution of the federal child day care service based on the aim of the study. Accordingly, the researcher explores the contribution of CDCC from four

major perspectives: women empowerment, Gender equality, National Economy, and Social Protection.

4.5.1 Gender Equality and Women Empowerment

As part of the attempt to look for contribution of the CDCC towards women empowerment, the researcher conducted KIW (1) with MoWSA, CDCC has resulted on women empowerment and he responded as:

*“Child day care service is of great importance for the empowerment of women. Because of the grace of giving birth to them, raising and taking care of them is given to women by the Patriarchal system, and children need to be breastfed. On the other hand, women should participate in the work force and the economy Therefore, if mothers work with their children close to them, they will be psychologically stable and effective in their work”*29/5/2022

On the other hand, Parents who is responded for the contribution of CDCC:

“My son was admitted at the age of 9 months and now it has been one year and months. I consider and feel as second mother to my son. I feel safe when we come without worry. I am very happy with my job. I don't have a servant (babysitter) at home because of this. I feel comfortable having my son here. I would be worried if you were at home I am effective with my work, and my performance is not challenged (MoEWM (3)/ May/2022).

The researcher also organized FGD with management members in MoH while discussing with the contribution of CDCC on the empowerment of women: They stated: *“the accessibility and affordability of child day care in the workplace are crucial and this is important for both mothers to secure their job and child development.”* FGD/2022.

The researcher has reviewed literature on the importance of CDCC for gender equality. And the study investigated the contribution of CDCC for gender equality (1) was interviewed. He replied:

“The difference between women and men in economic, social, and decision-making, and gender inequality gaps are visible. Women are living in poverty. One of the leading factors are the roles given by the system to rearing and caring for their children. When the

care economy reduces by offering CDC, they will get more time to use for economic and other social issues. This will contribute to reducing gender inequality”.

With regards to the availability of childcare service with the high level of commitment of some governments to public funding of childcare provision, He added also, *“High-quality childcare from the earliest age is a long-term investment in human capital and in the reduction of social disparities”.*

According to Fisher & Tronto (1990), in feminist economics care is increasingly recognized as a significant economic issue. There has been contradiction the care service in the individuals, some individuals cannot enter the market place of to pursue interests on their behalf. Women who are support to be more sensitive to others needs. Feminists as motivated women to understand the character of household caring to explore its traditional norms, and to reconsider the social structure that limit its functions. Generally, the ideal of feminist’s advocate, women are differently by their autonomy after guaranteed by paid work and expressed in equality of caring responsibility.

Women Affairs Director of MoE also stated,

“The social norms of domestic and care activities are viewed as women’s work, generating expectation and social pressure for women to carry out disproportionate amount of unpaid care work. Hence reducing the amount of unpaid care work performed by women by providing better infrastructure, access to between women and men, has a positive impact on women’s employment outcomes, increasing their labor force participation and access to decent jobs” (Women affairs Director, 22/5/2022)

Martello (2019) studied on the outside the home with a full-time career, and a mother that does the child rearing stated about the existence extra family care and motherhood, the central ideology of motherhood when women can, in their daily lives, be mothers without sacrificing or subordinating other valued dimensions of themselves the all or nothing approach to motherhood is challenged.

In addition to this, regarding contribution of gender equality, MoHWM (1) said:

“I appreciate the intervention of the ministry which can afford CDCC, I can perform equally my duty with my male colleagues in the office. And I perform effectively; I am

so happy and satisfied with my life and entertain during my rest time. This enables me to enhance other economic and social duties” (MoHWM (1) May /2022)

The above statement is an indication that women can make a difference in their lives if they reduce the care work focused on daily activities. Especially since unpaid housework takes time, it is understood that activities that reduce workload need to be developed. Feminists agree with this idea. The unpaid care work limits women’s ability to participate equally with men in the labor market. The double burden of paid work and unpaid care responsibilities likely deprives workers of adequate time to meet their basic needs for rest and leisure, a phenomenon termed “time poverty” (Conndly, Jacobsen &etal,2018). Therefore, there is a direct link between care and economy. Ruth (2014) also stated feminists have tended to argue either that women should reject the roles of women in the society and the oppression that goes with them or that, in articulating and developing these roles, women find one of their best chances of changing and improving the world work on women's moral development celebrates women's connectedness and poses it as an alternate and potentially superior model of moral.

Furthermore, MoECG (2) discussed the following points:

“We are not familiar with the technical word about gender equality, however, there is inequality between women and men in society, and women are poor and out of job opportunities. When CDCCs is increased in turn they contribute to a job opportunity for women many females are attracted to this job opportunity. So, it enhances income level and employment for unemployed women” (MoECG (2), May,2022.

The above points are supported by Friehiwet (2021), and her study shows that the presence of the center contributes to satisfaction of working mothers. Since the child is nearby it reduces the stress on the mother. Balancing the two demanding roles leads to reducing stress and working mothers with less stress are satisfied. Child day care helps working mothers to work freely and care for their children in parallel. Birhane (2020) stated when women have access to childcare centers in the work places, they will be motivated to participate in different levels of activities.

4.5.2 National Economy

Child daycare services are one of the gender-responsive infrastructures which reduce the unpaid care economy and can be shifted to the paid economy. Also, an investment in care economy

contributes to long-term economic development, through the contribution in the quality of human resources and the development of human capabilities.

In doing so, the researcher investigated the contribution of CDCC to the National Economy made an interview with KIP (3) from the Ministry of the plan and Development.

He discussed:

“Ethiopia is a signatory of SDGs and other international commitments, they stipulated the provision of public services, infrastructure, social protection policies, and the promotion of shared responsibility within the household and family. Moreover, Ethiopia committed to present a voluntary national review (VNR) as part of the country’s commitment to implement the 2030 Agenda and SDG between 2016- 2021. However, it presented the progress of Goal 5 with the general frame of gender equality and women empowerment, the report missed the contribution of Childcare services on the National Economy” (KIP (3) May/2022.

The researcher further asked additional questions, the availability of national progress report in National GDP. He replied: *“since the implementation of CDCC is a recent phenomenon, we couldn't track how it has significantly contributed to National GDP”*. On the other side, KIW (1) was asked about the contribution of CDCC to the National Economy.

He replied:

“Child care centers will help parents to show their ability to work. It will create job opportunities for many citizens. By establishing day care centers, job creators who invest will help to increase the government's income by paying taxes. In this way, the growth of the country's economy will be high”.

The significant point that identified in the study was that there are no tracking tools and economic values of the contribution of childcare services at the national level (Warner and Liu: 2006). Therefore, there is a gap with government bodies to track the exact contribution of CDCC to the National Economy as one of the economic sectors. On a macro level, unpaid care work remains unrecognized and undervalued. Indeed, the issue of care is largely absent from the policy Agendas in most developing countries, where care provision is commonly perceived as women’s natural duty and a private matter for families. Feminist scholars have expressed concern that moving more care into the marketplace leads to a commodification of unpaid care

services, which may perpetuate the social and economic disadvantages of having a heavily feminized and poorly paid domestic workforce. Feminist scholars have expressed concern that moving more care into the marketplace leads to a commodification of unpaid care services, which may perpetuate the social and economic disadvantages of having a heavily feminized and poorly paid domestic workforce.

4.5.3 Social Protection

The Social Protection system covers family and child care benefits to reduce poverty and exclusion. In the range, social protection policies, and programs like child grants, school meals skills development, and more – help connect families with health care, nutritious food, and quality education to give all children.

The researcher investigated the implementation of social protection program at the study site. MoECG (2) was asked about the availability of support, she replied as

*“Most parents are engaged in lower positions resulting for low income, they cannot afford supplies like sanitary napkins. They asked the institution to support the children. The children have never received support from the institution”*29/5/2022.

Furthermore, MoEM-4 added

“I am employed as a janitor in the institution so the salary I earn is unable to provide for his (my son’s) fundamental needs. I have information the government started to school feeding program at an elementary school in Addis Ababa, I wish that the service would implement in CDCC”.

In addition, the researcher made interview with KIW (1), he certified that

“Parents who cannot properly raise their children living in poverty need social protection. As a result, low-income workers find it difficult to feed their children by providing them with nutritious food. According to the information from the assessment we made, some CDCCs have given below their capacity. One of the reasons that, the parents feel to afford low-standard food and not afford other sanitary pads. This implies that social protection programs are important for poor parents in a public institution in their basic needs under social protection floors” (KIW (1) /2022.

The Revised Civil Service Pro.No/1064/2018 was reviewed; there is no provision in the proclamation that states low-income civil servants can be supported under social protection. An interview conducted with Civil Service Commission, Women & Social Affairs Executive stated

that there is no social protection intervention for low-income parents in the Civil Service implementation who are using public service workplace child care services and cannot afford the minimum standards that NDCCD/2019 stated. Lack of access to social protection, poor service delivery; the poverty risks for low-income parents are immense. Hence, Social protection policies are essential to tackle inequities and drive progress towards equal opportunities and access to services for children (UNICEF: 2020).

The daycare services obviously experience lots of concerns that would challenge their professional integrity. Training, Curriculum, and Standards are basic components of professional integrity. The researcher made an investigation on the situation of quality-of-service provision within the circumstances of whether the caregiver and managers acquire adequate knowledge and skills needed to plan and implement quality early learning experiences. Quality training should have a curriculum. It describes the sequence of service for the children to learn and the manner of teaching so that the child moves closer to the intended learning outcomes. And also, standards of child care service are important for quality measures of the center.

MECG (2) was asked about the availability of training, she replied:

“Before I joined this center, I have taken other vocational training, but did not include the childcare Service. We have received training, not directly through formal training, but through NGOs. We have been trained on job training in Montessori, but only now, not formally, but by a private organization” (MECG (2), May,2022).

On a similar vein, the directive stipulates for qualification standards of child care workers. Accordingly, child day-care centers are required to be staffed with child care professionals, cleaners and a nurse. However, even though nurses and cleaners are fairly available, it is hard to find formally trained child care professionals in the labor market. This is because of two reasons. The researcher further investigated the document, there is no full-fledged training and education curriculum that sets the areas of training and competency units required for child day care professionals.

As a result, there is no government institution engaged in formally training such staff, except the short term TVET training given to individuals who planned to go to countries in the Middle East as domestic workers. This short-term training is given to enable trainees meet the following occupational standards related with child care services (MoSHE, 2019).

- Work effectively with family to provide care and support for infants and children

- Provide care and support for infants and/or toddlers in a household setting
- Apply infection prevention techniques and workplace occupational health and safety
- Respond to emergency and apply basic first aid
- Practice career professionalism

However, since there is no judiciously designed curriculum and course syllabus for training and education of child day care professionals, the areas of training that needs to be addressed to come up with fulfillment of such occupational standards is not clearly known. Besides, the private sector is not strategically engaged in providing training and education on child care service to trainees. For instance, there are only few private institutions providing this training side-by-side with other professional trainings such as housekeeping and cleaning services.

Therefore, unless this labor gap in trained childcare staff is filled, child day-care centers planned to be established in the public sector institutions will not be capable of caring for children in a manner that ensures children's wellbeing and their physical, social, emotional and intellectual developments. If so, it will be inconceivable to achieve the constitutional, policy and legal maxims that stipulate for economic empowerment and equality of women with their male counterparts.

According to the researcher interviews with the caregivers from the study site, two out of seven are trained in child care giving or early childhood education. The training centres are not centres of formal education rather they are NGO based and private training centres. Most of the care givers have an attitude that formal education or any related training could be useful for better child care quality but they believe that they have acquired capacity to care for the children, infants and toddlers by experience.

As MECG(3) stated as:

“I have no training related to providing child care. I took training in horticulture 27 years ago. Recently, I got training on Montessori childcare services by NGO the training was good. The main thing here is that the care giver should love children, I love children and I am also a mother of a baby so that is what matters and I have the capacity to give care to children and I want to establish my own day care centre if things are going well” (MECG(3), May, 2022).

The only care giver who said that she took training on child care giving said that *“I took various short courses, so training is a very important thing as there is so much difference in the service delivery if you learn or if you don’t”*(MECG(5),May,2022). The researcher also interviewed focal person/who acted as centre manager from MoH, *“we announced on the vacant post, that we got caregivers with little competition. There are no trained caregivers in the market”*. And also the researcher interviewed Director of Women Affairs from MoE stated, *“When we advertised for the vacant post we did not get a trained caregiver in the market according to the criteria, we hired below the set criteria then they took on the job training after they were hired”*(Director of Women Affairs,MoE,May,2022).

The researcher certified from the interview and document review that there is no TVET to train basic childcare givers training in the country. It is possible to see there is lack of trained human power, curriculum and standards of childcare center. In this regard, (Mwaipopo, Maundeni, and et al (2021), argued in Botswana the challenges affecting the provision of childcare services are insufficient funding, shortage of trained teachers, and lack of public awareness.

Trained Staff and Curriculum

Quality in early childhood care and education has both process and structural contents. The directive stipulates for qualification standards of child care workers. Accordingly, child day-care centers are required to be staffed with child care professionals, cleaners and a nurse. According to the interview with from MoE Women Affairs Director, she stated:

“Even though nurses and cleaners are fairly available, it is hard to find formally trained child care professionals in the labor market. This is for two reasons. The first one is that there is no full-fledged training and education curriculum that sets the areas of training and competency units required for child care professionals. As a result, there is no any government institution engaged in formally training such staff, except the short term TVET training given to individuals who planned to go to the Arabic countries as domestic Workers”

(Women Affairs Director, May,2022).

KIW (1) was interviewed and reported to the following points:

“Higher quality child care can be provided at a market price by hiring a high profiled childcare provider. A woman is naturally endowed with some sort of child care skills. However, these skills need to be nurtured with scientific care requirement that

enable full-fledged physical, cognitive and emotional development of the child. This leads to higher skill, professionalism and higher compensation for the child care giver as well”
(KIW (1), May,2022).

In addition to taking the above stated curriculum contents in the class room, as the adage goes “*investing in early childhood care is investing in the country’s over all future.*” Meeting the long term national impacts of early child care requires provision of the service by qualified and high profiled child care professionals. However, the MoWCY’s directive stipulated that “*child care professionals should be trained at 10+3 level by TVET institutions*”. Therefore, the researcher believes that limiting the level of training and education at 10+3 could affect the quality of service provided to children and blur visibility of the child care staff’s career development.

However, since there is no judiciously designed curriculum and course syllabus for training and education of child care professionals, the areas of training addressed to come up with fulfillment of such occupational standards is not clearly known. Besides, the private sector is not strategically engaged in providing training and education on child care service to trainees. For instance, there are only few private institutions providing this training side-by-side with other professional trainings such has housekeeping and cleaning services. And this is also quite similar to the finding of (Belay and Hawaz, 2015) the daycare services need experience lots of lots of concerns that would challenge their professional integrity. The study also identified that the lack of a curriculum for caregivers is another challenge in the caring process.

Therefore, unless this gap in trained child care professionals is filled, child day-care centers planned to be established in the public sector institutions will not be capable of caring for children in a manner that ensures children’s wellbeing and their physical, social, emotional and intellectual developments.

4.6.2 Finance/Budget Allocation

A daycare center requires a significant amount of budget to establish a functional center. The figures for each item on the budget differ depending on the size of the day-care center and the number of employees, but the main categories on the budget are often similar due to the demands of a day-care center. In addition to making a budget, financial planning must also be a part of the budgetary plans made by public institutions. The researcher asked KIF (2) from the Ministry of Finance on the program budget system for public institutions and how can track it.

She stated:

“The federal monetary system is guided by government budget proclamation each public institution has their own budget code and fixed ceiling as per the institutions prepared and requested as the budget ceiling the ministry is mandated to allocate the budget. The daycare center budget is not reported because it is programmed by the administration budget. The budget for center is not included in program budget but if institutions bring it within their budget ceiling, it will be allocated to them” (KIF (2) May,2022).

On other hand, the Manager from MoE stated:

*“There is no fixed budget for caregivers and other staff in the center at the national level and another problem is the salary which they are paid for caregivers is low as per they execute heavy duty in daily routine in the center”*25/5/2022.

According to KIF (2) reported to:

“I could not find information to know how many institutions have a fixed budget. The problem of not presenting a detailed budget plan like any other work, there should be a matching fund because of the problem of perception. There is a problem of not evaluating the performance. There are problems of mismatch between supply and demand” (KIF (2) May,2022).

The researcher further tried to investigate consolidated trend financial reports on how the budget is executed with the federal level on the implementation and strengthening of child day care centers however there are limitations in budget tracking mechanisms it doesn't show how much the public organizations allocate and utilize for the center from their total budget.

This is another challenge that public institutions can't see their results and limitation for further decisions. Lack of donor organizations and civil organizations is another issue and a few are involved in this program. *"There is no Donor interest to do this program so far, no bilateral and multilateral organization has signed an agreement to help expand institutional child care"* Reported by KIF (2). The researcher further investigated to check out how many of donor organizations which can support the activities of child day care service to government offices, only two of organizations are found.

4.6.3 Standards and Qualification Insurance

It is clear that childcare center requires service standards and the standards vary depending of the type and modalities of CDCC. And also, CDCC licensing is used as a reference for securing and protect for minimum requirements of adequate health, safety and other developmental aspect.

According to the KIW (1), the government offices use the NDCCD/2019 as standards of services there is no proclamation or National Act to regulate the quality services. And also, offices do not have competency certificate this is in turn no quality assurance institution to ensure the quality of childcare services, because childcare is a new phenomenon, and we do not have such an institution. There is no institution that provides a certificate of qualification.

4.6.4 Communication & Advocacy

For any activity and human endeavor, communication is crucial to the exchange of messages among people for the purpose of achieving common meanings. Communication and advocacy are interlinked working with decision-makers in support of a specific policy issue. On top of the above concept, the researcher investigates whether there is a communication strategy to create awareness raising and a common understanding among the community. MoWSA is the leading implementer and regulatory body which did not have a communication strategy according to the document review. As per the discussion with KIW (1), the community does not know the benefits of daycare, so there are few children who need services when the daycare centers are open this is because of a lack of communication on the benefit of CDCC.

Another important issue, there is the implementation of policy and the lack of leadership commitment so advocacy is essential to support the execution of the policy in the promotion of CDCC. The researcher certified there are no mechanisms of advocacy that support an idea or cause expressed through methods that influence the opinions and decisions of people and public organizations.

CHAPTER FIVE

Conclusion And Recommendations

5.1. Conclusion

The main objective of this study was to assess the implementation status of daycare centers as per the national child day care directives in the workplace of the Ministry of Health and Education of Addis Ababa with the aim of identifying the child day care service provisions at the government office and examining the components service provisions, administration's role in the accessibility, major contributions, and factors that hinder the of service provisions in the child daycare center.

The study shows daycare is an essential public service, that eases women's burden. The establishment of daycares in government institutions is a new strategy in Ethiopia that is adopted in accordance with a government regulation that was passed a year ago. Following the adoption of the regulation, few government institutions have started to establish daycare centers on their premises while others making efforts to start the service.

The findings of the expansion of CDCC supported policy formulation and implementation as of 2018 and also the government enacted. This has been a good opportunity and exhibited major achievements and lessons learned in the areas of implementation at workplace child care services. The finding of the study indicated, even though there is a policy and standard provision for CDCC in the country, the great majority of public institutions had problems implementing the policy.

The service package is mainly given in the daycare cleaning, feeding, clothing, and other services that are done to enhance the development and growth of the child. As noticed in the daily routine the package of services using the Montessori approach helps by encouraging them to play and make self-confidence and the children for independence.

All caregivers are women that do not have formal training on how to give services to children and there is no government institution engaged in formally training such staff. Besides, there is no judiciously designed curriculum and course syllabus for the training and education of

childcare professionals, and the areas of training addressed to come up with fulfillment of such occupational standards are not clearly known.

The environment setting is differently placed and they lack playgrounds as a result the movement of children was restricted to the interior part of the center. Material provisions were different in the study site; this was the result of the absence of regular quality service standards. Besides, child day care services have taken much of the attention of the policymakers and government for the last 50 years ago and many countries have developed systems and legislation, however, in Ethiopia, there is no specific regulatory and controlling mechanism, and as the nation lacks regulatory and controlling mechanisms. The services were given without quality standards and competence certificates. Lack of communication and advocacy is a barrier to improving the quality and establishment of the child daycare center.

Working in child day care services can have its challenges that can cause some barriers to overcome. Difficulty to get qualified staff at the market, and lack of a fixed national budget are some of the challenges of working in child daycare services in the government working place. In addition, leadership commitment is a vital role in the implementation of policy and related legal instruments regarding childcare services and women's empowerment, however, there was weak leadership commitment and an accountability mechanism has not properly established. Child day care centers should become involved in the efforts to resolve social problems in the parents, especially the low-paid parents who didn't receive social protection services. In general, the service requires government attention to implement the policy implementation.

5.2. Recommendation

Based on the findings of this study, the following suggestions and recommendations were made so that they will overcome the challenges and help them to provide secure and quality childcare centre contributes to the future development of a child and alleviate inequalities. Moreover, the recommendation mainly focused on the government leadership commitment to implement the issued policies and regulation in child care service.

- In order for the policies and strategies issued by children and women ministry to be implemented, stakeholders such as the Ministry of Women and Children, the Ministry of

Health and Education, and other stakeholders should work together to create conducive environment.

- Since children are the future of the nation they need priorities for preschool programs, the package of service quality standards should have a national proclamation/Act. Hence Ministry of Women and Social Affairs should take this responsibility by coordinating with key stakeholders to be accessible, affordable, and quality daycare service and develop accountability systems. Ministry of women and Social affairs should take responsibility for running child day care center. Therefore it needs to strictly make sure that a minimal level of quality standards in the program's facilities are maintained in licensing for child day care centres.
- The Ministry of Finance should allocate a fixed budget at the program level, as adequate budget is needed to ensure access to quality daycare services. The government, in collaboration with other stakeholders, should design a funding mechanism for wider space and enable the three years old children to be taken care of in the public day-care centres until they became five years old and eligible for Kinder Garden school.
- Develop clear monitoring and evaluation systems to ensure accountability for Child Day Care Centre implementation with government institutions, existing programs should address the gap in how Child Day Care Centre programs could implement as per the guidelines given.
- The ministry of education should make all the possible strives to start new caregiver training programs at least diploma level. The ministry should also prepare a new curriculum and syllabus to train caregivers meant to produce child care professionals with better knowledge, skill, and attitude on child development and care so they become professionals in their careers.
- The government in general, professionals at each level in particular, need facilitate an awareness program to the communities about the objective of the child day care center in collaboration with ministry of communication to get media coverage for the purpose. It is also advisable to strengthened institutionalize the coordination efforts through establishing a sort of sectoral/institutional network at all levels.

- The child day care centre of classroom and outdoor spaces, materials and equipment, and child-centred teaching through playing are important parts of helping children to acquire the skills and competencies associated with child day care centre provision.
- The low-paid parents cannot afford to cover the necessary materials and they couldn't able to offer balanced diet food for their children so the Ministry of Women and Social Affairs should advocate designing child-sensitive social protection like feeding programs in government institutions.
- Based on the fact that only a few children in the country have access to child day care centre services, government, in partnership with Ministry of Education and Ministry of Health to assume leadership in the provision of child day care centre services in the country.
- Since child daycare is a new phenomenon there are various gaps, so it would be good if the gaps that were not seen in this study were studied by other researchers to fill the gaps that were seen.

References

- Bretherton T. (2010). *Developing the child care workforce: understanding the fight or flight amongst workers*. Work place research center: University of Sidney; Commonwealth of Australia.
- Birhane Moges. (2021). *The Contribution and Challenges of Work Place Child Day Care Service: The Case of Addis Ababa General Wingate Polytechnic College And Ministry Of Trade and Industry Care Centers*. A Thesis Submitted in Partial Fulfillment Of the Requirement for The Degree of Masters of Art in Gender Studies. Addis Ababa (Unpublished).
- Cohen. (2015). A Brief History of Federal Financing for Child Care in the United States Sanfransisco: Center, anon profit legal service organization
- Connelly, R., Dong, X. Y., Jacobsen, J., & Zhao, Y. (2018). The care economy in post-reform China: feminist research on unpaid and paid work and well-being. *Feminist Economics*, 24(2), 1-30.
- Creswell, J. W. (2007). *Qualitative Inquiry Research Design*. California: Sage publication Inc,
- Ethiopian Federal Civil Service Commission (2020). Demographic profiles of civil servants in federal, regional and city administration offices, (unpublished).
- FDRE (2017). *National Children's policy*. Addis Ababa.
- FDRE (2019). National early childhood growth, development, care, and education policy. Addis Ababa.
- FDRE (2019). A National Report on Progress made *in the Implementation of the Beijing Declaration and Platform for Action*, (Unpublished).
- FDRE (2000). *Revised family Code. Proclamation No. 213/2000*, Federal Negarit Gazeta Extraordinary Issue, 2000, 1.
- FDRE (2004). *The criminal code. Proclamation No. 414/2004*. Negarit Gazzet, 9th year, Addis Ababa. Birhanena Selam printing enterprise.
- FDRE (2017). *National Children's policy*. Addis Ababa.
- Fisher, B., & Tronto, J. (1990). *Toward a feminist theory of caring. Circles of care: Work and identity in women's lives*, 35-62.
- Hein & Cassirer. (2010). *Work place solution for child care* Geneve: ILO
- Hiwot, B. (2019). *Work life balance of female physicians working in selected governmental*

hospitals in Addis Ababa, Ethiopia: Practices and challenges. A master's thesis, St. Mary University.

ILO (2018). *Childcare: A training manual for domestic workers organizations.* ILO regional office for Arab states, Beirut.

Karila K. (2012). A Nordic Perspective on Early Childhood Education and Care Policy. *European Journal of Education*, Vol.47, No.<https://onlinelibrary.wiley.com/doi/pdf/10.1111/ejed.12007>. Accessed on [June 12/2020](#)

Karila K. (2012). A Nordic Perspective on Early Childhood Education and Care Policy. *European Journal of Education*, Vol. 47, No. 4.

Kosher, H., Ben-Arieh A., & Hendelsman, Y. (2019). *history of the rights of the child.* Springer. New York.https://www.researchgate.net/publication/315862642_The_History_of_Children's_Rights/link/5c4c0b60458515a4c7410856/download

[https://www.britanica.com/search?query=about child care](https://www.britanica.com/search?query=about%20child%20care)

ILO (2016). *Trends of Women at Work.* International Labour Office. Geneva.https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/---publ/documents/publication/wcms_457317.pdf

Lymardo C., Sweeney T., & Taylor L. (2016). *Early Learning Career pathways initiative: Credentialing in the early care and education field.* https://www2.ed.gov/programs/racetothetopearlylearningchallenge/pathways/el_pathways.pdf(Retrieved on 27/12/2022).

Moussié R. (2016), *Child Care from The Perspective of Women In The Informal Economy,* Wiego A Policy Brief for The Un Secretary-General's High-Level Panel On Women's Economic Empowerment.

Maundeni, T. (2013). *Early Childhood Care and Education in Botswana: A Necessity That Is Accessible to Few Children.**Creative Education*, Vol.4, No.7A1, pp. 54-59. https://www.researchgate.net/publication/276493355_Early_Childhood_Care_and_Education_in_Botswana_A_Necessity_That_Is_Accessible_to_Few_Children.

Montilla M., D., Twombly E., C. Vita C.D. (2001). *Models for increasing child care worker compensation.* *Charting the society*, No.8. The urban institute.

MoWCY (2018). *Directive for Federal Government offices' day care services* (Unpublished).

- Mustard, J., F. (2010). *Importance of early childhood development. Encyclopedia of early childhood development.*<http://www.childencyclopedia.com/sites/default/files/te-xtes-experts/en/669/early-brain-development-and-human-development.pdf> , Accessed on 20/12/2021.
- National Employment Policy and Strategy of Ethiopia. (2019, AA (Users/T-Pc/AppData/Local/Temp/ETH89584.pdfs:(Accessed by inJan2,2022).
- Neuman & Devercelli (2012). *Early Childhood Policies in Sub-Saharan Africa: Challenges and Opportunities Development Network.* The World Bank. International Journal of Child Care and Education Korea Institute of Child Care and Education 2012, Vol. 6, No. 2, 21-34
- Office of the Prime Minister (1993).National Policy on Ethiopian Women.
- Proclamation No. 1064/2017.A Proclamation to Provide for Federal Civil Servants. Federal Negarit Gazzet, 24th year, No. 12. Addis Ababa 15th December, 2017.
- Proclamation No.1863/2021. A proclamation to *provide for the definition of the powers and duties of the executive organs of the federal democratic republic of Ethiopia* (Unpublished).
- UN (2020).*World fertility and family planning 2020 highlights.* Department of economic and social affairs, population division.
- Vernet J.P., & Butera F. (2005).Women, women's rights and feminist movements. Sage publications,London.https://www.researchgate.net/publication/258190172Women_women's_rights_and_feminist_movements.
- Vorster A., Sacks A. Amod Z., Seabi J. e Kern A.(2016). The everyday experiences of early childhood caregivers: Challenges in an under-resourced community<https://files.eric.ed.gov/fulltext/EJ1187078.pdf>. South African Journal of Childhood Education ISSN: (Online) 2223-7682, (Print) 2223-7674
- World Bank Group (2016). Wages and Employment in a Crowded Labour Market. 5thEthiopianEconomicUpdate.<http://documents1.worldbank.org/curated/en/463121480932724605/pdf/110730-REPLACEMENT-WP-thEthiopiaEconomicUpdatevweb-PUBLIC.pdf>. (Accessed on 15/12/2021).

Annexes

Annexe- 1

Consent Form

My name is Tsige Tadele. I am currently an MA student in the AAU, College of Development Studies Center for Gender Studies Department. The purpose of the question is to gather information to conduct research entitled; An Assessment of the Management of Child Day care Services in Federal Governmental Offices: The Case of the Ministry of Education and Ministry of Health, Addis Ababa Ethiopia. The data to be collected from this interview guide will be used only for the purpose of educational research. I kindly request you participate in this study voluntarily. The quality of this study depends on your genuine response.

You have been selected to participate in this study since you have been working in the center and coordinating the whole service. Your cooperation and willingness for the interview are very helpful in addressing the research objective. I want to assure you that all of your answers will be kept strictly secret. I will not keep a record of your name or address.

Participant's signature ----- Date-----

Thank you for your cooperation.

Annex-2 In-depth Interview Guide for Child Care Givers

Name of Research Site _____

PART I –Personal Information

Date of Interview _____

Name /Code of the caregiver _____ Sex M F

Age _____

Educational Status a) Grade 10 b) 10+2 c) Grade 12 D) Diploma E) Other profession/Skill -

Marital Status – a) Single b) Married, C) Divorce D) Other

Length of time of serving as a child care giver _____

Status of Occupation a) Permanent b) Not permanent c) other

PART II – Current Practice of Child Care Related Interview

1. How many other service givers in the Center? How do you feel about your interaction with parents and mates?
2. What are the kinds of services provided in the child day care center?
3. What are your daily routines as a caregiver of infants and toddlers? Explain step by step what you do throughout the day
4. How many children do you take care of in the center? M F
5. Do you refer to a kind of working document/guideline/standards regarding the services that you have given? If so, have you got training on the guideline/standard?
6. Do you like your job? Why? Is there any relationship between your work and sex? If yes how if no why?
7. Do you as a care giver have education, qualification or training related to caring of children? Describe the type of education, qualification or training
10. How do you preserve the health, hygiene and sanitation in the child day care center?
11. How do you interact with the children as a child care giver?
12. Do you think your wage is good enough?
13. 14. What problems and challenges related to services you faced so far while performing your duty as a child care giver?
15. What do you suggest to improve the service provision to children in the Child Day care centers?

Annex- 3 In-depth Interview Guide for Parents

Date of Interview _____

Research Site _____

PART I Personal Information

Code of the Parent _____ Sex M F Age -----

Educational status a) Grade 12 b) 10+2 c) Diploma D) Degree E) Masters F) PHD

Occupational Status _____ (a) Managerial (b) Core-staff (c) Support Staff)

Marital status a) Single b) Married C) Divorced

PART II _Status of Service-Related Interview

1. How old is your child you enrolled in this Child Day care center?
2. What are the services given by the center? How are they important to you?
3. What are your reasons for preferring the child day care centers for your child?
4. Have you ever encountered problems in relation to the proper handling (care giving) of your child? What part of the service do you think needs to be improved?
5. What are the challenges faced by child care centers in relation to service provision to the children?
6. were you satisfied or unsatisfied with the services?
7. Do you have the mechanism to participate in the practice of child care center?
8. What do you suggest to improve the quality-of-service provision by the Child Day care centers?

Annex- 4 In-depth Interview Guide for the manager (Focal person) in the organization

1. What is the organizational structure of Child Care Center? Do you have a manager? If not, who can organize the day care center?
2. Did you easily get Caregivers in the market with the required training? If not, what was the solution?
3. Which directorate/department is responsible for the child care center?
4. Have you been discussing with management about child day care center matter?
5. Does your organization allocate fixed salary and running cost for child day care center?
4. What are the challenges in child day care guideline implementation? What should be done stake holders?

Annex- 5 Key Informant Interview Guide for Government Officials

Part I - Basic information

Date of Interview _____

Name of interviewee _____ Sex M F

Work Position _____

PART II Interview questions- for Ministry of Women and Social Affairs

1. What is the number of Child Day care centers in government offices at national level?
2. How can you monitor or follow up the proper functioning of Child Day care centers in government offices? Do you have regulations? Standards? Proclamations?
3. Do you understand the current policy/regulation to fulfill the standard quality service of child day care center in government offices?
4. What problems or challenges have you faced in relation to ensuring the proper standard quality service provision by child day care centers in government offices? Please specify in terms of
 - A) Policy level/regulation
 - B) Financial/Budget
 - C) Trained staff
 - D) Physical Aspects of the child care setting
 - E) Qualification insurance
 - F) Child care standards
 - G) Communication/Interaction
6. What is the significance of child care center for the following points? Please specify
 - A) Working Parent
 - B) Promoting Gender Equality
 - C) National Economy
 - D) Social Protection

Annex – 6 Key informant Interview: -For Ministry of Finance

Date of Interview _____

Name of interviewee _____ Sex M F

Work Position _____

Interview Questions

1. Is there the program budget for child day care center in government organization? If so, is it enough?
2. How do you allocate the budget to establish a child daycare center and running costs?
3. How many government organizations do have a regular budget for child daycare centers?
4. Is there an agreement with your organizations and international organizations and other partners to support the implementation and establishment of the Child care center in government offices?
5. What are the challenges in child day care budget allocation? How can the challenges be resolved?

Key informant Interview - For Ministry Planning and development

Date of Interview _____

Name of interviewee _____ Sex M F

Work Position _____

Interview Questions

1. Is there a plan to expand children's day care in the country's ten-year perspectives development plan?
2. How can you evaluate the implementation of SDG 5 regarding reducing unpaid care work and child care development? As a coordinator body of Sustainable Development Goals in Ethiopia, would you please specify the following?
 - A) Coordination role
 - B) Implementation of Goal 5
 - C) Current Status
 - D) Challenges and the way forward

Key informant Interview for Federal Civil Service Commission

1. How do you describe the government's commitment to meet additional costs for those who are low-level income parents?
2. What are the challenges faced by the parent is using the service?
3. What is being done to implement the decree to establish day care centers;
4. What is the main job of the commission regarding child custody?
5. What is being done to allow permanent positions 4. How many permanent positions are allowed in how many offices

Annex 7: Focused group discussions Guide

1. What has been done so far to improve the quality of Child Day care centers?
2. What do you think is the need for child care center in the institution? Is it enough space compare to demand?

Annex-8 Daily routine provided and activities of care performed

S/N	Activities to be done	Time Am/PM	Frequency	Responsibility
	Clean the floor, the bathroom - Make sure toys are kept clean and in place Adequate space: Make sure there is a diaper sharp soap	8:00-8:30	2	CG
	Children's clothes, shoes; Have them put their lunch on the shelf in the living room.	8:30-9:30	2	CG
	change diapers - Allow those who want to go to the toilet	9:30- 9:50	> 4	CG
	To make children do what they want to do, paintings, movements, musical instruments, and other items designed for them.	9:50- 11:00	3	CG
	Get the children together and sing a hymn -	11:00 – 11:30	2	CG
	Launching time (Various activities to be performed here)	11:30 -12:30	1	CG/M)
	Bedtime	12:30- 2:30	1	CG
	Care giver launch time	:30-:1.00pm 1:30- 2:30	1	
	Prepare and use popcorn for kids	2:30-3:30 pm	1	CG
	Get the children to come together and sing a common song – Playing outdoor games with older kids	3:30- 5:00pm	1	CG
	Daily review	5:00-5:30pm	1	Manager