

# Pilot Childcare Responses

for

**Informal Workers in Public Spaces** 

in

**Durban, South Africa** 



Asiye eTafuleni

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# 1 Project background

#### 1.1 Defining the problem

Approximately 400 000 commuters travel through Warwick Junction, a transport interchange and informal trading hub situated in the centre of Durban. every day. The livelihoods of around 6000-8000 informal workers are sustained in the area. Of those, more than half are women. There are a number of women in the markets of Warwick Junction who are not only enagged in productive labour (i.e. as informal traders), but also reproductive labour (i.e. raising a child). These women have a right to work and a right to physical and mental health and their children have the rights to care and other interventions that optimise their health and development. However, the settings in which these mothers work, leave them vulnerable to gender inequity, environmental hazards and structural disadvantages. These often compromise their ability to care for their children in the way they would choose, as well as compromise their own health.

The fact that these women are unable to take any time off work without sacrificing their income and/or their trading spaces means they are forced to either put

their children in the care of a family member or a childcare facility, or take their children to work with them. Their inconsistent and often low income means that the auality of childcare facilities that they can afford is not likely to be high; in the alternative, bringing up a child in their work environment - the streets of Warwick Junction - is unsafe. unhygienic and does not offer the child the stimulation that is so vital for optimal development.

It is important to note that while the text refers to both 'mothers' and 'caregivers', these terms are not used synonymously. In the South African context, it is a common practice for grandmothers, as well as other female family members, and - while less common - fathers in some cases. to take care of the children - both in and away from the market environment. On the other hand, the intentional use of the term



'mother' is informed by the WHO's focus on breastfeeding.

'This is my mother. She is the person that I work with. She sits right next to me. She helps me out with everything and also looks after my stall if there is something. [My sister] takes my child and sits with her. My sister keeps my child with her and she sleeps with her because they are selling inside the market. There is no shelter where I sell from. [name] is the child's father. He also takes my child and plays with her.' Informal trader mother

Another necessary detail is the target age group in our work. The WHO has strongly advocated for breastfeeding in at least the first six months of life and highlighted the first three years as being a critical period at which proximity between mother and child is key. Therefore, AeT's focus is on children between the ages of 0 and 3 years, with the hope that this project achieves greater maternal proximity at the critical age and promotes a safe and comfortable breastfeeding culture within the market environment.

<sup>&</sup>lt;sup>1</sup>'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 26.

<sup>&</sup>lt;sup>2</sup> 'Urban informal economies that work for mothers and children' Brochure by uLiNCs: Urban Livelihoods and Nurturing Care (2019) pg4.







Workplace arrangements for childcare in Warwick Junction Images Source: Angela Buckland

## 1.2 WHO uLiNCs overview

Between 2016 and 2019, Asiye eTafuleni (AeT) was involved in a collaboration called Urban Livelihoods and Nurturing Care projects (uLiNCs), together with international partners; Women in Informal Employment Globalising and Organising (WIEGO), Indian Institute for Human Settlements (IIHS), University of KwaZulu Natal (UKZN), and led by the World Health Organisation (WHO). The uLiNCs partners proactively worked with informal workers in a number of different sectors and settings, researching the local limitations to providing the critical components of nurturing childcare. This process was a means to identify effective, feasible, acceptable, and scalable



solutions that enhance the ability of mothers (working in the informal economy) to help their children reach their developmental potential, while sustaining their own livelihoods and maintaining their own health. The initial work and funding was focused on the importance of breastfeeding but developed over time and became much broader – emphasizing the creation

of safer spaces for children of informal workers; developing financial support mechanisms for informally working mothers; improving effective knowledge for practice; helping mothers to better manage stress and their complex lives; improving policies around maternity leave; connecting mothers to health services in informal work settings; and creating awareness and knowledge within informal worker communities around childcare issues.

AeT chose to focus on the creation of 'safer spaces' as a way to improve the quality of childcare in an informal working environment while maintaining proximity between informally working mothers and their children.

# 1.3 WIEGO partnership

After the uLiNCs work, WIEGO secured funding firstly from the Echidna Giving Foundation -which has allowed us to continue working on the Safer Spaces idea, collaborating with WIEGO's Focal Cities Programme in Accra and KEN-ASVIT in Nakuru, Kenya, as far as this has been possible during a pandemic - and secondly from OSI - in the form of a small contribution specifically intended for the operation of the pilot The

focus of AeT's work to date has been on the design and development of appropriate infrastructure to enable a pilot 'safer spaces' intervention at two market sites in Durban.

<sup>&</sup>lt;sup>3</sup> 'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019).

<sup>&</sup>lt;sup>4</sup> 'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 43.

# 2 Safer Spaces concept

The focus on safer spaces was borne out of research – conducted over several years – which highlighted the lack of quality childcare facilities available to the children of informally working mothers, and the desire of these mothers to have a childcare facility close to their place of work.

# • Traders' perceptions and hostile attitudes:

Our research with trader caregivers and mothers revealed that when they are accompanied by their children this tends to foster hostile relations with surrounding traders, on account of the general disapproval of children in the marketplace. Some traders feel as if children are an inconvenience to their work whereas others believe it is irresponsible on the part of the mother to bring them into such a hazardous environment.

'There are many dangerous things that we work with here at the Market. So, as you can see the mother just left here is carrying her child in her back. If she puts her child down to play, here is the first thing that is dangerous, this piece of cable. This cable helps me to light up here but at the same time what does it do to the mother of the child? It hurts her. Leaving her child at home while she comes to work is also problematic because she is always worried about the child and cannot work properly' Co-worker

#### Economic implications of maternal childcare in the workplace:

Mothers who bring their children to their trading sites expressed a desire for mobile clinics and services that would enable childcare which would not affect their trading - as is the case currently. As it stands, when a child is sick, the mother usually leaves her trading post to take her child to a clinic and, in doing so, sacrifices her income. Furthermore, some mothers lose clientele on account of social and cultural attitudes towards nappy changing. With hygiene posing an economic threat some mothers attempt to conceal the changing of nappies from potential customers, so as to not deter them.

'There is space under the table. I first place cardboard pieces so that it will be a bit soft and then lay a blanket over them. It is a covered space. No one from the outside can see that I am doing something. I then change her' Informal trader mother

'To be honest it is not safe to work with children especially if you are working with food. The first thing is hygiene. It is difficult to ensure hygiene when you have a child because most of the time is doing something that is not right. In the end I resolve to not buy food from that person because it is unhygienic' Customer

The mothers who change nappies in public toilets are usually located in a trading space where it would be physically impossible to change a nappy. Some mothers take their children's waste back home with them so as to not foster hostile relations with surrounding traders and/or clientele.

'I change my child right here at the market. I take a cardboard box, put a blanket over it and change the child. I then take the used nappy and put it in my bag and take it home with me.' Informal trader mother

<sup>&</sup>lt;sup>5</sup>'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 32.

<sup>&</sup>lt;sup>6</sup> 'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 45.

<sup>&</sup>lt;sup>7</sup>'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 33.

• Childcare facilities: Most mothers who bring their children to work do not wish to do so. However, these mothers feel they cannot leave them at creches on account of various factors including the history of negligence and abuse in creches: their lack of proximity and therefore the inability to check on their babies: their costs: the fact that their opening hours do not usually coincide with the mothers' working hours; the impossibility of breastfeeding and the minimum age requirements of most creches. The mothers concede that their work environment is not conducive to optimal child development; however, they do not believe that there are any other available options that would achieve this.

'I wish the municipality could build us a crèche where we can go anytime to see our children, where there will be no restrictions to say because I saw my child at 11h00 I will not be able to see her at 13h00' Informal trader mother

Due to the historically racialised nature of spatial planning in eThekwini - and most South African urban contexts - most poor informal workers are relegated to the peripheries of cities. Thus, informal traders who reside in the city are usually far from their extended family support and those

that have not migrated to the city, commute great distances every day to aet to their place of work. Moreover, the lingering aendered nature of cities means that urban environments offer little in terms of child-care options. The mothers, thus, expressed a need for a nearby childcare facility, to be able to ensure that their children are safe and well looked after, and breastfeed them, if they are breastfed.

Safety appears to be one of the biggest issues experienced by all in the Warwick markets. While vehicular traffic is a prevalent safety hazard in a limited number of trading areas, crime is an issue experienced throughout the whole of Warwick Junction. The market environment is a crowded and bustling one made up of precarious constructions and unreliable infrastructural solutions. Mothers thus worry about their children being kidnapped; getting lost; being severely injured by unstable or falling tables/ structures or colliding with barrow-operators' trolleys.

'When you get here there are people that are passing by. Some are knocking your child down; others are pulling her, and your child might get lost. There is one lady that I used to work with. Her child was found at the [name] police station. When she got there,

the police swore at her and people beat her up. But she could not have tied her child to a table.' Informal trader mother

Government ECD policy is constrained - specifically the inappropriately idealistic standards that create an all-or-nothing approach, which results in the preclusion of any childcare model that does not fit within the narrow conception of formal childcare. Given the limited purview of the requlations, as well as the potential hazards of the markets' physical environments, the notion of 'safer spaces' emerged. This notion of 'safer spaces' became pivotal to the thinking and liberated the team to look for solutions from first principles, taking cues from the solutions that informal workers already deploy, redefining assumptions around childcare provision, hoping to advocate for workable, feasible and appropriate solutions.

'We do face challenges. The places that we sell from do not have shelter. We carry children on our back. They get burnt by the sun. They get hit by the rain. The children get sunburnt a lot. Those are the challenges that we face, that we do not know how we are going to solve' Informal trader mother

<sup>&</sup>lt;sup>8</sup> 'A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 37.

<sup>9&#</sup>x27;A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 21.







# 3 Regulatory context in Durban

There is no overall policy for early childhood development in the eThekwini municipality, however the municipality has promulgated a Childcare Facilities by-law, which came into effect in 2015. The by-laws set out specific regulations which need to be adhered to in order for the childcare facility to be registered by the Department of Social Development (DSD), or certified (with a health certificate) by the Department of Environmental Health.

The intention is to take advantage of the less onerous certification option (rather than formal registration) that is available to smaller. commonly home-based, childcare models. Through this, we believe it is possible to create micro-childcare facilities within Warwick Junction which adhere to the Durban Municipality's centre by-laws. [See, https://openbylaws.org.za/ za-eth/act/by-law/2015/ child-care-facilities/eng/]

The following details from the provisions are of particular relevance to the project at hand.

- If the ECD centre caters for six or less children, it does not need to be registered in terms of the Children's Act.
- ECD centres catering for six or less children, need only be issued with a health compliance certificate which is applied for through the municipality.
- An ECD facility that is registered in terms of the Act qualifies to receive a grant from the Department of Social Development amounting to R17 per child per day, although grant allocation is not guaranteed.

- However, in cases where ECD centres cater for no more than 6 children, and are thus only issued with health compliance certificates, the state grant is not applicable.
- Indoor play area needs 1.5m2 of free floor space per child. Outdoor play area needs 2m2 of space per child. If outdoor area is not possible then an additional 1.5m2 of indoor play area per child may be added.
- Children under 3 years old must be separated from children over 3 years old.

<sup>10&#</sup>x27;A study to explore work and childcare among informal women workers in Durban, South Africa' Centre for Rural Health, University of KwaZulu Natal (October 2019) pg 20

#### 4 Proposed pilot intervention

The overall concept for a pilot intervention was to design and test a facility that is micro-scale and pop-up in nature so that it aligns with the surrounding context, while still adhering to the regulations. In addition, a smaller facility will be easier and safer to manage, in what is already a compact and crowded informal trading environment.

AeT's intention is to provide infrastructure for a facility which offers mothers an affordable childcare option situated close to their place of work, so that their livelihood and childcare strategies do not have to disadvantage one another. In other words; the informally working mothers do not have to sacrifice their livelihoods in order to care for their children, and they do not have to sacrifice the healthy development of their children in order to sustain their livelihoods. While the concept of introducing several smaller facilities in the market environment - as opposed to one large facility - is necessary to comply with the regulations, it also creates greater proximity and accessibility to the mothers than one large facility could provide. This is due to the fact that the facilities would be interspersed throughout the trading hub.

This project is a pilot, which means that its purpose is to test whether the proposed infrastructure model actually works in this setting. The mothers have been ioint participants in this learning exercise, and their input at every stage of the project has been used to determine the design. If the childcare facility is to be operationalized in a sustainable way, the mothers themselves need to have agency over the project.

#### 4.1 Site selection

The AeT team identified spaces in the market which were either unutilized or under-utilized. Some of the spaces are under municipal authority and some are under national authority/parastatals. Some of the spaces are inside the markets, and therefore under cover, and some are more exposed. In



Brook Street Site Photos: Asiye eTafuleni order to make use of these spaces it is necessary to get permission from the municipality and to get buy in from the community leaders in the spaces. Given the density of the market environment, the small-scale nature of the sites has a areater chance of being approved by the relevant authorities: furthermore. their small scale results in the pilots appearing less threatening as a challenge to the policy.

The two spaces within the Warwick Junction area where the initial pilot mi-

cro-scale childcare facilities can be set up are in Brook Street – the street/open market site (left) - and the Early Morning Market – the covered market site (right). Community leadership and the senior market manager of the Early Morning Market have expressed support for a pilot implementation.



Early Morning Market Site

#### 4.2 Pilot Infrastructure concept

Drawing on the research, as well as prior knowledge of the AeT team from many years of working 'on the street', the conceptual proposal is for the distribution of 'pop-up' (micro-childcare) facilities throughout areas of the city where there are concentrations of informal workers. Mimicking the processes that already operate in these spaces, the idea of the 'pop-up' is that they could be assembled every day and disassembled and stored away over-night, exactly in the way street trading functions.

Warwick Junction has storage facilities and there are informal workers known as 'barrow operators' who can be paid a daily fee to pack up the structure, take it to the storage and then set it up again the following day. Informal traders currently pay approximately R30 per week for storage of their goods and they pay the 'barrow operators' approximately R20 (USD 1.37) per day to transport their goods to and from the storage.

Through an iterative process, the design that emerged also takes contextual cues from the 'architecture' deployed by street traders i.e., tents for shelter; crates; and storage boxes on wheels - all optimized for transportation by trolley and compact overnight storage in a storage facility. It is part of the local municipal public space management policy, that all structures and goods are cleared away completely at night.

Referencing the ubiquitous street solutions, the original design comprised a large tent, with sidewalls, in two halves that can be erected together or separately, and two 'care crates' - modelled on street boxes in terms of size and material - designed to be multi-functional. The tent could be erected and dismantled daily if necessary and stored with the lockable boxes in a storage facility over-night. Affordability, maintenance, ease of operation (assembly/disassembly, cleaning, security etc.) were important considerations.

The design provided for the required 9m2 'internal' area for play/rest for 6 children, plus space for the care crates which encompass a nappy change station, 'potty', sick-bay cot/ private breastfeeding seat, food/bottle preparation, mattress, and equipment storage in fold out versions of the ubiquitous street boxes, under the tent. In a street/open market situation, the additional secure 12m2 required as an outdoor play area, could be defined by portable event style fencing panels.

The final selected site for the pilot of this version allowed for the tent to be erected in the space between some existing walls.

In the covered market version, a minimum of 18m2 of internal play/rest space is required in addition to space for the other functions. The site selected for piloting this version has sufficient space, all already under the large market roof.

# 4.2.1 Care crates concept

# 4.2.1.1 Local precedent



Storage boxes on wheels – which are made by street carpenters from freely available pallet wood and are ubiquitous on the streets of Warwick – provided the inspiration for the care crates which house the equipment and define the functional zones of the pop-up facility.



Typical traders' overnight storage boxes. Images source: Asiye

# 4.2.1.2 Care crate design process and learning

AeT works annually with VEGA, a tertiary creative design college, setting their interior and graphic design students a project that exposes them to the informal sector. In 2019 they were briefed to come up with solutions for the 'pop-up' childcare facility. Some of the students came up with very elaborate folding infrastructure ideas which contributed to a very constructive design development

process in our team.

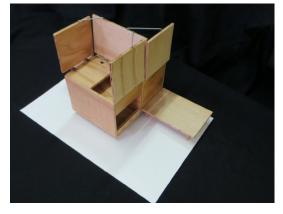
We tested the concept with drawings and scale models, before settling on two variations (that clip together) and making the full-scale prototypes.

Rendered versions of the care crate design. Photos: Asiye eTafuleni









Models of the care crate. Images source: Asiye eTafuleni

The size is based on the street-boxes, which are easy to man-handle through the streets and into the storage facilities. The care crates house the following equipment:

- 2 x 5l water dispensers
- nappy buckets
- waste bin
- nappies
- baby products
- cleaning products
- 'potty'
- changing mat

- a mattress for each child
- cooler box
- thermos flask
- curtains
- wash-up basin
- towels
- brush and dust-pan

The way that the care crates are arranged when unfolded defines a hygiene and nappy area, sick bay area, and the play area.

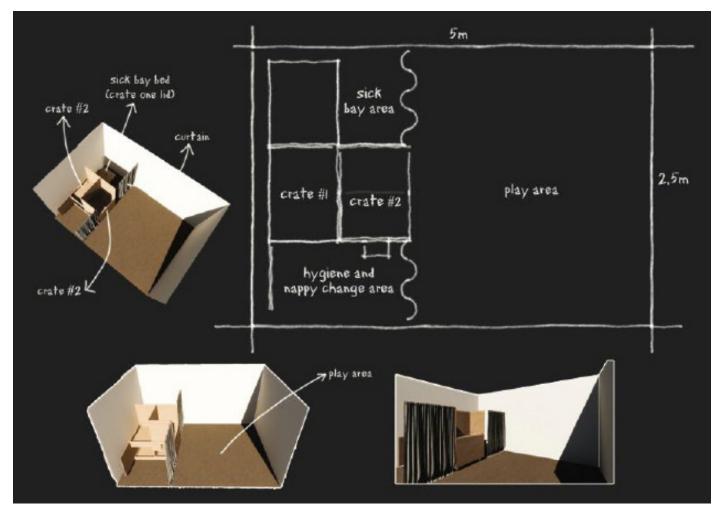


Illustration of the positioning and orientation of the care crates in the tent. Source: Asiye eTafuleni

# 4.2.1.3 Care crate DIY 'instructions'

The care crates are simply constructed from affordable ply-wood sheets and readily available hardware. For easy replicability the

technical drawings are available at [https://aet. org.za/resources/carecrate/].

# 4.2.2 'Tent' concept

# 4.2.2.1 Local precedent



Simple tented shelters, known in South Africa as 'gazebos', are a common street trading solution and as per the principle of referencing contextual norms we adopted this as a proven approach to the provision of temporary shelter on the street or in a market.



Typical street vending using tent structures/gazebos Images source: Asiye eTafuleni

# 4.2.2.2 Design process

Once we had established the appropriate size, taking the space requirement as well as probable locations into account, we ap-

Tent assembled in factory Images source: Asiye eTafuleni

proached tent manufactur ers to help refine the detail. We were concerned about weight, bulk and convnience, and the need to balance these concerns against durability. The resulting prototype tent structure is more cumbersome than we would like for daily erection and dismantling but will serve well for the initial pilot implementation (described later), and the experience of operating the pilots will inform further refinements. The whole facility was

erected at our offices as a demonstration and key stakeholders, including the identified users, officials, and childcare operators, were invited to comment. The feedback was extremely positive.







Community and stakeholder demonstration of pilot installation at Asiye eTafuleni premises. Images source: Asiye eTafuleni

#### 4.3 Brook Street Pilot

# 4.3.1 Site specific opportunities and constraints

The first site identified for a pilot implementation is in a large, partially covered, street market. This tarred 'road' - while still formally designated - no longer operates as such and is now entirely a pedestrian marketplace - with a roof having been constructed to provide protection to the market. There are some permanent kiosks, but all other trader equipment and

goods are packed away overnight in storage facilities. The site for our facility is tucked in between two kiosks and a boundary wall,

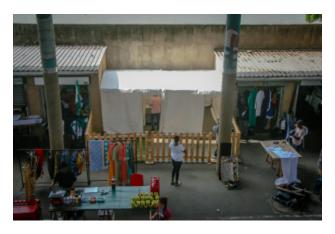


so is out of the way and partially protected - the market roof is very high and does not provide adequate shelter from the sun or rain on its own. We had hoped to place the tent forward of the adjacent kiosk frontages creating a protected play area behind, however in discussion the kiosk operators expressed concerns about obscuring views of their shops.

The prototype was erected just before the first COVID-19 related lockdown in South Africa so that stakeholders and market users could see it in-situ. Again,

the feedback was positive, including the response to our fencing solution to define the play area. The process highlighted that the time and effort needed

to erect our tent structure was impractical as a daily operation. A lighter, simpler solution, or additional assistance would be needed going forward.





Brook Street installation Images source: Asiye eTafuleni

# 4.3.2 Design development

The pandemic prevented operating the Brook Street pilot at that time, but the period of ongoing restrictions allowed time for further design development. This particular site allowed

us to consider erecting a permanent roof. The idea was tested through drawings, and 'artist's impression' type rendered design drawings were used were done to show what we intended. The delay gave us time to obtain the necessary buy-in from the market committee and permission from officials.





Rendered versions of the Brook Street design Source: Asiye eTafuleni

Refer to [https://aet.org.za/resources/care-crate/] for technical drawings.

# 4.4 Early Morning Market Pilot

# 4.4.1 Site specific opportunities and constraints

The second pilot facility is to be situated in the historic fresh produce market, which is roofed and secured over-night. Inside the market there are open stalls and stalls that have been enclosed with steel mesh screens. This provides the opportunity to test a different setting.





Initially we thought we might not need the tent structure, but the roof does not exclude birds and dust from the adjacent very busy road, so for hygiene and privacy purposes we decided to use the prototype tent structure. In this situation, it is not necessary to disassem-

ble the facility over-night, so once erected, the tent can stay in place.

We were directed to a pair of vacant stalls, one enclosed and one open but bounded by a wall. The space is sufficient to comply with the requirements of the regulations, although some maintenance and basic alterations to level the floor are required. The wall presents an opportunity for a mural. The market committee and manager supported the proposal and permission is in place



The advantage of the enclosed portion is that the care crates, equipment, and toys etc. can be secured overnight without having to be packed away.

# 4.4.2 Early Morning Market design

As in Brook Street, ideas were tested through drawings; and 'artist impression' type rendered design drawings were very helpful for stakeholders to understand the design.



Market design Market design Source: Asiye eTafuleni

Refer to [https://aet.org.za/resources/care-crate/] for technical drawings.

# 4.5 Proposed operating model for the pilot(s)

Some aspects of the operating model for childcare facilities are dictated by the regulations, however others depend on the specific circumstances of the operator and users. AeT has consulted with the initial cohort of mothers and caregivers, more recently with potential

participants in the delayed operation, and with experienced operators of other inner city ECD facilities, to design an operating model that will work for the unique circumstances. The sections below describe some of our deliberations and proposals, however it is only through

implementing the pilots that we may arrive at a proven system. The affordability is a particular challenge, and we accept that there may not be a viable solution without some form of subsidization, however the point of the process is to learn.

#### 4.5.1 Childcare workers

In terms of the regulations, one primary childcare worker as well as one assistant are required for a facility that accommodates 6 children. Our operating model thus proposes that 2 mothers or caregivers, having received the necessary training, operate as childcare workers, and are compensated, therefore.

Furthermore, arrangements need to be made for a roster of childcare workers, in the event that one or both workers are ill and/ or isolating. The two childcare workers on duty would need to ensure that the youngest children receive the necessary care while the older children receive the necessary stimulation.

It is proposed that, down the line, facilities could be built adjacent to the microECD centres for the older children of informally working mothers to access after school. These older children could thus help in the child-caring duties of the younger children and babies.

#### 4.5.2 Childcare worker training

There are several organizations in Durban which offer childcare worker training. Through desktop research, potential courses were identified which are only a few days long and equip the future childcare workers with all the essential skills needed for childminding such as hygiene, feeding and nutrition, learning through play, life skills, child specific first aid and so on.

The initial cohort of mothers

identified for a pilot intervention were trained. Going forward, mothers who show interest in taking part in the communal operation of the Warwick Junction childcare facilities will be required to undergo this training.



#### 4.5.3 Affordability

Prior to the pandemic, AeT explored the idea of a 'time bank/peer-to-peer' model for the operation of the childcare facilities in the Warwick Junction markets. This would entail each mother (of those who leave their children at the facility) being responsible for caring for the children in the facility for an equal period (ideally each mother would be responsible for a one-day time equivalent per week, from Monday to Saturday). This idea emerged from the results of the research which indicated that the mothers could not afford to pay very much/at all for childcare.

The time-bank idea was not embraced. Instead, the mothers proposed the idea that two of them would look after the children every day (there were two mothers who volunteered for these positions) and each of the other mothers would pay R5 per day to those women in their roles as childcare workers. In order to ensure that the salary being earned by the childcare workers aligned with the street market value, AeT will need to subsidize the remaining portion of their salaries, and this was agreed to in principle.

Before the operational model could be trialed, South Africa went into its first COVID-19 motivated nationwide lockdown. Considering COVID-19, there appears to be even more resistance to the time-bank option, given the economic pressures and competition in the marketplace.

Most mothers feel they do not have the means to be giving up income-bearing hours. That said, the exacerbated poverty resulting from the COVID-19 economic downturn, has left them in a position where they do not feel they can commit to paying anything at all for childcare In light of this harsh reality, AeT intends to subsidise the costs for the pilot - in order to be able to test the operating model. However, this is not a sustainable solution, and we hope to collectively find a way to overcome the affordability hurdle. The long-term goal is to eventually influence policymaking in ways that might enable state subsidisation for childcare models other than formally registered ECD facilities.

#### 4.5.4 Number of children accommodated

The research indicated that some of the mothers do not work every day. This is partly due to the fact that, depending on the market and goods or services being traded, specific days are more lucrative than others, but during the pandemic intermittent trading has been the case for increasing numbers of traders. This could potentially pose a problem for the operat-

ing model, as there might therefore be days where there are no or a small number of children present. It is therefore proposed that there be a pool of more than 6 children of parents in varying trades/markets to ensure that the facility is being used to its maximum capacity on any given day. The intention would be to ensure that the 'off-days' of certain trades overlap

with the 'working days' of other trades ensuring maximum compliance with the regulations while enabling access and enjoyment of the facility to an increased number of mothers. The pilots would thus serve to highlight what the size of the pool could be, taking into consideration the overlap of 'working' and 'off' days amongst the various trades.

#### 4.5.5 Breastfeeding function

The childcare facilities will serve the additional purpose of promoting breast-feeding amongst informal trader mothers. As has been demonstrated, many mothers do not breastfeed on account of the hostility it fosters from other traders. The facility would thus provide a pri-

vate space for mothers to breastfeed. In addition to encouraging breastfeeding, the facility will provide a discreet nappy changing station – for use by mothers who keep their young babies with them. The logistics around who will enjoy access, and on what terms, has yet to be resolved. COVID-19 sanitation and distancing protocols will be observed. Furthermore, the facility has enough space to accommodate only one breastfeeding mother at a time which will, in turn, result in social distancing protocols being observed at any given time regardless.

# 4.5.6 Operating hours

One of the main challenges faced by informally working mothers in respect of formal ECD centres is the operating timeframes. The Early Morning Market for example starts at 6am and ends at 6pm on certain days during the week. Usually, formal childcare facilities open at approximately 7:30am. (after the mother

sets up her stall and starts her trading for the day) and closes at approximately 5pm (before the mother finishes her trading and packs up her stall at the end of the day). This time-frame is especially limiting if the mothers commute into town for work and their childcare options are near their home. Therefore, the

micro-childcare facility must propose a solution that aligns more closely with the working hours of the mothers and thus operates in accordance with the operating hours of the markets and trades. The most appropriate operating times will emerge from the pilot, as it becomes clear what works best for the mothers.

# 4.5.7 Setting up and packing away.

At the Brook Street site, now that a permanent roof is being installed, there is no need to erect a tent each day. Fabric 'tent' sides will be hooked onto the roof structure to provide enclosure, floor covering unrolled, and the fence will

need to be put in place. This infrastructure and the care crates will need to be brought from storage and set up daily. At the end of the day, after cleaning up, the reverse process will be necessary. Barrow operators, to be paid by AeT for the pilot, will assist.

At the Early Morning Market, the tent and all equipment can remain in place. The childcare workers will be responsible for keeping the facility clean, and for sanitizing as per the COVID-19 protocols each day.

#### 4.5.8 Security

The mothers will sign in their children every morning and sign them out at the end of the day. The mothers will need to provide at least one emergency contact who will be authorised to

pick up their child in their absence - provided this person has the necessary proof of identity. No-one else will be authorised to remove the child from the facility. The small-scale nature of the operation will enable the childcare workers to account for all the children at any given time, which will ensure that the children are safer.

#### 4.5.9 Food Storage and preparation

The facility will not offer food and bottles, therefore mothers will have to provide their child's own food/milk etc. Keeping food fresh/cool is possible using a cooler box, and there are ice vendors in the area. One of the challenges will be the

heating up of bottles, food etc. without any available electricity. A thermos flask could work for hot water. Research into alternative energy sources has not yielded viable results, however we believe that the childcare workers might come up with their own arrangements once they start operating.

It is for these very reasons that pilots are established – to flesh out the finer details, and to see what solutions emerge organically.

# 5 Impact of the COVID-19 Pandemic

In March 2020 South Africa went into a nation-wide lockdown. For 5 weeks, only essential services were operational. Childcare was not included as an essential service. Informal workers were one of the hardest hit demographic groups due to the already existing insecure nature of their work, and the fact that many of them do not have savings to fall back on due to their meagre incomes.

# 5.1 Pandemic impacts on women traders and their childcare choices

In April 2021, AeT conducted research to determine how the pandemic and subsequent lockdown had impacted informally working mothers. Below is a summary of the findings.

#### 5.1.1 Loss of Income

Many informal workers are earning less than they were before the pandemic, which makes it harder to pay for childcare. Consequently, some childcare facilities have been forced to close down. Some women reported that their increased childcare re-

sponsibilities have further reduced their ability to work which has led to a reduced income or no income at all. This has led to an increased dependence on government grants. Many informally working caregivers receive child grants, and in times of crisis, as is current-

ly being experienced with COVID-19, they fall back on this as a safety net. This is problematic as the money that is intended to support one child is now, in many cases, being used to support families.

# 5.1.2 Shifts in Childcare Responsibilities

It was observed that in many cases – due to the lack of affordable, accessible childcare options for informally working mothers – the responsibility for childcare is being placed onto older siblings, who are then unable to attend school. Grandparents are also commonly entrusted with care work, and although they may have the ability to keep a child safe while

their primary caregiver is at work, they are not necessarily able to provide the stimulation that is so vital to a child's development.

#### 5.1.3 Lack of Safety in the Markets

Caregivers do not feel that the market is a safe or hygienic place for children. Furthermore, the fear around the market's hygiene risks has increased dramatically over the past year. Inadequate access to

WASH facilities in Warwick Junction heightens fear and real risks of coronavirus infection. Although most of the traders have become accustomed to wearing masks, caregivers have noted that it is very difficult to make their children wear them. However, South African COVID-19 regulations do not require children (below the age of 6 years) to wear masks.

# 5.1.4 Lack of Government Support

At a national level, minimal support was provided, to informally working mothers who receive child support grants, in the form of an increase from R420 to R720 per month. Other than this, informally working moth-

ers were provided with no support, from any sphere of government.

# 5.2 Pandemic challenges and responses for AeT's pilot implementation

# 5.2.1 Post lockdown implementation challenges

Upon attempting to reinvigorate the project towards the end of 2020, several challenges presented themselves:

- The project had lost momentum.
- Some of the pre-selected children were sent to formal schools because they

were now of pre-school age.

- Extreme financial situations because of COVID-19 meant that many mothers could no longer afford childcare at all.
- Trained mothers no longer wish to give their time to the childcare centre firstly,

because their own children no longer fit into the requisite age bracket and secondly, due to COVID-19 financial pressures which have led to increased competition within the market environment, resulting in trading mothers feeling they cannot afford to leave their stalls.

# 5.2.2 Implications going forward

The implications of these challenges for implementation were as follows:

- A new cohort of mothers needed to be established.
- New childcare workers may need to be trained although the intention is that the two mothers, from the original cohort, who have

been through the Edubabe training will take on the role.

- The decision to substantially subsidise the pilot operations would allow the pilot to proceed, with the intention to learn as much as possible, and seek a more sustainable solution.
- It is not-negotiable that the mothers must pay something as a form of commitment to the project, however this will have to be negotiated as part of the start-up.
- The delayed implementation allowed time to refine the pilot design.

#### 5.2.3 Re-framing the terms of reference

The recurring waves of COVID-19 in South Africa, and a spate of civil unrest in the country, particularly affecting KwaZulu Natal, have repeatedly delayed the opening of the facility. This setback caused AeT to re-prioritise, and focus, rather, on the physical

design and creation of pilot childcare facilities as case studies which could serve as infrastructural models for different public and informal trading settings in other South African cities and beyond. The same childcare challenges exist in most informal work environments in South Africa, and in similar contexts across the globe. The intention is to lay the foundation for innovative solutions in similar environments, while developing an immediate solution in Warwick Junction.

#### 5.3 Pandemic protocols

In order to operate the pilot facilities, it was necessary to develop specific protocols for COVID-19. A protocol document was prepared with the assistance of Prof Rajen Naidoo of UKZN Discipline of Occupational and Environmental Health. This document is available at [https://aet.org.za/resources/covid-19-child-care-guidelines/].

# 6 Learning and ideas for replicability

The project is aimed at providing childcare services to two main target groups – market vendors and street vendors. These trades are not limited to Warwick but are common across the whole of Africa – African streetscapes often resemble each other because of their shared colonial ties.

The ideal environment – for replication of this design concept – would consist of some basic infrastructure as a point from which to depart. Many urban African environments have retained, to some extent, their colonial infrastructural remains.

This project has a primarily gendered agenda. The plight of the predominantly female informal trader population, living and working in gender insensitive spaces is not unique to eThekwini. This is a product of a society built on patriarchal and colonial standards – and is hence a ubiquitous reality across Africa and many developing cities in the world. The desired replicability of the design is thus inherently linked to our wider mission. This wider mission is to create public spaces that are fully enabling of inner-city work – whether that be productive or reproductive work – and thus advocate for the overdue, but nevertheless radical, transformation of the urban space. For as long as these deeply embedded principles of gender intolerance and discrimination are observed by people at an infrastructural level, the societal changes that are so needed will never be born.

#### 6.1 Context specific response

The two ECD facilities in Brook Street and the Early Morning Market, were designed specifically to be well integrated in their respective contexts and to respond to their particular contextual challenges. The designs themselves attempt to reconcile the regulations; the infrastructural limitations; the community's buyin as well as the operating systems of their respective settings.

Through international research and correspondence, it has become clear that some fellow African

countries (e.g. Kenya) do not have regulations governing ECD facilities. Within Durban, the regulations were initially perceived as being too restrictive and stifling the design process, however in engaging with those who are struggling without the direction and guidelines that regulations provide, it has become clear that in Durban we are fortunate to have a framework in place. That said, we believe the Durban pilot interventions will also provide an affordable, small scale, adaptable model for testing in environments where there are no regulations.

#### 6.2 Learning by doing

If one accepts the notion that law determines what is socially acceptable then by inference one ought to accept that it is necessary to amend the legal position to prompt a shift in societal values and attitudes around informality.

At the heart of the skewed nature of these regulations, is resistance to accommodate for the changing nature of our cities and the ever-growing informal sector. The regulations clearly envisage the ECD facilities being established in residential zones and not in dense urban environments. There is little provision for the environmental and infrastructural challenges of informal urban living. This is symptomatic of a system that is in denial of the outdated nature of colonial urban planning.

It is with this in mind that AeT's proposals take the form of a provocation – there are aspects of the designs that deliberately do not fit within the restrictive parameters set out in the regulations.

One of the immediate goals is to erect the facilities. These will then function as pilots, so as to test their functionality, while simultaneously assessing whether they will be given formal clearance – depending on

the officials' flexible or rigid application of the regulations.

Within a space such as Brook Street, the entire facility should be disassembled and packed up at the end of the day. Firstly, this echoes the way in which the market operates and secondly, this is necessary considering after-hours theft of materials. The first demonstration installation at the site showed that this process was going to be onerous as a daily event and prompted some review. The particular site allows for the simple erection of a permanent roof structure, which we now have permission to do. All other components will still be packed up for overnight storage as originally planned.

The required fencing of the play area is a prime example of the disjuncture between the reality of informal environments and the mandated regulations. The regulations require the fence to be 2m high however it would be very impracticable to have a fence that large and cumbersome, as it must be transported to a storage facility every day.

It is assumed that the 2m high fence is intended to prevent children from es-

caping the facility but also to prevent child-abduction. However, in the instance where it is a small ECD accommodating only 6 children with 2 childcare workers – then it is less likely that such an event would be able to occur unnoticed. Furthermore, in these environments informal traders work in very close range with one another: this in turn generates strong community solidarity. When someone attempts to steal from an informal trader the whole community usually rallies together, often taking the law into their own hands. If the community supports, the ECD facility then it is more likely that neighbouring informal traders would keep an eye over the facility and would step in if the children were in danger. The community would thus be a greater line of defence for the children's safety than any fence could be.

For the purposes of the pilot, the Brook Street fence, as presently constructed, is made of freely available pallet wood. It does not meet the required height but has minimum horizontal slats making it impossible for a child to climb and is designed in sections that fold up and flat pack for easy storage. Upon operation, we will mediate an appropriate height that is both

practicable for installation purposes as well as appropriate for child safety – with the hope that the adapted fence will be accepted by the officials as achieving the purpose for which it is sought.

It is for this exact reason that the pilots (EMM and Brook Street) need to be erected and the service launched in order for us to gauge the real time responses and recommendations, from those directly involved, as to how to rationalise the design.

Another aspect to negotiate is the suitability of the design for all the parties involved – not only the children. The design must work

for the childcare workers involved. One of the challenges in Warwick is the lack of formal water and hygiene infrastructure. The proposed system involves a water container to be filled daily, and a bucket for the diapers - which would be emptied when necessary. This might not be feasible for the childcare workers involved; and might be a source of future conflict with surrounding vendors, for example where food is sold, and hygiene becomes a concern.

The challenge does not lie in purely meeting the standards laid down in the regulations, but in being accepted and adopted by the communities involved. This will, ultimately, only become apparent in the proof of use. Therefore, there is a compelling need to get the operations up and running and to get stakeholders in the spaces.

What this project seeks to achieve is for the whole concept to be completely embraced and embedded by all stakeholders. Ultimately, this will cause a seismic shift in the way in which informality, gender and childcare interrelate; and make the idea of public space childcare normative and achievable in safer and more contextual spaces.

#### 6.3 Environmental cues

Making use of equipment and building materials that are recognisable and readily available has been an important principle of the design of these facilities. This principle empowers the community to maintain and replicate these facilities in their own capacity.

In the Warwick area, the

care crate emerged as a way to rethink and transform an existing and commonly occurring 'street' solution (a storage and transport unit).

The Brook Street fence is another example of this principle – it is made of pallets which are sold – whole or in plank form – in the adjacent markets, and the construc-

tion is within the ambit of the local street carpenter. The material components are part of the street and market ecosystem. The nature of these readily available materials and skills will differ depending on the context, but the principle is important for sustainable replication in alternative contexts.

# 6.4 Local replication

The aim is for these pilots to be self-seeding. The Warwick markets are connected to many transport hubs – hundreds of thousands of people pass through the markets every day on their commute to work. The hope is that some people might see the facilities and care crates in operation and be inspired to replicate the concepts in their hometowns e.g., Isipingo to the south of eThekwini. It is thus important that the design and materials be fairly simple and attainable. AeT envisages that the design will be adapted and even

upgraded for improved functionality by those who are using the facilities and by those who are replicating them. As such we hope that the concept and designs will build up their own momentum as they adapt to similar contexts.

## 7 Conclusion

The real learning from this project will only start when the pilot facilities are operational, however the work to date has enabled that to be possible. Oversight, critical observation, and regular follow up engagements with the mothers and childcare workers will inform the way forward. We hope that these will provide valuable learning and evidence for ongoing advocacy to ensure that there are appropriate childcare solutions for informal workers' children in the future.