

# **LEARNING BRIEF**

## **High Social Value, Fragile Systems:**

**Lessons from the WICC  
Study on Childcare Provision  
and Use Among Vulnerable  
Households in Kenya**

# INTRODUCTION

Across the world, childcare is central to children’s well-being and to women’s participation in the labour market — yet in many low- and middle-income countries, particularly across sub-Saharan Africa, it remains underdeveloped and largely invisible within policy and economic planning. Kenya is no exception. Despite its foundational role in sustaining households, enabling women’s work, and shaping children’s developmental trajectories, childcare in Kenya is predominantly organized through informal arrangements, private negotiation, and women’s unpaid or underpaid labour.

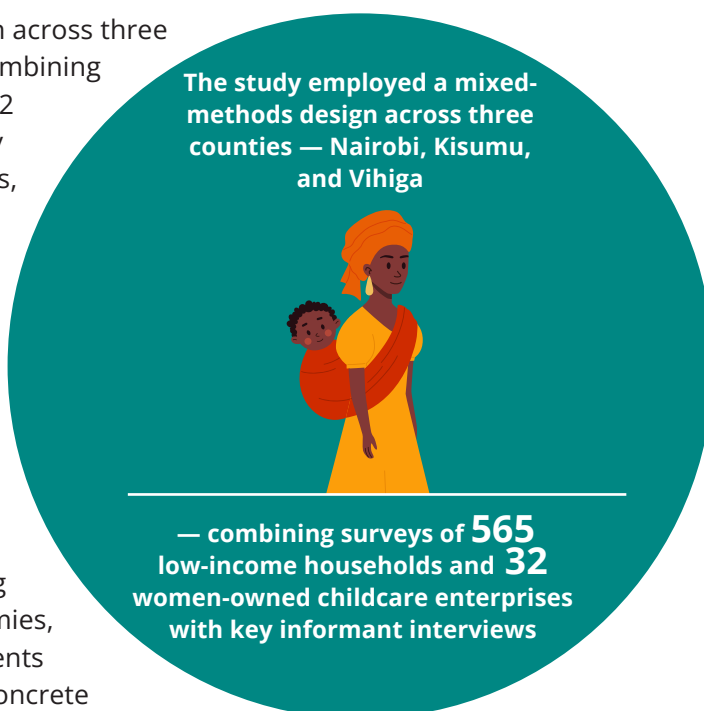
It is treated as a private household matter rather than as a system shaped by markets, social norms, and governance choices — and this framing carries a real cost. Where childcare is rendered invisible in policy discourse, its realities go undocumented, its inequities go unaddressed, and its potential as a lever for economic and social development goes unrealized. This is especially consequential in low-income settings, where the stakes of policy inattention are highest and the gap between need and provision is widest.

## Purpose of This Brief

This learning brief synthesizes key insights from the Women in Childcare (WiCC) study conducted by ICRW Africa — one of the first comprehensive, mixed-methods investigations of childcare provision and use among poor households in Kenya. The WiCC study draws on perspectives from vulnerable households, women-owned childcare enterprises serving low-income communities, and system-level actors to examine how childcare is arranged in practice, what constraints families and providers face, and how those constraints are navigated in the absence of adequate formal support.

The study employed a mixed-methods design across three counties — Nairobi, Kisumu, and Vihiga — combining surveys of 565 low-income households and 32 women-owned childcare enterprises with key informant interviews, focus group discussions, and in-depth interviews involving caregivers, providers, and policy actors. This multi-level evidence base makes it possible to examine not only household demand and provider supply, but also the governance and financing conditions that shape how childcare systems function in practice.

Drawing on this evidence, the brief is intended for policymakers, practitioners, investors, and development partners working to strengthen childcare systems, care economies, and women’s economic participation. It presents six interconnected findings and closes with concrete implications for action.



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## KEY FINDINGS

The evidence points to a central and self-reinforcing tension: childcare delivers significant social and economic value by enabling women’s work and supporting children’s well-being — yet in many low-income communities it operates within a fragility trap. Families cannot consistently afford to pay; providers therefore survive on thin and irregular revenues; investments in quality and safety remain chronically under-financed; and the governance and support systems that should underpin the sector are fragmented or absent altogether. Breaking this cycle requires simultaneous attention to household affordability, enterprise sustainability, and enabling governance — not sequential action on each in isolation.

### Finding 1: Childcare is widely recognised as essential, yet unmet need remains high



Across all three study counties, caregivers consistently describe childcare as indispensable to women’s ability to work, seek livelihoods, and move safely through their day. Childcare centres are frequently the only alternative to leaving children unattended, at unsafe work sites, or in the care of overburdened relatives.

#### KEY INSIGHT

Unmet childcare need is highest where household incomes and support networks are weakest.

This is not a coincidence — it reflects a structural alignment between poverty, informality, and care gaps that policy must address as interconnected, not separate, problems.

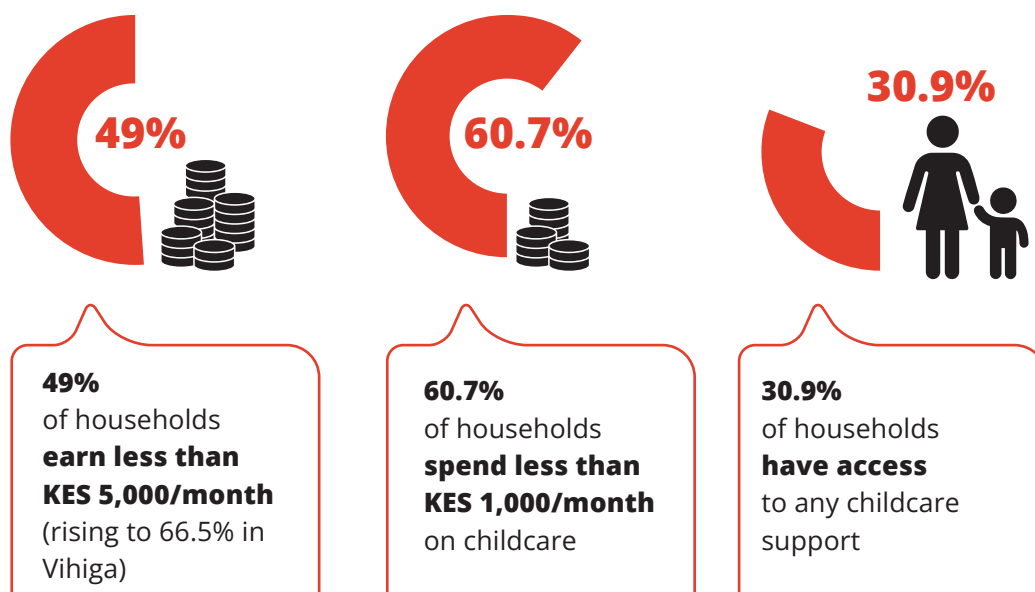


“I would be very happy to find somewhere safe to leave my child, because a marketplace is not a safe place for a child.”

— Caregiver,  
Nairobi

## Finding 2: Household strategies are shaped by affordability ceilings and deliberate risk management

Household decisions about childcare are strongly shaped by income constraints and the unpredictable nature of informal work. Most households surveyed had one child under five (72.1%), while 23.6% had two or more, reflecting ongoing and repeated care responsibility rather than one-off need. The burden is also mediated by household structure: nearly half of household heads were female (48.3%), with Nairobi recording a particularly high share (64.2%) — reinforcing the close link between childcare access and women’s economic participation.



Families respond to these constraints through deliberate mixed strategies — combining family members, neighbours, home-based carers, and childcare centres depending on availability, cost, and perceived safety. These are not passive responses to poverty but active, if constrained, risk-management decisions. Even so, modest fee increases would force many to withdraw children from centre-based care entirely.



“When you don’t have money, you just leave the child with someone you trust, even if the place is not good.”  
— Parent, Kisumu

The reliance on trust-based informal arrangements in the absence of affordable formal alternatives reveals an important policy gap: households are making safety trade-offs they would prefer not to make. Demand for quality, affordable childcare exists. It is supply-side and governance failures that prevent it from being met.

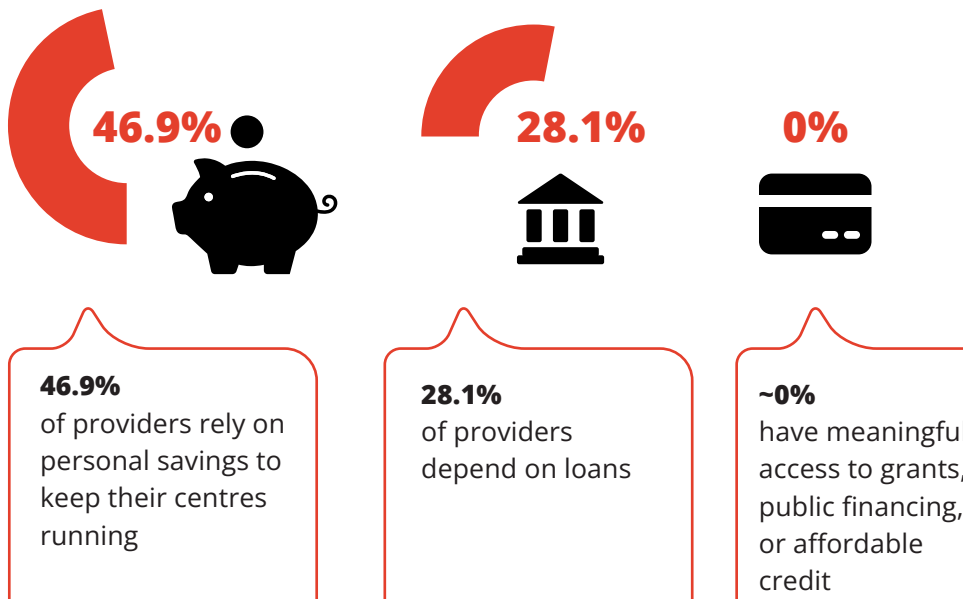
## Finding 3: Women-owned childcare enterprises are essential service providers operating under fragile conditions

Women-owned childcare enterprises function as frontline providers of care, early learning, nutrition support, and basic health linkages in low-income communities. Providers describe their role in terms that go well beyond business logic — as a form of social protection for families with no other options.

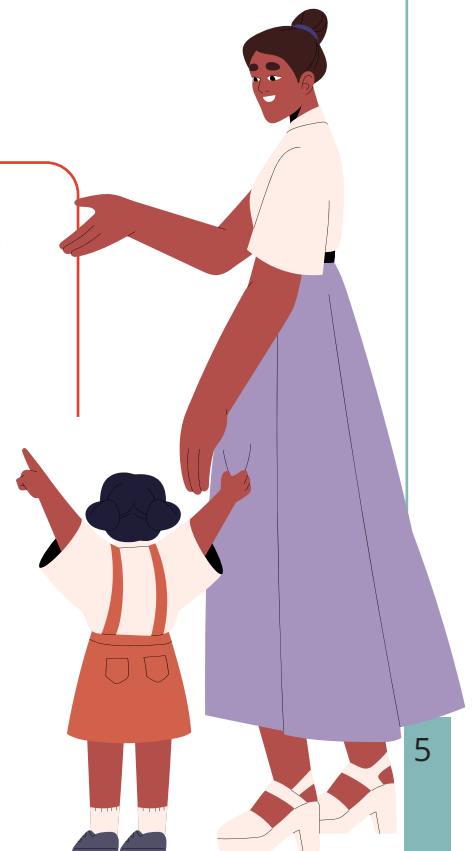
Yet these enterprises operate under conditions of persistent financial fragility. Only 48.4% of centres are formally registered — primarily as businesses or CBOs, not as ECDE centres. Premises vary significantly: 46.9% operate from their own buildings, 40.6% from rented spaces, and 12.6% from shared premises, with corresponding implications for child safety, sanitation, and environmental risk.



“I saw girls really struggling with children... parents leave, the children struggle because they don't get food. I saw it fit to stay with them.”  
— Childcare provider, Vihiga



Financial strain is pervasive: 22.2% cite inadequate funding as their primary constraint and 21.2% report unsustainable operational costs. Many providers subsidize childcare for households that cannot pay consistently, absorbing costs that households and the state are not covering. This constitutes an invisible public subsidy — provided not by government, but by low-income women entrepreneurs whose own livelihoods are thereby made precarious.



**KEY INSIGHT**

Women-owned childcare enterprises are doing the work of a social protection system without the resources of one. Their fragility is not a market failure alone — it reflects a governance failure to recognize and support providers who are delivering services of clear public value. Recognizing this invisible subsidy and redistributing the associated financial risk is one of the most immediate policy opportunities the study surfaces.

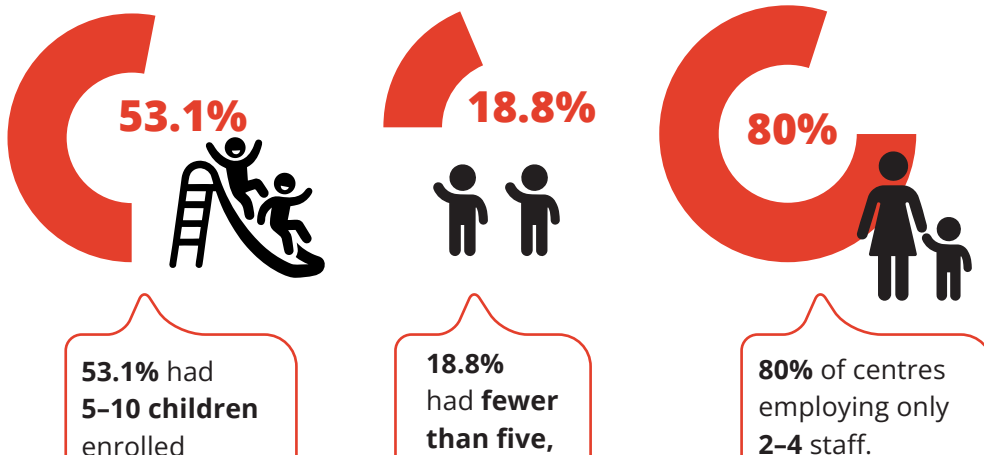
**Finding 4: Enterprise trajectories reveal both aspiration and structural constraint**

The study documents a continuum of childcare enterprise models, from very small home-based services to more structured centres offering early childhood education, health referrals, and nutritional support. Some providers demonstrate meaningful upgrading over time through reinvestment and accumulated experience. Even so, most centres remain small: 53.1% had 5–10 children enrolled and 18.8% had fewer than five, indicating that many operate at a scale that makes cost recovery and reinvestment difficult. Lean staffing is the norm, with 80% of centres employing only 2–4 staff.



“I began a home-based daycare... I started with 15 children... now I have 70 children here.”  
— Provider, Kisumu

**Most centres remain small:**



These growth trajectories are, however, far from universal. Several providers report fluctuating or shrinking enrolment linked directly to variability in household incomes — a reminder that enterprise viability in this sector is closely tied to poverty dynamics rather than business performance alone. These uneven trajectories reveal three important dynamics:

- Childcare provision is genuinely entrepreneurial: many women have built sustainable services from very limited starting points.
- The sector's growth ceiling is set by household poverty and affordability constraints, not by providers' effort or ambition.
- Enterprise support programmes that assume a stable and growing customer base will systematically underestimate how household-level economic shocks translate into provider-level revenue instability.

## Finding 5: Quality and safety improvements are constrained by financing gaps and weak governance

Quality assessments conducted across study sites reveal uneven performance. While basic infrastructure conditions are generally moderate, safety scores remain consistently low (overall mean of 1.6 on a standardized scale), pointing to significant gaps in child protection and risk mitigation. Support for learning and feeding is also limited in many centres, particularly in Kisumu and Nairobi.

Providers express genuine motivation to improve but describe financing and governance environments that make this extremely difficult. Regulatory requirements are frequently perceived as costly, unclear, and unsupported by practical guidance. Government programmes related to childcare are almost entirely unknown to providers.



“They tell you to meet the standards, but they don’t show you how or help you to reach there.”

— **Provider, Nairobi**

This governance gap has a direct operational consequence: providers are held accountable to standards they were not helped to meet, using resources they do not have. The result is not non-compliance out of indifference, but persistent informality driven by the absence of a credible pathway to formalization.

### KEY INSIGHT

Low quality is not primarily a provider motivation problem — it is a financing and governance design problem. Progressive quality improvement frameworks that begin where providers currently are, offer practical support, and create incentives for incremental improvement will achieve far more than compliance-only regulatory models that set benchmarks without support pathways.

## Finding 6: Childcare constraints are compounded by intersecting inequalities

Childcare challenges are not uniformly distributed. They are compounded by intersecting disadvantages related to gender, income, employment status, and geography — which means that those facing the most acute childcare gaps are also typically the least served by existing systems.

- Informal workers face irregular hours and unpredictable income flows that make consistent childcare use and payment difficult.
- Single mothers in urban informal settlements experience acute time poverty and weak support networks.
- Caregivers of children with disabilities face additional constraints, including limited inclusive services and higher care costs.



“Sometimes you want to work, but you are forced to stay because there is no one to remain with the child.”

— Caregiver, Nairobi



Caregivers of children with disabilities face additional constraints

These intersecting vulnerabilities have a compounding logic: women who most need childcare support to participate in work are often the women least able to access or afford formal childcare services. Interventions designed around an ‘average’ household will systematically miss this group. Disaggregated analysis — by household type, employment status, disability status, and geography — is essential for designing childcare policies that reach the most marginalized.

# IMPLICATIONS FOR POLICY AND PRACTICE

The findings collectively point to a clear conclusion: childcare systems serving low-income communities cannot be strengthened through market forces or regulation alone, nor through isolated programmatic interventions.

Sustainable improvement requires coordinated action across household affordability, enterprise viability, quality and safety, and enabling governance — simultaneously and at scale.

1

## Recognise childcare as economic and social infrastructure

Childcare enables women’s labour force participation and supports children’s development — two outcomes with substantial long-term economic returns. County and national governments, development partners, and private investors should treat childcare as infrastructure investment, not welfare cost. This requires dedicated budget lines, inclusion in economic planning frameworks, and recognition of childcare in national accounts and labour market strategies.



## Develop demand-side financing mechanisms to address affordability barriers



Households want quality childcare but cannot consistently afford it. Targeted subsidies, voucher schemes, conditional transfer top-ups linked to childcare use, or employer-linked childcare benefits for informal sector workers would reduce affordability barriers without requiring significant expansion of direct service provision. Pilots should prioritize female-headed households, single mothers, and households with children with disabilities — the groups with the highest unmet need.

2

3

## Create a dedicated financing and support pathway for women-owned childcare enterprises

Women-owned childcare enterprises are absorbing costs and risks that should be shared across the system. Accessible grants, subsidized credit, business development support, and group-lending mechanisms adapted to the informal care economy would reduce provider fragility, stabilize service delivery, and create the conditions for quality improvement.

Development partners and social investors should explore blended finance models combining grant funding with technical assistance to build enterprise resilience.

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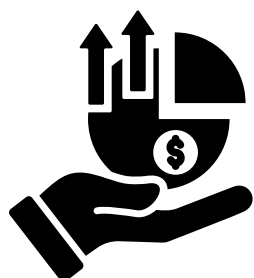
**Shift from compliance-only regulation toward progressive quality improvement frameworks**

The current regulatory environment sets standards without providing the resources or support pathways needed to meet them. A progressive framework — one that begins from providers' current position, offers practical training, ties certification to incremental milestones, and pairs inspection with mentorship — would be more effective at raising sector-wide quality. County governments are well-placed to develop and pilot such frameworks and should be resourced to do so.



**Build disaggregated childcare data systems and invest in continuous learning**

5



Policymakers currently lack the data needed to plan, target, or evaluate childcare investments effectively. Routine household surveys should include childcare modules; administrative data from county health and education systems should be integrated to track provider access, coverage, and quality. Systematic evidence generation — disaggregated by gender, household type, geography, and disability status — is foundational to accountability and adaptive programming.

**CONCLUSION**

The WiCC study makes visible a system that is simultaneously indispensable and overlooked. Women who run childcare centres and the vulnerable families who depend on them have already constructed a functioning — if fragile — childcare economy in low-income communities across Kenya, largely without formal recognition, financing, or support. This is both a testament to the resourcefulness of women providers and caregivers, and an indictment of the policy environment that has left them to bear these costs alone.

Improving childcare outcomes requires approaches that take this reality seriously. Rather than building parallel systems, effective policy should strengthen what already exists: by making it more affordable for families, more financially sustainable for providers, more coherent from a governance perspective, and more inclusive of the groups that current arrangements consistently fail to reach.

The evidence is clear: childcare is not a household concern at the margins of development policy. It is a structural determinant of women's economic participation, children's early development, and the wellbeing of low-income communities. Treating it as such — with commensurate policy attention, financing, and ambition — is both economically rational and socially necessary.

## WORKS CONSULTED

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**About ICRW Africa:** ICRW Africa is an independent, African-led and majority female-governed NGO based in Nairobi, Kenya, with a country office in Kampala, Uganda. It works to advance rights and opportunities for African women, girls, and marginalized communities through actionable evidence and solutions. Using an Afro-feminist and action-oriented approach, ICRW Africa conducts rigorous research, translates evidence into policy and practice, and convenes partners across sectors to drive gender-transformative change.

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