

ONTARIO EARLY CHILDHOOD EDUCATORS' UNDERSTANDINGS OF CARE,
CAREWORK AND CARE PRACTICES IN ECEC PROGRAMS

By

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ABSTRACT

Ontario Early Childhood Educators' Understandings of Care, Carework
and Care Practices in ECEC Programs
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This major research paper presents findings from a critical qualitative inquiry study, that includes how seven registered early childhood educators (RECEs) understand care, carework and care practices in early childhood education and care (ECEC). The study used a political economy of care theoretical framework. Findings suggest that RECEs feel: (1) their carework is devalued; (2) care and education activities are different; and (3) there are barriers to caring well in ECEC programs. This paper provides recommendations that can potentially assert the value of care in the ECEC sector and aims to modestly give a voice to the marginalized perspectives of RECEs on the value of their carework in ECEC programs.

Key words: Early childhood education and care, care, carework, registered early childhood educator, political economy of care, maternalism, feminization, marginalized, racialization, critical qualitative inquiry

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DEDICATION

I dedicate this MRP to all educators in ECEC programs who have ever felt devalued because of the work you do, your gender, or race.

I thank you for all that you have done, all that you do and all that you will continue to do. I am eternally grateful for your dedication to the early childhood education and care sector. I hope that this MRP, in some way, reinforces the value of what you do each day. I am humbled to know some of you and I am incredibly grateful to work alongside you in advocating for our worth.

I hope that this research reaches the ears of those who need to hear it and begins to identify us as valuable professionals who greatly impact the lives of children, today, tomorrow and every day after.

Warmest regards,

A handwritten signature in black ink that reads "Sophia Mohamed". The script is cursive and fluid, with the first name "Sophia" and last name "Mohamed" clearly legible.

Sophia Mohamed (she/her), RECE

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Chapter One – Introduction

According to the *Starting Strong II Report* by the Organisation for Economic Co-operation and Development (OECD, 2004), Canada is ranked at the bottom of a list of fourteen countries when it comes to their early childhood education and care systems (ECEC) (Mahon, 2009, p. 1). Some scholars suggest that Canada has remained an ECEC ‘policy laggard’ compared to other countries in the world. (McCuaig & Akbari, 2017; Mahon, 2009; OECD, 2012, 2014). Although the sector has grown in scope and size there continues to be an indifference from governments when it comes to ECEC policies and towards its workforce. With this political disregard, there has been little understanding of the complexity of the sector by society. Hence, the work done by the workforce is undervalued, underpaid and they continue to experience poor and precarious working conditions.

As a result, the voices and perspectives of Canadian early childhood educators (ECEs) are often missing and marginalized from critical dialogue when looking at workforce research, policy, practice and legislation. However, educators can bring a wealth of knowledge and experience to critical dialogue as they work in a variety of ECEC programs including: licensed childcare centres, schools, home childcare centres, hospitals, family support programs, advocacy organizations and politics. Canadian ECEs have rich experiences and perspectives in caring for and educating young children. Their voices have been marginalized for too long and it is imperative that their voices not only be heard but that their value and worth are also highlighted. To increase understandings of care and carework, voices, experiences and perspectives of Canadian ECEs need to be included in dialogue. As such, this study modestly contributes to critical dialogue and focuses around one central research question: How do Ontario Registered

Early childhood educators (RECEs) describe care, carework and care practices in early childhood education and care programs?

Qualitative interviews with RECEs were conducted to gather Ontario educators' descriptions and perspectives of care, carework and care practices in ECEC programs. Critical qualitative inquiry (CQI) was used as the research approach for this study. According to Denzin (2016), CQI "addresses inequities in the economy, education...and [supports] inquiries that embraces the global cry for justice" (p. 8). MacNaughton's (2003) critical framework relating to ECEC curriculum was adapted and applied for assessing how the findings conform to, reform, or transform the value of care and carework in ECEC programs by educators and society.

The motivation behind this study is my desire to deconstruct how RECEs navigate dominant discourses associated with the devaluation of care and carework in ECEC programs. Educators are no strangers to the devaluation that is part of dominant discourses. They are often regarded as glorified babysitters, possessing no real skills, doing work that anyone can do because, it is perceived as easy. This project aims to give voice and space to those who are often marginalized and impacted by the lack of understandings of carework. The purpose of this study is to contribute to beginning to think differently about care, carework and care practices in ECEC programs following a deeper understanding obtained from the perspectives of RECEs working in the sector. This study will modestly contribute to a growing body of literature surrounding the devaluation of care, the perspectives of RECEs on carework in ECEC programs, and potentially provide educators with a space to inform critical dialogue on carework.

Context

It is a pivotal moment in time for early childhood education and care (ECEC) in Canada. With a number of provincial elections behind us, a federal election on the horizon, conservative

governments in four of the thirteen provinces and territories amounting to an uncertain policy environment, it is imperative that the value of care, carework and the value of the ECEC workforce is better understood. Researchers suggest it is time to stop making care secondary to and not as important as education and reassert its worth in practice and policy (Ailwood, 2017; Langford, Richardson, Albanese, Bezanson, Prentice, & White, 2017). If care continues to be treated as inferior to education there will most certainly be negative impacts on the ECEC sector in Canada. If care remains an afterthought, the private, for-profit ECEC sector will continue to grow; this will result in more issues for families who cannot find high quality childcare and for educators who work in these centres. There will be no relief in fees for families as the market will be free to charge what owners deem as acceptable, resulting in childcare being treated as more of a commodity than it already is today. Moreover, the wages and working conditions of educators will not improve; workers will continue to be overworked and underpaid. Retention issues will worsen given that educators will leave the sector and work elsewhere, to earn a living wage (Child Care Now, 2018; AECEO, 2016). In this regard, more care scholars are noting that care and education in ECEC must go hand in hand, and that the divide between the two must be addressed (Van Laere, Peeters, Vanderbroeck, 2012; Ackerman, 2006, Broströ, 2006).

Theoretical Framework

To gain a better understanding of care, carework and care practices in early childhood education and care (ECEC), the political economy of care (PEC) is used as a theoretical framework for this study. ECEC currently functions within a care market, in which families and ECEs are expected to carry out their responsibilities privately. Having said this, there are facets of ECEC in Canada that have moved into the public sphere by means of subsidies, and federal programs such as the aboriginal Head Start program and Ontario Early ON Centres. However,

ECEC is still treated as a private responsibility for families, which as a result, relegates ECEC to the private sphere and reinforces the notion that carework lacks value in an economic system.

The Political Economy of Care (PEC)

The political economy of care is an approach that describes the place of care and carework in a society and assesses to what degree carework is valued in relation to social and economic infrastructure, organization and social reproduction (Mahon & Robinson, 2011). Historically, care was done in the privacy of the family; however, more care is being carried out by care workers in a market economy. According to Folbre (2016), care is a large and complex concept, one that has multiple meanings depending on where and how it is used. Mahon and Robinson (2011) suggest that “care” has two relative meanings: they argue that, first, care can refer to, “a set of activities and a form of labour focused on social reproduction including elder care, childcare, as well as other forms of household and domestic work” and that, second, care can be understood, “as the basis of a system of ethics in an economy” (p. 1). Yeates (2005) highlights that care on a socio-political level does much to connect the macro and micro dimensions of one’s life, suggesting that care “embeds personal practices within the context of social structures and social relations” (p. 227). This implies that the care economy extends across a wide range of systems other than childcare, eldercare or domestic carework. For the purpose of this paper, care will be defined as social reproduction activities that early childhood educators engage in when working with children. These social reproduction activities include what Duffy (2007) identifies as nurturant and non-nurturant carework. According to Duffy (2015), nurturant carework “includes workers whose jobs are typically understood to involve a significant amount of face-to-face interactions and relationships with those being cared for (nurses, social workers, teachers childcare workers, etc.)” (p. 5), Non-nurturant carework “ includes [occupations that]

support the direct provision of care (hospital janitors, school cafeteria workers, nursing home administrative staff, etc.)” (Duffy, 2015, p. 5). However, it is important to note that these social reproduction activities, for the purpose of this paper are contextualized and understood to take place within an economy, a system of ethics, and at the socio-political level.

Care in a Market Economy

A PEC analysis provides insights into how a neo-liberal market economy treats care as a commodity to be bought and sold. A commodity of ‘care’ is defined as, “custodial or maintenance help or services, rendered for the well-being of individuals who cannot perform such activities themselves” (Waerness as cited by Yeates, 2005, p. 228; Langford et. al., 2017). These services can be found in programs such as childcare in public non-profit centres, private for-profit centres and home childcare settings.

The commodification of care allows for private, for-profit expansion in the market economy, and a prime example of this can be seen in Ontario where expansion is no longer restricted to the non-profit sector. (Ministry of Education Early Years Division, 2019). This means that ECEC programs exist in an expanding rather than shrinking market economy where families purchase ECEC services of increasing poor quality, perpetuating the childcare crisis that already exists as a result of lack of affordability and access (Mahon, 2009). However, Tronto (2013) suggests that the nature of care makes it incomparable to other commodities. She suggests that care and its complexities require time and cannot be made more efficient (Tronto, 2013). Similarly, Armstrong and Armstrong (2005) highlight that the commodification of care sees “efficiency and effectiveness defined as costs saving, combined with the best possible quality” (p. 180). From an ethics of care perspective, care is about building relationships and taking the time to do so (Langford et. al., 2017; Noddings, 2012). Tronto (2013) stresses that when

commodification of care occurs it usually deals with the “degree of dissatisfaction with the way that care is provided” creating alienation of services based on the cost of that service in a neo-liberal market economy (p. 163).

In addition, Tronto (2013) contends that there is a great danger in looking at care as a commodity rather than a process, suggesting that “talking about care in terms of commodification begins to slip into thinking of the concomitant notion of scarcity (economics of supply and demand)” (Tronto, 2013, p. 164; Xenos, 1989). Commodifying care, in this case contributes to the ‘care crisis’ in relation to affordable, accessible and high-quality ECEC programs. Hence, Tronto (2013) emphasizes that “the complexity of care requires a political space within which to make” (p. 164) more complex public policies to address affordability and quality of ECEC in Canada. Tronto’s (2013) exposure of the dangers of the commodification of care also suggests that individuals “everywhere, men and women have to be willing to take on caring responsibilities and to discuss the resolution of these problems” (p. 164) in order to see a caring democracy and a valued care economy.

Hara (2007), Yeates (2005), Mahon and Robinson (2012) and Williams (2012) all note that carework within a care economy system, is predominantly carried out by women and is, therefore, highly gendered. Hara (2007) highlights that a carework labour force is treated as a constructed, “means of production, like equipment” (p. 25) to be used and replaced as needed. Hence, the work educators engage in is viewed as replaceable and unskilled, resulting in the devaluation of the ECEC workforce. Armstrong and Armstrong (2005) suggest that, when women clean, cook, feed, do laundry and clerical work, the work is low paid and often precarious and “is the work most often assumed to come naturally to women as women...work most frequently done by immigrant and racialized groups of women, the ones with the least

power” (p. 183). Hara (2007) suggests the care economy is reinforced by the welfare state and welfare social policy and thus “reproduces gender discrimination” (p. 18) in which care is a private responsibility of women broadly and mothers in families or mother substitutes in ECEC programs. For mothers, this is evident in the idea that it is their responsibility to seek out childcare services, their responsibility to pay for these services and their responsibility to choose what type of care services they want or that they can access. This reinforces the historical understanding that the economy as a public sphere is seen as masculine and the private sphere of care is viewed as feminine (Tronto, 2013). The low wages of ECE are also a direct result of the market care economy and wage inequities between men and women. The low wages of educators serve to lessen the already high parent fees (commodity) and as a result of the low wages and precarious working conditions, many educators leave the sector as they cannot afford to live on their own wages (Child Care Now, 2018; Folbre, 2016).

Care in the Private and Public Sphere

Armstrong and Armstrong (2005) suggest that notions of public and private care are helpful in understanding the historical constructions of a political economy of care. They state that, “feminist scholars have documented the general tendency towards the separation of private and public [care]...and they have analyzed the implications of this separation for both struggle and inequality” (p. 3). They add, that this public and private divide has relegated women primarily to the private sphere of paid and unpaid carework (Armstrong & Armstrong, 2005).

Tronto (2013) describes that in the earlier part of the 20th century “politics was something that happened in public, care was something that happened in private” (p. 1). In the latter part of the 20th century a shift in understanding between private and public sphere of care occurred. It is important to understand and contextualize what both private and public spheres of care

encompass. Private care includes childcare, elder care, and domestic carework, which were seen to be the responsibility of families, and occurred behind closed doors. Some sectors such as health care and social assistance were beginning to be seen as part of the public good with substantial public investment. Some ECEC services in Canada, albeit marginally have also shifted into the public domain; this is evident in examples that include City of Toronto childcare subsidies for low income families, Early Ontario drop-in centres, the federal Aboriginal Head Start Program for Urban and Northern Communities and the \$25.00/day childcare pilot in Alberta. However, it is important to note that regardless of this slight shift from private to public. ECEC in Canada continues to predominantly remain a private responsibility. This is also evident when governments increase childcare spaces (commodity) in a market system which reinforces this notion that families must find a childcare space; and when a space is found, they are lucky to have been able to access it. As a result, the majority of Canadian families today use unregulated, unlicensed home childcare, that functions completely in the private sphere and is predominantly undertaken by women (McCuaig & Akbari, 2017; Friendly, Larsen, Falham, Grady, Forer, & Jones, 2016).

Advocates, scholars and researchers propose that in order to address this public and private divide, ECEC must be seen as a public responsibility, a public system, with public funding (Langford et al., 2017). This would then elevate the value of care and the value of care workers. According to the International Labour Organization (2018) carework in ECEC will be one of the most rapidly expanding sectors in the future and a public system would ensure that the ECEC sector would be understood, valued, recognized, and well compensated for the work that they do.

Chapter Two – Literature Review

This chapter summarizes literature on ECEC as a site for exploitation and points to its relevance for understanding the devaluation of care and carework in ECEC. The literature explored aligns well with the key features described in the political economy of care. The chapter's summary of literature is not exhaustive, but shows that early childhood education and care is (1) gendered, (2) racialized, and (3) devalued. The chapter will aim to answer the question: How does looking at childcare as a site of exploitation help to understand the devaluation of care and carework in ECEC programs? This study is interested in whether early childhood educators consider these factors of exploitation when reflecting on the devaluation of their carework. For the purposes of this paper, the Stanford Encyclopedia of Philosophy defines exploitation in two ways: (1) To take unfair advantage of someone; and (2) to use another person's vulnerability for one's own benefit (Zwolinski, & Wertheimer, 2017).

ECEC as a Site for Exploitation

ECEC as Gendered. As identified in the previous section, historically, women have been relegated to care for children in the private sphere. This care was to be provided by mothers, grandmothers or other female relatives. Today, women still do most of the caring for children whether it is unpaid or paid. According to the College of Early Childhood Educators *Fair Registration Practice Report 2018*, 52,784 of the 53,772 members identified themselves as female (Deazeley, 2019). This means that in Ontario, 98% of the ECEC workforce identifies as female. Similarly, Vogt (2002) highlights that in England 88% of primary and nursery classroom teachers are women and more than 95% of the ECEC workforce in America is female (Kashen, Potter, Stettner, 2016, p. 3). It is fair to say, therefore, that in Europe and North America, ECEC has an almost entirely female ECE workforce (Van Laere, Vandenbroeck, Roets, Peeters, 2014).

Vogt (2002) proposes that caring within the primary years is constructed within a gendered sphere and that “gendered connotations of caring [in early years/ECEC] draws on a maternal subtext to caring work” (p. 252). This highlights that care as a moral concept is seen as “more typical of women” than of other genders (Vogt, 2002, p. 252).

Ailwood (2008), also, addresses the notions of motherhood, carework, paid labour and maternalism in politics and policies of ECEC. Ailwood (2008) uses Koven and Michel’s (1990) definition of maternalism as:

Ideologies that exalted women’s capacity to mother and extended to society as a whole the values of care, nurturance, and morality. Maternalism always operated on two levels: it extolled the private virtues of domesticity while simultaneously legitimating women’s public relationships to politics and the state, to community, workplace, and marketplace. (p. 1079)

This definition indicates that ECEC work is not considered as a result of professional training rather it is viewed as mothers work. In addition to this, Ailwood (2008) and Steedman (1985) highlight Friedrich Froebel’s belief that young women should be trained for their maternal place in teaching. Froebel ascertained that, “womanly dispositions are essential prerequisites [in ECEC]” (Froebel as cited by Wieb, 1910, p. 287). Andrew and Newman (2012) suggest that historical beliefs contribute to the present gendering of the workforce. They highlight that this “exploitation of (some) women’s emotional labour (maternalism) has been named as a significant example of what Bourdieu has called ‘symbolic violence’ ” (Andrew & Newman, 2012, p. 243) or gender essentialism. These scholars quote Price (2001) who argues that the misuse of women in the care sectors is not “exploitative, because women do this labour because it brings them satisfaction, and is part of ‘ordinary, universal capacities’ ” (p.179). Price’s

argument, however, perpetuates dominant maternal discourses within our culture that relegate the role of women to devoting themselves to the care of children (Ailwood, 2008; Vogt, 2002; Andrew & Newman, 2012). However, the gendered nature of the ECEC workforce is not the only cause for childcare as a site of exploitation, rather, it is also the fact that women who work in ECEC are disproportionately from racialized minorities (CUPE, 2017; Ulrich, Hamm, & Herzfeldt-Kamprath, 2016).

ECEC Workforce as Racialized. While there has been more research in relation to the feminization of the ECEC workforce there remains a gap when looking at the racialization of the ECEC workforce in Canada. Armstrong and Armstrong (2005) highlight that women who engage in carework are often immigrant women, women from racialized minority groups and are those with the least power. Kashen, Potter and Stettner (2016) emphasize that individuals who work in ECEC are not only female, but are disproportionately women of colour working in low paying jobs. This results in what is called ‘double jeopardy’. Double jeopardy indicates that educators who are female and racialized face double the disadvantages in caregiving and carework (Abramovitz & Zelnick, 2010; Turnball, 2010). Turnball (2010) suggests that racialized women who “perform caregiving work when that work is not valued” (p. 120) are living in a state of double jeopardy. As a result, Kashen, Potter and Stettner, (2016) indicate that in the United States, 40% of ECEC workers experience double jeopardy.

Stelevitz (2017) reveals the differences in wages between non-racialized and racialized individuals working in the ECEC sector. This researcher indicates that the average hourly wage in America for individuals working in the ECEC sector is within “the bottom 20th percentile for mean annual salary, averaging \$13.74 per hour” (p. 11). According to the Association of Early Childhood Educators Ontario’s Decent Work Task Force (2017) the median hourly wage for

ECEs working in the Ontario sector is \$17.29 per hour and in addition, more than two thirds of approximately 53,000 RECEs in Ontario make less than \$20 per hour (p. 6). Stelevitz (2017) goes on to identify the wage discrepancy amongst White, Black and Latino workers in the US indicating that Black ECEC workers make \$0.84 for every dollar of their White counterparts while Latino workers make \$0.75 for every dollar of their White counterparts. This inequity indicates that, “for workers of [colour there is] an average loss of \$366 per month” (Stelevitz, 2017, p. 11; Ullrich, Hamm, & Herzfeldt-Kamprath, 2016). The Canadian Union of Public Employee (CUPE) (2017) highlights that more than 20% of public employees in Canada identify as racialized or as part of a visible minority (para.1). As a result, CUPE (2017) indicates that “being racialized [and working] in Canada still comes with a hefty price in terms of lower incomes and wages, as well as other forms of discrimination” (para. 2). CUPE (2017), using the 2016 Census, estimates that racialized employees make about 30% less than the average white Canadian (para. 2).

Armstrong and Armstrong (2005) note that not only is carework gendered and racialized, thus, poorly paid, it is also often precarious in other ways. Fudge and Owens (2006) define precarious work as “lack of income and job security, part-time employment, temporary work, home-work, on-call work, low wages, few benefits, and absence of union representation” (as cited in Calixte, Johnson, Motapanyane, 2017, p 13). Halfon and Langford (2015) suggest that educators entering the ECEC sector are blinded by the realities of the precarious employment that exist. These authors (2015) identify that the precariousness of the work in ECEC includes “persistent poverty, ill health, and depression, all conditions that can prevent adults from meeting the [care] needs of young children” (p. 141).

The report, *Immigrant and Refugee Workers in the Early Childhood Field: Taking a Closer Look* published by the US Migration Policy Institute National Center on Immigrant Integration Policy, indicates that on a national level, an average of 22% of the ECEC workforce live below the national poverty line, and are eligible for US social welfare resources (Park, McHugh, Zong, & Batalova, 2015; Canella, 2007; Stellevitz, 2017). Although this report highlights the American ECEC workforce, Canadians with precarious working conditions and low annual incomes, like some educators in the ECEC sector access social assistance programs in Canada (Ontario Ministry of Children Community and Social Services, 2019). According to the Ontario Ministry of Children, Community and Social Services (2019), as of June 2019, there are close to 450,000 beneficiaries (families not individuals) accessing Ontario social assistance. Boivin (2016) and Appay (2005) argue that the carework system, in this case the ECEC system in a neo-liberal market economy “functions even better when the workers’ jobs are precarious and their wages depend on the level of activity of the institutions paying them” (p. 496). The low wages and the perpetual lack of respect for the work that educators do, reinforces the devaluation of carework in ECEC.

Taking into account the feminization, racialization and precarious nature of work in the ECEC sector, exploitation most certainly occurs. In this regard, the exploitation of the sector and the workforce can be linked to the devaluation of care and carework particularly in relation to education.

Devaluation of Care in ECEC

Care and Education. For some researchers and advocates, promotion of early years’ education is paramount. There has been some advancement by means of policy and legislation across the world which supports the growth and investment in early years’ education from an

economic standpoint (OECD, 2017). This support and rationale mean that there has also been an increase in enrollment in early learning and development programs amongst children in wealthier families (Shafiq, Devercelli, & Valerio, 2018; Singhal, 2018; Turnball, 2010). In this understanding of early childhood education, a developmentalist standpoint which looks at developmental trajectories in children is valued. These trajectories are often understood to be the building blocks of lifelong success and achievement. What the developmentalist standpoint fails to address is the value of care in ECEC for children (Broströ, 2006; Ailwood, 2017).

Other highly regarded reports, also, emphasize the value of early years' education. In the *Early Childhood Education Report 2017*, Akbari and McCuaig (2017) present the strides that Canada has made since 2014 in ECEC and present the direction they believe the sector is headed. The report addresses the economic rationale of investment in ECEC by provinces in Canada and validates these investments using the age-old dollar for dollar comparisons. However, the report fails to address the value of care or the status of the workforce in ECEC programs (Akbari & McCuaig, 2017).

The TD Economics Special Report (2012), identifies the economic benefits of early years' education and associates early childhood education with a human capital rationale for both mothers and the future workforce. The report identifies that with access to early childhood education, mothers are able to re-enter the labour force and by extension increase family income and gross domestic product. This report does not address the affordability crisis or name the general childcare crisis that exists in Canada and suggests that children who are educated earlier in life, result in a high-quality workforce in the future (TD Economics, 2012; Singhal, 2018). Similarly to Akbari and McCuaig (2017), these researchers do not once mention the role or value of the workforce, care or carework in ECEC. Moreover, educators voices, perspectives and

experiences on the valuing of care are absent (Aslanian, 2017; Langford et. al., 2017; Vogt, 2002; Owens & Ennis, 2005; Acker, 1995).

Asserting Care in ECEC. In contrast, some scholars aim to assert the importance of care in ECEC. Langford et. al., (2017) highlight that care, carework and care practices in ECEC are reciprocal in nature. They suggest that an ethical and responsive relationship must be created between the caregiver and the care recipient (Langford et. al., 2017; Noddings, 2012a, 2012b; Owens & Ennis, 2005). This understanding of care, then suggests, that care cannot be defined as a single concept, rather it is highly complex. Owens and Ennis (2005) highlight fundamental characteristics of ethical care that can be applied to carework and care practices in ECEC programs. These authors stress that a commitment and desire must exist on behalf of the care provider (educator) towards the recipient (child), from the child to the care provider and finally, there must be “a shift from a focus on the [educator] to a focus on the [child]” (p. 394). Taggart (2016) reinforces the complexity of care and suggests that “care is one of these dispositions with multiple meanings” (p. 178) and understandings.

Aslanian (2017) argues that carework and care practices in ECEC are not only contingent on physical interactions but also as a result of an “array of entanglements with spaces, materials, and the organization of time” (p. 323) whereby carework is “collective in which both the material and social environment work together to produce [holistic] well-being” (p. 332) (Bath, 2013; Langford et. al., 2017; Vogt, 2002; Ailwood, 2017) Moreover, care is complex as care practices are sensitive to contextual nuances. According to Langford et. al., (2017) ethical care can be rooted in four key concepts. The authors identify that care: (1) is universal and fundamental in all aspects of human life; (2) is more than basic custodial activities; (3) in early childhood settings can be evaluated as promoting well-being or as delivering poor services that

result in harm to young children; and (4) must be central to early childhood education and care policy deliberation (Langford et. al., 2017, pp. 311-312). These authors argue that when these four critical concepts of ethical care are taken into account and acknowledged in critical dialogue and policymaking, care will be more likely recognized and valued.

In order to begin to asset the value of care, I interviewed seven RECEs to answer the research question: How do Ontario RECEs describe care, carework, and care practices in early childhood education and care programs?

Chapter Three – Methodology

To answer my research question I explored the lived experiences and perceptions of care, carework and care practices held by a small sample of registered early childhood educator. Self-identifying Registered Early Childhood Educators (RECEs) working in a variety of ECEC programs in the City of Toronto and the Greater Toronto Area (GTA) were recruited to participate in this critical qualitative inquiry (CQI). Participants engaged in a one hour, in person or Skype, open-ended interview with semi-structured questions. The open-ended and semi-structured interviews were the primary source of data collection. They were transcribed verbatim, coded and analyzed thematically to identify reoccurring themes in the data set and discussed using MacNaughton's (2003) critical reflection framework.

Participants

Leavy (2017) states that sampling in qualitative research must be justified and rationalized so that the sample is sufficient to meet the needs of the research purpose. Kvale and Brinkman (2013) as cited by Leavy (2017) highlight that qualitative researchers should adhere to the notion of “interviewing as many subjects as necessary to find out what you need to know” (p. 77). However due to the time constraints in producing a Masters level major research paper, I chose to engage in qualitative research with a smaller sample size. Nevertheless, I believe that a smaller sample size can produce rich and meaningful data for analysis. As such, eight self-identifying RECEs from the City of Toronto and the GTA, working in eight different ECEC programs participated in this study. Criteria for participation included: (1) Participants must self-identify as Registered Early Childhood Educators (RECEs) with the College of Early Childhood Educators; (2) Participants must have a minimum of one year (1) work experience; (3) they must be working or have worked in an ECEC program in the last year; and (4) the participant must not

have a past or present working relationship in a ECEC setting with researcher. Eleven participants responded during the recruitment process', eight participated in the interview process. However, only seven were included in the study. This is because one participant withdrew their consent and three did not meet the eligibility criteria. Participants worked with different age groups and in a number of ECEC programs ranging from unlicensed home childcare, Early ON programs, full-day kindergarten, Montessori centres, and in both for-profit and non-profit childcare centres.

Although I did not collect demographic information from the participants, all of the seven participants identified as female. Although none of the participants self-identified their race, I believe it is important, for the sake of the position of this paper, to highlight that only one participant would be identified as part of a racial minority.

Procedure

Recruitment method. After receiving Research Ethics Board approval (Appendix A), purposive and convenience sampling was used to recruit participants from Toronto and the GTA. Purposive sampling, as identified by Mathison (2005), involves selecting participants with rich information who offer insights into the purpose of the research study. Mathison (2005), highlights that, "small purposeful samples yield in-depth understanding and insights rather than empirical generalizations" (para. 1). For this study, RECEs were recruited because of their daily lived experiences with care and carework. Convenience sampling, according to Lewis-Beck, Bryman, and Liao (2004), involves selecting participants who are readily accessible to the researcher and is considered a form of nonprobability sampling. For example, the initial recruitment strategy involved emailing licensed childcare centres in the City of Toronto using the City of Toronto Childcare website. This email (Appendix B) asked that the centre managers,

supervisors, directors or owners share the recruitment letter (Appendix C) and the participant recruitment flyer (Appendix D) with RECEs working in their centres. The email further asked that interested participants reach out to me via my Ryerson University email for more information. The participant recruitment flyer was also shared with the Association of Early Childhood Educators Ontario (AECEO) who disseminated the flyer to their network via a social media platform. In addition, I shared the recruitment letter on Facebook with groups such as: Registered Early Childhood Educators Ontario, Ontario Early Childhood Educators, and RECE in Practice Ontario Only, using a temporary research-specific Facebook account. Interested participants were asked to email or direct message me if they wanted more information. The flyer was also shared on Twitter which outlined the same information that was on the recruitment letter.

As previously mentioned, 11 self-identified RECEs contacted me via email and of the eleven, three did not meet the eligibility criteria. I sent the remaining eight participants a detailed consent form (Appendix E) with a study description and highlighted that participants were encouraged to ask questions. Participants were reminded that participation was confidential and voluntary, that they were able to withdraw consent at any time and that by withdrawing consent it would not affect their relationship with Ryerson University, the School of Early Childhood Studies, myself, my supervisor or their place of employment. Once the participants read the consent form and confirmed they were interested in participating, a time and place was set up for an interview.

Setting. According to Given (2008), qualitative research often occurs in natural settings whereby environments are not manipulated or controlled for variables. The author highlights that natural setting research “involves interacting with people by interviewing them and observing the

setting they are in...allowing for the gathering of sensory and experience-based data” (Givens, 2008, para. 1-2). Hence, I did not conduct any interviews at the participants site of employment due to power relations, confidentiality and a number of other ethical considerations; rather they were conducted in a neutral setting (Given, 2008).

The interviews for this study were completed in one of two ways: (1) Face-to-face in-person interviews that took place on the Ryerson University Campus in a private study room in the Student Learning Centre or (2) Skype interviews that took place while I was on the Ryerson University Campus in a private study room in the Student Learning Centre and the participant was at a place of their choosing (this was done to ensure confidentiality for the participant). I ensured that all consent forms were signed prior to the start of any interviews. No Skype calls were video recorded rather all interviews were audio recorded using a hand-held recording device, the audio was transferred to my Google drive with two-factor authentication. The interviews ranged in time from thirty-five minutes to one-hour and of the eight interviews, seven were completed face-to-face and one was conducted using Skype.

Data Collection and Tools

The interview was conducted in a semi-structured manner using open-ended questions. This semi-structured interview process enabled me to choose certain topics to explore in more details and to probe or develop “any themes that [arose] during the course of the interview” which could be deemed as “important for a fuller understanding of the topic” (Corbetta, 2003, p. 271). Qu and Dumay (2011) highlight, that in semi-structured interviews, both the researcher and participant engage in dialogue, construct questions and share their perspectives through ‘multifaceted dialogue’. This meant that during the eight interviews “various topics and

questions [were] asked and the wording of the questions [was] left to the interviewer's discretion” (Corbetta, 2003, p. 269) in order for the conversation to be fluid and organic.

The data collection tool was developed to give space for participants to share their perspectives on their lived experiences of care and carework in ECEC programs. The tool (Appendix F) was developed using Siwik’s (2013) tool as a guide and included 15 open-ended questions which outlined general lines of inquiry and topics to be discussed during the interview. This being said, the participant and I had the ability to “ask for clarification if the [question or response] was not clear” (p. 269). By having the participant ask for clarity and answer open-ended questions, they were not constrained in choosing a set answer, rather they had the opportunity to develop their answer using their experiences and perspectives (Marvasti, 2004; Siwik, 2013).

Data Organization

All of the interviews were audio-recorded and then transcribed verbatim. During the transcription process, and in accordance with the Ryerson University Research Ethics Board protocols, pseudonyms were given to the participants alongside their places of employment to protect their identity and ensure confidentiality (*See Table 1*). Leavy (2017), highlights that transcribing interviews is customary in all types of qualitative research and indicates that transcribing interviews verbatim, “preserves a complete record of the interview...and prevents losing valuable data early on in the process” (Leavy, 2017, p. 142). Verbatim transcription also ensured that I avoided “selective transcription’ which can lead to a bias in the participants’ responses based on the sections I may or may not have chosen to include (Leavy, 2017). The audio recordings were deleted once transcription was completed and transcripts were only accessible to myself and my faculty supervisor. All data and information pertaining to the study and participants was kept on my Google drive, enabled with two-factor authentication.

Research Design

The research was conducted in a qualitative manner using a critical qualitative inquiry (CQI) approach. According to Denzin (2016) a CQI approach “addresses inequities in the economy, education, employment, the environment, health, housing, food, and water, inquiry that embraces the global cry for peace and justice” (p. 8). Denzin (2016) argues that a CQI approach unsettles dominant discourses and uses research with marginalized voices as part of the public conversation. This author notes that CQI scholars “are united in the commitment to expose and critique the forms of inequality and discrimination that operate in daily life” (p. 8). In the case of this study, Cannella (2017) acknowledges that CQI does not result in the elimination of systemic or institutional oppression. Rather, CQI “recognizes and acknowledges power relations, analyzes the taken-for-granted unjust, oppressive conditions and is concerned with discourse practices” (p. 338). This scholar affirms that through CQI, marginalized voices are able to “challenge and question self, and then invent new ways of thinking, being, acting and forming relationships” (Cannella, 2017, p. 344).

In this study, CQI is focused on RECEs’ perspectives of care and carework and its devaluation s. Denzin (2016) notes that through CQI “the use of personal experience narratives, the perspectives of women and workers can be compared and contrasted” (p. 12). In capturing the voices of marginalized groups, “assumptions that are held by various interested parties, policy makers— can be located and shown to be correct, or incorrect” (p. 13). CQI uses a number of critical theories including critical pedagogy, and feminist analysis to demonstrate “fostered struggles for power [and value] for the poor, non-Whites, women, and gays (Denzin, 2016, p.11). In this study I use a PEC and feminist analysis to understand the value of carework in Canada’s economic and socio-political environment. Aligning with CQI, a PEC is concerned

with critiquing injustices and showing how research can help change the world in a positive way “making CQI central to the workings of a free democratic society” (Denzin, 2016, p. 14).

Cannella (2017) and Denzin (2016) suggest that it is not only critical thought that arises from CQI, “but also the ability to push the boundaries of race and gender to create spaces, new spaces, new identities, new relationships, and new radical forms of scholarship” (Denzin, 2016, p. 14)

Taking into account RECEs’ perspectives of care and carework using CQI can potentially begin to address the social injustices and inequities early childhood educators face.

Researcher Bias

Qualitative research is personally immersive and, thus, it is important to address the biases I potentially brought to the study (Leavy, 2017). For instance, I have a vested interest in and personal working experiences with the devaluation of care and carework in ECEC programs. In addition, I have an active voice and play an active role in the childcare advocacy movements and organizations that are concerned with the status of the ECEC workforce. Therefore, it was only natural that my values, personal beliefs and experiences were reflected during data analysis. According to Merriam and Grenier (2019) instead of trying to eliminate my bias and subjectivity, it was “important to identify them and monitor them as to how they may be shaping the collection and interpretation of data” (p. 5). In addition, Merriam and Grenier (2019) suggest that “one’s subjectivities can be seen as virtuous, for it is the basis of researchers making a distinctive contribution, one that results from the unique configuration of their personal qualities joined to the data they have collected” (Merriam and Grenier, 2019, p. 6). In this way, my experiences with carework, were similar to those of the participants. The research process forced me to critically think about my own and others’ carework and to consider new ways to address the devaluation of it. I was also ensured the accuracy of participants’ perspectives by using only

direct quotations rather than generating assumptions all the while checking in with my supervisor regarding potential biases.

Data Analysis

Transcripts were clearly labelled and marked to identify when the participant was speaking and when the researcher was speaking. Once the transcription process was complete, I organized the transcripts in a binder to begin the analysis process. The first step of this process began with acknowledging authenticity and trustworthiness in the transcription process. This was done by listening to the interviews against the transcripts and cross checking the content to make any necessary changes. As a type of member checking, participants were given the choice to receive their transcripts and make any changes; however, none of the seven participants chose to do so (Leavy, 2017).

Once I completed my check for authenticity, I began a two-step process of data analyses. During this first stage of data analysis I immersed myself in the raw data, by reading in an active manner, looking for themes, meaning and patterns, and by making notes in the margins of transcripts of concepts that were reoccurring. This first review of raw data functioned as open coding and ensured that I had a working understanding of the data (Neuman, 2006).

I began my next stage of data analysis and phase two of my coding. This included engaging in axial coding which “involves relating data together in order to reveal categories and subcategories ground within participants’ voices within the data” (Simmons, 2017, p. 79). In this project, the themes and subthemes reflected the perspectives of early childhood educators towards care, carework and care practices in ECEC programs. Axial coding was done using a coding legend (Appendix G) with several categories which resulted in a number of larger codes. Using these larger codes, I navigated between the data collected from each interview to create

overarching themes within the data set. Axial coding refocused my analysis back to the purpose of the research, to themes that emerged during open-coding and forced me to see if the themes and data sets accurately reflected the appropriate meanings intended by the participants (Braun & Clarke, 2006). Braun and Clarke (2006) describe thematic analysis as a method in which patterns are identified within the data and provide the researcher with a rich and detailed description of the data being collected. I employed thematic analysis to identify recognizable topics, ideas, patterns and themes within the data which provided insight into the concept being researched. As a result, overarching themes were extracted and the analysis provided me with a way to present my findings (Allen, 2017; Braun & Clarke, 2006).

Having completed the data analysis component of the study, I began to think of ways in which to organize my discussion. Upon reflecting on the key themes, it was evident that adapting MacNaughton (2003) framework of conforming, reforming and transforming ECEC curriculum would be an appropriate choice for organizing my discussion. MacNaughton (2003) states that all early childhood educators “work within a specific social and political context” and that some educators “will have clear mandates that guide their interactions with young children” (p. 1).

MacNaughton (2003) suggests three positions that can create space for critical reflection and thinking. The first position of ‘conforming’ can be defined as, “complying with the existing practices, rules, traditions and understandings” (p. 121); this position reinforces the dominant, socio-cultural understandings that exist. The second position of ‘reforming’ can be defined as, “making moderate changes to something” (p. 155); this position can exist when there is a desire to confront dominant discourses but this confrontation has not yet occurred. Finally, the transforming position can be defined as, “fundamentally changing the existing practices, rules, traditions and understandings” (p. 182); this position exists when beliefs are liberated and

materialized to create environments that are enabling, democratic and deconstruct dominant discourses and understandings. Using this framework can begin to modestly create space to explore how my participants understand care and carework and where there is potential for understandings that are reforming and/or transforming.

Chapter 4 – Findings

Open and axial coding, alongside thematic analysis generated three main themes, which help answer the research question of this study. The research question guiding this study is: How do Ontario RECEs describe care, carework, and care practices in early childhood education and care programs? This chapter identifies participants, presents salient findings and reveals educators' experiences with and perspectives on the value of care, carework and care practices in ECEC programs. The three themes that emerged from the interviews and data analysis are: (1) Care is devalued but, at the same time, is viewed as natural to ECEs; (2) Care is more than custodial but is not educational or intellectual; and (3) Educators face barriers to caring well in ECEC programs.

Participants

In order to ensure confidentiality of the participants, all identifiable characteristics were removed and pseudonyms were assigned. It is important to highlight that although demographic information was not obtained, the sample consisted of all self-identifying female registered early childhood educators (RECEs). Table 1 identifies the pseudonyms given to participants and their place of work.

Table 1 – *Participant Pseudonyms*

<i>Pseudonym</i>	<i>Place of work</i>
A.C. - Amanda	Non-profit Childcare in GTA
A.G. - Aniya	Family Drop-In Program City of Toronto
A.M - Alisha	For-Profit Childcare Centre in City of Toronto
C.F - Cathy	Non-profit Childcare and Ontario Certificate of Teaching Candidate
M.H – Martina	For-Profit & Non-profit Childcare Centre

S.H – Sanjana	Non-Profit Childcare Centre
L.S - Lauren	Unlicensed Home Childcare; Owner and Operator

Care is Devalued but also seen as Natural to ECEs

All participants agreed that the carework they engage in is devalued by society. A majority of the participants associated this devaluation with the workforce being predominantly female. All participants describe devaluation of care using common phrases articulated by others: “glorified babysitting”; “mom like”; “mothering”; “easy”; and “natural instinct”.

Amanda is an RECE who has been working in the sector for six years and predominantly works with pre-schoolers. She comments:

We are women, there are more women in the sector than men, and often people see what we are rather than what we do. We are not daycare, we are childcare. We are not moms, we are educators. We are not wearing suits and we do not sit behind a desk, like, the quote-unquote professional men do and so they don't value what we do as much as they value sitting in a glass tower. I don't think there can be what we do without care. I don't think we can do or be educators without having a care based practice within the roles we are in as ECEs

Similarly, Lauren, a home childcare owner and operator maintains that the devaluation of care is visible, suggesting that she is:

Pretty sure that because people see women as the ECE and then think that the woman is responsible for care. That society just sees the care, and then sees that women do all the care, but they do not see the other things that we do.

Amanda also challenges the term ‘glorified babysitting’ by emphasizing that, “[childcare] is not glorified babysitting, we genuinely give children a sense of belonging, sense of accomplishment, empathy, and so much more”. Having worked in both non-profit and for-profit centres, Martina further associated the value of care and carework with the gender of the workforce and wages they make. She notes that:

It is multiple factors at play, but the largest thing is that we are women not appreciated for the work that [childcare] actually is. I mean people view success with money, and we are paid, full-time, averaging minimum wage, and thus, the rest of society, correlates your wage to the value of the work you do.

In addition, Cathy a RECE who is currently working part-time at a for-profit centre and completing her Ontario Certificate of Teaching conveys that:

When people think of daycare they think of babysitter. I am leaving my child here because I don't have anywhere to leave them so, I leave them here so I can go back to work. I still see this with some families I work with. They don't see what else kids get from childcare.

Martina, however, identifies that not only does society devalue ECEs' work but also, educators themselves perpetuate this devaluation:

I think there is a lot that can be done to educate educators and society about the importance and value of carework. That there is a lot of work to be done in honouring the sector as professional, and that some of this comes from the College. There are ECEs who devalue their own job to make it seem like they know they are 'just' caring for children and then there are [educators] who feel the opposite, who say this is their career, but others who say it is just childcare for now. Even though they value it, but because of the way society sees it, they reflect it in their thinking. That they will be doing better or more one day.

At the same time, five of the seven participants identify themselves that educators must have a natural ability to care for children and this stems from the fact that they are women. In contrast, Martina does not believe that educators have to have a natural ability to care. When she was asked: "What are your thoughts on care coming naturally to educators rather than it being something that we do as work?" She notes:

I don't think it is natural, I know a lot female ECEs, who should not be in this field. I want to say, no you don't have to be a natural caregiver, I want to say like you might not have to be a natural carer in all aspects of your life. So, you don't have to be mothering, but I think you have to be able to show true support,

beyond the physical rather than just doing the actions, but not being present or having a connection. I don't know if that is an innate characteristic or something that you can learn, but I think it is something important.

Alisha also challenges this natural ability or desire to care for all children. She states that:

There is a child I struggle with, I don't love this child, and it is challenging to work with them. I still do my job and care for the child and I provide what they need, but it does not mean that love them. So I think that is the different, just because my job is to provide for them and meet their needs in a number of ways. It doesn't mean I love them; I can love them as a result of that, but it does not mean that it is an innate feeling or that loving them comes naturally and then so does caring for them.

In contrast, Aniya, who works with families in a drop in program, to the question, "how do you think care is inherent to your role?", comments:

I love working with children, because I like to work with children I always say I treat them like my own children and when they are [in my care]. I actually love them, but at the same time I know I have to be professional in my job and showing all this love and care sometimes is not seen as professional, it is seen as being their mom. I think it is inseparable as an ECE, you have to care and it has to be real genuine care and so when children don't feel like they're loved or cared for I don't think they can flourish.

Cathy also reinforces the idea of caring as natural to women by describing that she has always had a desire and natural ability to care for children:

A young age I said I wanted to work with children. Whenever there was a baby in my house or family or friends who came to visit I was always around the baby, I wanted to feed the baby, change the diapers, and I was intrigued by it. This is natural to me. In my opinion the sector of ECE is like I said is natural, and you either have it or you don't have it. It is not something that can be taught. You cannot sit in a class and learn to give a hug, or show love to a child and that comes from within. So, if you don't have that, then this is not where you should be working.

Cathy also suggests that an early childhood educator is a mother-substitute. She describes how often in an ECEC program there is one educator who stands out. For example:

I call this person ‘the mom’ as she knows, “all the children’s names and when the child is crying that ‘mom’ goes up to the child and consoles and comfort and ensures they get what they need. So, for me, I see these children as if they are my own almost, so I am always trying to, you know, give them all that I can to ensure they are safe, happy, comfortable, well fed, rested, clean.

Two participants struggled with the tensions that are associated between ‘mothering’ and a professional identity. For example, Sanjana says:

There are a lot of women in the sector and people in society that think care is just natural to any ECE because they love children. So, I think maybe it has to do with how women carry children, and maybe society thinks it is a natural thing. There is also this understanding that it is a women’s job, and 30 years ago, when you didn’t have a job, you were a stay at home mom and so now [as an ECE] you get to do that and get paid for it.

Similarly, Alisha who works in a private for-profit childcare, struggles with how being seen as a mother substitute can be negative:

I think when you think of a woman you think of her as a mother or a nurturer, you don’t think about them as a person providing a necessary service, and so I think that can sometimes be a negative thing. Because the care then is seen as innate for women and innate to the profession.

Surprisingly, only one participant associated women’s perceived natural abilities of caring with the devaluation of carework by society. Martina states::

I would say that it has to do with a societal devaluation and feminized devaluation and maternal devaluation. It is a female profession and there is an association of femininity and raising children. So, most jobs that are caring, we are [women] just doing the natural thing.

Care is More than Custodial

When participants were asked to describe care, all of the participants believed that care is more than custodial, although this kind of care is a big part of what they do. From the

participants' perspective, they physically care for young children but they are also concerned with the emotional and relational aspects of that care.

Custodial care (physical care). All participants identified that care is comprised of care that meets the physical needs of children and that this care is custodial in nature. A closer examination of participants' understandings of care reveals that all participants referred to custodial care practices as, "diapering"; "feeding"; "cleaning"; "toileting"; "routine"; and "cleanliness". These references suggest a conventional understanding of care as supporting the physical well-being, health, safety and security of children. Lauren, describes care in a very distinct manner:

I define care as the care I would assign to daily routine and personal care. I am talking about diapering, feeding, toileting, napping, cleaning. Things that I have to do to care for the physical child. That is care. Care is an environment with a RECE that provides a feeling of safety, comfort and someone that is able to see the needs and respond to these needs of the child where applicable. It is...I suppose all the daily activities in one's life related to personal care and daily care: dressing, and most of the job description.

Martina's description of care is consistent with Lauren's:

I would say in this centre and most, it is custodial care that I see most of. So, I think most educators describe carework as putting on the snow pants, diapers, food, nose, lunch, which yes have to be done. These are the physical things that we do to care for children and ensure they are safe.

Amanda agrees and says that a lot of what is done on a daily basis in a childcare centre is custodial care. She describes her day and observes:

That with how the day to day goes, we find ourselves doing a lot of custodial care, a lot of cleaning, toileting, feeding the children. When you look at toileting, you have five children and you just want to get it done, you don't take the time to do it.

More than custodial care. Although Martina indicated that she sees a lot of custodial care in ECEC programs, care to her is more complex:

I would define carework first and foremost, interestingly, well not interestingly to me, but I look at care as more of the emotional side first then I think of the physical care, though both are vitally important, but in my experience I think a big part of care is emotional support that you give to children. I think a care practice to me would be any interaction with a child. Not matter what you are doing, you should always be showcasing a level of care. Be it supporting them in some kind of task they are engaged in, being there to hold their hand, changing their diaper, encouraging them to go down the slide. I think it is every interaction with a child is care. I think other educators focus on physical care and I think the emotional care is left out

Amanda implies that care to her is having, “empathy towards someone, having a want to help someone in terms of whatever the need is that they are presenting”. Alisha emphasizes the need for emotional care:

[A] job as an RECE is to provide care, physical care and emotional care in whatever capacity [a child] need. But every aspect of what I do [at work] is embedded in deep seeded emotional care. Because without that emotional aspect, all the other types of care that I do, do not have sustenance.

Sanjana argues that care is not only interacting with children on a physical level but having relationships with families is integral to caring in ECEC programs. In reflecting on her practice, she says:

That supporting children and supporting families, I think that is a big thing about care. You are spending a significant amount of time with these children and their families and that you are a large part of their development, care emotion and social emotional development and it's about supporting all factors of that.

Care and education are both important, yet separate. Six of the seven participants suggested that care and education are both important. However, on closer examination, their understanding suggests a conventional separation between care and education. Five of the seven

participants did not acknowledge that care is educational or intellectual. Rather, they believed that by engaging in emotional care as mentioned above they were integrating “care practices” into education. Alisha, who previously noted that all her carework is rooted in emotional care, explained the following:

I think that as we go forward the emphasis on education is important, but the idea of care is so, so important, and people, everyone understanding that, that it must go hand in hand, that care is just as if not more important than the education aspect.

Aniya’s experiences at a family drop in program suggest that:

Care and education. I think it goes hand in hand. It is important that they go hand in hand because it is the crucial years for laying the foundation for love and learning so if the care is low then the children will not have a love for learning and that will affect their future academic success.

Martina saw both as important and stated that one should not exist without the other. However, she sees that people in society see care and education as separate:

I think that the separation is ridiculous. It is all part of the day, but there is certainly a divide. Education is seen as more valued. Families are happier to see their child sitting at a table, or it looks great that children are sitting and ‘practicing’ academic skills versus the child engaged with a peer rolling on the carpet. There is certainly an emphasis or value when children are doing more academical things.

Amanda shares this perspective and notes that:

Care and education are both important and they both happen in childcare together; we build relationship, provide emotional support, physical care for children, and children learn when they are in childcare.

In contrast, Cathy and Lauren believe that the role of an RECE is to educate children:

I get that ECEs want to show all this care towards children but you have to keep in mind that the role of an ECE is to educate children.

So, I think there has to be a happy balance to make relationships and care and educate.

Education is what a child goes about during the day. They learn things, things they are interested in, cognitive and physical that are specific to the early years. It needs to be viewed differently. Like care is one aspect, and it is only one component. Education is the other component. They are separate, but they are together in the same place. I care and I educate but they are two things I do.

In contrast, two of the seven participants implied that children can learn from experiences that are deemed to be caring, and that care and education are integrated into one another. Although Aniya struggled with looking at care as intellectual or care as education, she does see that children learn through caring interactions:

I would say care is anything in childcare. When I was at the YMCA, it [care and education] goes hand in hand and for example if we get the kids to wash hands, we sing songs, they probably have to line up with two in front of them so through them washing their hands, they are learning to self-regulate, and it goes hand in hand. They are washing their hands, and learning something. Without the close relationships with the children and caring for the children, I don't think we can teach them and they cannot learn without the close relationships. In my experience we have difficult children in terms of behavior and you cannot really teach them the ABCD's without the relationships or the caring relationship or showing them these through care interactions

Sanjana also sees care and education as “one is the same, suggesting that in order to provide good education there must be care and further to provide good care there must be good education:

You look at education and people associate that with school. Being taught in the classroom, right? But to me it is one in the same. If the child is not cared for, or their needs are not being met. It means they are unable to learn. But at the same time, in my practice every day they are learning. I could tell you 100 different things that would be me caring for them and they got this amazing learning experience from them. And people [society] do not understand that just because they get to sit on my lap or we got to explore and they lie in the grass and look at the clouds that people don't see this as

education, but they associate education as reading and writing and this is what it looks like.

Interestingly, half of the participants highlighted that the care and education divide is more evident in programs that are deemed educational and prepare children for success in school.

Amanda has only worked at one childcare centre, but she suggests that there is also a greater divide between care and education in for-profit programs:

I think that for example, what I do in a non-profit, all our money goes back into programming. We don't see money as the value of like what it is. We are here to do what we do because it is for the children and its more than just sitting them down at a desk and using worksheets. I find that Montessori for example is something we learned in school and I couldn't see myself doing that it is so educational and I do not see the care aspect, in terms of emotional care, there is still the routine care and custodial care, but in my opinion, there is no emotional aspect of care in a setting like that. It is more rigid and educational and the emotional aspect of care is lost. It is about being the best at education not about care.

Amanda's experience was shared by two other educators who have worked in the for-profit sector. Martina notes that:

Care comes from the staff, but there are also centres, like the Montessori I worked at. It was more rigid it was not as appropriate to foster emotional relationship with children and it was a little more individual rather than collective. So, though the staff cared about the children, I would argue/ believe that the care practices were a little, well in this centre specifically, I found that there was a lot of emphasis on creating a capable individual future adult, and so it was less emotional care and more do this do this do this. It was more about educating the children to become something and do well in school.

Similarly, Samantha, suggests that when children are sitting in desks, there is no room for caring:

I worked for a for-profit, for a couple months maybe 4, and it felt like a mini school. Children sat in desks, they had homework they had lessons and they were three. It was odd for me to work in that environment, but at the end of the day it was a business and parents had their children there and paid for it because it was school readiness, and that is what they were paying for. Helping them to

get ready for school and that is how the for-profit sector sees early childhood education. Their primary carework was custodial care and then the focus was on like cognitive development and they needed to know their 1,2,3 and ABC rather than the relationships or time outside. So yes, care and education were very different, [the centre] was very different focused.

Barriers to Caring Well in ECEC Programs

Time. Participants shared that they experienced many barriers to caring well for young children in ECEC programs. All participants indicated that their greatest barrier in caring well for children was a lack of time. A majority also suggested that pre-service education and current ECEC policies were barriers to their carework.

Educators spend eight hours or more per day with children, engaging in various types of carework. According to all the participants, there is not enough time in the day to engage in carework the way they would want because of ministry requirements and the nature of ECEC programs.

Ministry requirements and program expectations. Some common words participants used to describe ministry requirements included: “quality assurance checklist”, “public health visits”, “licensing”, “criteria”, “programming”, “documentation”, “paper work”, “planning time”, and “daily records”. Alisha notes that all of these requirements affect her capacity to care well:

Something that might stand in the way might be the time that is given to ECEs to do things. I get busy in my day with all of the things that need to be done. Paper work and setting up and all these things, and even though my supervisor does their best to support us with staff, there are times where I feel there might be kids don't get all the care they deserve, be it because of ratios or because staff are writing in their reports or document something, or doing something they have to do.

Aniya notes that when licensing officials from the City of Toronto or centre administration come to assess her program she “can't spend time with this child, or I lack the patience because I am too stressed about the Ministry requirements”. Martina suggests that over regulation, an emphasis on developmental checklists and parent expectations take away from the care experiences the child has:

Time is a barrier. The daily records of the children in the room take up a lot of time, you need to make sure the needs of all children are met, you need to fill out their developmental checklists, how many times they used the toilet, how much they ate, you need to be sending photos to families three times a day. We need to manage the mandates of the admin, you need to hit all the checkboxes which remove the educator from the child and the educator from the relationship with the child, which should be the most important part of the day. It shouldn't be that the family receives 15 pictures of the child in one day.

It is important to note that educators are not denying the need for ministry requirements and regulations. Sanjana indicates that:

There is an awful amount of paperwork and logistics, and multiple copies of these things. I have to submit things three times. There are observations which [are] now required to be done on an app and we have to be on a tablet. It is mandatory that you do one a week, or if they are doing some great activity and you need to ‘document it’ it takes you away from that moment because you have to do this because it is mandated and required. You know with ‘criteria’ coming you have to go and count books, so I have to make sure there are 54 books on the shelf, and to me that doesn't matter, the kids don't care how many books are out, just that there are books to read, or that there are 7 different blocks out...like these are barriers to what we have to do. The hardest is the constant documentation of what needs to be done; AM checklist and PM checklist. Like the child count is different – that is not a barrier. But the never ending checklist of repetition. This takes away our time with the children.

Amanda notes that the paperwork that they engage in becomes overwhelming and is the most time consuming aspect of working in childcare:

There is a huge barrier in what we are expected to do on a day to day basis and what our roles are in terms of paperwork, in terms of routine, and having all these responsibilities that don't involve being with children.

Some participants reported ways of balancing meeting ministry requirements and centre expectations. Amanda stresses:

I have books, I have sign offs, I have planning time, and not necessarily given time outside of program, well paid time outside of program to do that. So, taking that time away from what I could be doing with children to meet the regulations that I need to complete is a huge barrier. And I find myself taking things home, or doing them quickly or during my lunch so I do not take that time away from interacting with the children.

Amanda is forced to spend time on her lunch hour, or at home, after hours in unpaid worked to meet all of these requirements. Aniya argues that the ratios in childcare programs are too high. She notes that in a preschool room, ratios are 1:8 and that giving each child the care they deserve while managing all the other requirements and expectations is difficult and often impossible. Aniya indicates that the emotional strains are a barrier too:

I think because we are human too, so when we get upset we sometimes can't hold it in. Like when I get upset at my daughter I will sometimes walk away because I am frustrated. But in child care you cannot do that. So, when I say be professional at work, it is to not be angry and to control your frustrations and take a step back and you still remaining caring and responsive to the children around you.

Education. In order to become a RECE in Ontario, incoming educators must complete a minimum of a two-year diploma program from an accredited college in Ontario or by completing an equivalency requirement. Three of the seven participants acknowledged that pre-service education programs are barriers in caring well for children. Alisha remarks:

It's important that pre-service educators know that ECEC is not just about the development of children. But it is about how

important both care and education are. It is important to educate [pre-service ECEs] about the value of both education and care and care and education. We are ECE who provide education but we also provide care.

Participants suggest that the curriculum focus in pre-service programs on child development and developmentally appropriate practice (DAP), takes away from what the sector has to offer. As a home childcare owner and operator, Lauren believes that care and education are separate, but highlights:

I think we take [pre-service education] for granted, but when you think about it we focus a lot on development and education and we learned about development, and we keep learning about it with the Colleges continued professional learning portfolio, but we don't think about care.

Amanda believes that in order for pre-service educators to understand care and carework, they need to understand the realities of entering the ECEC sector. Amanda indicates that pre-service programs should focus on showing the realities of the sector:

There needs to be more like field placement settings. So, before they graduate, they know exactly what they are getting into. So, there is a need for sites where students, ECE students are not just doing all the custodial work. Just because they have a student doesn't mean they have extra hands, like dishes and toys. I think it is important the RECEs know that when they have students they are coming to earn and learn first-hand, and run a room, and connect with children, not just doing diapers.

On the other hand, Cathy, an Ontario Certificate of Teaching candidate, does not believe that pre-service educators can be taught about care because she views caring abilities as innate to women:

In my opinion the sector of ECE is like I said is natural, and you either have it or you don't have it. It is not something that can be taught. You cannot sit in a class and learn to give a hug, or show love to a child and that comes from within. So, if you don't have that, then this is not where you should be working.

ECEC policies and regulations. ECEC policies are put in place by governing bodies to create a benchmark of standards for ECEC programs to adhere to. These policies and regulations, as mentioned before are usually created without consulting educators and children. As a result, three educators indicated that some ECEC policies create barriers for educators to care well. For example, Amanda stresses that the funding policies add stress for educators:

...a barrier to care is the funding cuts. A lot of the time the centres are subsidized, so if we are going to cut [funding], what is going to happen to children So with that the funding cuts, I think the lack of knowledge of what the funding is used for, it is pretty sad. [Children] need this...I think governments are cutting things without realizing the value of care, and what we do on a daily basis is more than custodial. It is an easy place to cut, we can cut it and invest it elsewhere. And cutting the childcare budget or investment and is completely devaluing care in our job and what it does for children.

Alisha highlights that cutting funding for ECEC programs reinforces the idea that ECEC, specifically childcare is devalued and not important:

I think as a society, we make the mistake of forgetting how important children are at this stage in their life, and you know we put so much importance on them becoming something. That the focus is on elementary and high school and that these developmental stages don't happen on their own. If we don't fund early years education effectively and provide spaces and quality educators, ultimately, society is suffering. Without the funding we cannot care and educate children.

The College of Early Childhood Educators (CECE) in Ontario is also responsible for regulating the profession. Martina indicates that policies put into place by the CECE can be a barrier for educators to practice care:

The fact that the college of early childhood educators exists, I think is good. What they have done in my own personal career as an REECE? Nothing. Wages haven't changed, working conditions have worsened, we have more responsibility and not a lot of support from them.

Sanjana adds that she feels as though the CECE does not help define the role and responsibilities RECEs. On this she noted the following:

In school we learned about cognitive development and curriculum and how you immerse yourself all in small moments with children, and then the Ministry and the college are telling us different things of what being an ECE is. Care in the Code of Ethics has nothing to do with care, but has to do professionalization. Like the college is not recognizing what care and carework is and how it is important.

The critical qualitative inquiry interviews that were conducted, produced rich and meaningful data that revealed participants' views on care, carework and care practices in ECEC programs. The next chapter aims to further analyze these findings in relation to the study's theoretical framework (political economy of care), relevant literature and as previously indicated, MacNaughton's (2003) critical reflection framework.

Chapter Five – Discussion

This research study is grounded in the assumption that there is a devaluation of care and carework in ECEC programs the public and educators themselves. Using a political economy of care and feminist analysis, it is assumed that this devaluation stems from: the gendered and racialized nature of the ECEC workforce; historical understandings of care as a private responsibility; and the divide in value between care and education. Based on this grounding, the purpose of my study is to contribute to new ways of thinking about care, carework and care practices in ECEC programs, through an assessment of RECEs' reflections on the value of care. To do so, care and carework experiences and perspectives of RECEs working in the sector are explored using critical qualitative inquiry (CQI) interviews. These CQI interviews, highlight the perspectives of RECEs in Ontario, whose voices are often marginalized, to answer the research question: "How do Ontario registered early childhood educators (RECEs) describe care, carework and care practices in early childhood education and care programs?"

The aim of this chapter is to further analyze the views of these RECEs in relation to the study's theoretical framework (political economy of care) and relevant literature. As previously indicated in Chapter Three, I will also be using MacNaughton's (2003) critical reflection framework to demonstrate how participants' views and experiences with care and carework fall within one of the three positions (conforming, reforming and transforming).

The Political Economy of Care and Carework in ECEC Programs

To recap, a political economy of care (PEC) is an approach that centers the importance of care and carework in an economy. It assesses the value of care in a society alongside the worth and value of the carework sector. A PEC analysis assesses to what degree carework is valued in relation to social and economic infrastructure, organization and reproduction (Mahon &

Robinson, 2011). Application of a PEC framework, to the perspectives and experiences of educators in this study, suggests participants views on care and carework are consistent with the key features of a PEC. The care that the participants describe, is nurturant care, which Duffy (2005) identifies as ‘care’ that consists of face to face interactions and relationships with care recipients. Participants all suggest that care and carework in ECEC settings are devalued, but also reinforces the view that care is natural to women. This understanding is part of the established thought that in itself contributes to the marginalization of care on the role of women as caregivers. Tronto (2013) maintains that the argument of care as “natural” and the responsibility of those who are ‘naturally good at caring’ reinforces Aristotle’s description of ECEs “natural slaves” (p. 7). In addition, she argues that this historical understanding reinforces, “recent ideological accounts of who in society is most caring and makes women bear the burden of care” (Tronto, 2013, p. 7). I was not surprised by this finding, given what the participants themselves identified were messages that support the dominant narrative about care in their preservice training. However, I was surprised at the number of participants who believed the care is natural to women. This perspective goes against acknowledging that good education includes care and that good care includes education. Moreover, this perspective works against the notion that both good educator and a professional educator can be a caring professional.

Another finding indicates that participants did not readily link the devaluation of care with their low wages. Davidson (2007) quotes one of his participants who suggested “it would be *good* to value and care about the work of [educators] and would be *better* to increase teachers' salaries” (p. 161, my emphasis). Tully (1998) and Tronto (2013) tackles the popular the argument that carework does not need to be well paid. This argument stems from the historical connotations that those who participate in caregiving do so because caring matters so much to

them and that there is an innate gratification that means more than a monetary reward. Martina, was the only participant who associated women's perceived 'natural caring abilities' with the devaluation of care labour, feminization of the workforce, and low wages of educators. Martina noted that, "it is a female profession and there is an association of femininity and raising children and so society correlates your wage to the value of the work you do". Carework, as Martina explains, is not seen as professional work in the public sphere; rather, it is seen as work that comes naturally to women as mother-substitutes and relegates women to the private sphere of carework (Ailwood, 2008; Hara, 2007; Koven & Michel, 1990).

Another distinct finding that was that no participant addressed race or the racialization of the sector when describing the devaluation of carework in ECEC programs. I found this to be surprising in that, 98% of the workforce in Ontario is gendered and although racial composition of the ECEC workforce in Ontario is not available, the racialization of the Ontario workforce can be observed in practice (Deazeley, 2019). Moreover, Duffy (2007), notes that "dirty carework" (cleaning, cooking, bathing, feeding) is more commonly associated as work completed by "racial-ethnic women" (p. 317). Nevertheless, it is important to note that most of the participants were white and, therefore, would not directly experience the racialization of their work. However, in the absence of an analysis of the implications of ECEC work for racialized women, the idea that carework is natural for women and racialized women continues to be perpetuated (Abramovitz & Zelnick, 2010; Turnbull, 2010). A majority of the participants would not have experienced the racialization, nor the double jeopardy faced by some careworkers.

It is surprising to me that none of the participants noted that in our society care, is typically treated as a private responsibility of families and as a commodity. Armstrong and Armstrong (2005) and Tronto (2013) posit that without a PEC analysis, care is considered to be

just like any other good or service to be purchased by interested consumers. Tronto (2013) notes that conventional and neoliberal discourses indicate that “if people want care, they will seek it out, and they will pay what it is worth to them” (p. 8) reinforcing the idea that care is not a public matter but a private responsibility and commodity for families. Tronto (2013) challenges this commodification of care and suggests that viewing care as a commodity is problematic due to its complex nature and situational nuances. Considering the current political climate in Ontario and the growing, rather than shrinking market economy, it surprised me that participants did not mention the devaluation of care in a market system.

A PEC analysis helps to understand the historical divide between the public education system and the private ECEC (care) market system. A majority of the participants view this divide as acceptable. They see education and care activities as separate and distinct. Indeed some participants suggest that the more educational (i.e. Montessori) a program is, the less it is about care. This perspective is not surprising since the market ECEC system that exists in Canada only reinforces this divide and continues to suggest that care is not viewed as a public good like education, but rather as a private concern for families, female educators and children.

Barriers to Caring Well

The participants’ perspectives on barriers to caring well are consistent with the literature examined in Chapter Two. Scholars such as Kummnen (2016), Pacini-Ketchabaw (2012), Rose and Whitty (2010), and Wien (1996) address how the notion of regulated time and scheduled time creates constraints for educators in practice, in critical reflection and when engaging with children. Wein (1996) suggests that, “time [for educators] is a scarce resource and [educators] were rushed by time pressures which undercut children’s play and the program which teachers prioritized” (p. 377). Similarly, Amanda, found that the overwhelming time spent on ministry

documentation and addressing regulations prevented her from interacting and caring for children in her room. Wein (1996) also suggests that educators' days are, "organized in a tightly scripted production schedule, with rigidly kept time slots for specific activities" and that often exploration and interactions with children fall by the way side. Alisha suggests that because of all the things that need to be done in a day, she often feels as though, "there might be kids who don't get all the care they deserve".

The rigidity of time and scheduling according to a number of early childhood scholars, is ineffective. These scholars argue that "children in particular require slow, unhurried time for development, learning and relationship building" (Wein, 1996, p. 386. Also see Edwards et al., 1993; Elkind, 1988; Hendrick, 1986; Hohmann, Banet, & Weikart, 1979; Leach, 1994 as cited by). Though Davidson's (2007) research is centered around primary teacher motivation, the participants suggested that when they are able to spend more one on one time with children, both the teacher and the child are more motivated to interact and learn. Although Wein's (1996) article was written 25 years ago, the demands on educators have only continued to grow, making it more relevant than ever. Participants remarked on the intensity of their workload and the effects this is having on caring well, reinforcing Sanjana's description of "the never ending checklist of repetition [which] takes away our time with the children". As a result of this lack of time, there are emotional and physical strains on educators; they are over worked, underpaid and devalued.

Participants also believe that pre-service education programs have a role to play in ensuring incoming educators understand the importance and value of care and carework. Scholars such as Dahlberg and Moss (2005) suggest that contesting the status quo in ECEC programs is essential in expanding the conventional narratives associated with ECEC. When pre-

service programs solely reinforce a developmental and positivist standpoint, there is no space for understanding ECEC on a more complex and nuanced level. Participants suggested that pre-service programs need to support incoming educators in understanding that ECEC programs are complex systems that should value education and care rather than polarizing one against the other. Moss (2018) suggests that there are a number of “different ways of thinking, talking and doing early childhood education” (p. 3). As such, there is a need for pre-service programs to introduce students to alternative theories other than developmentally appropriate practice (DAP) which has led to the construction of universal truths in child development and childhood. If pre-service programs continue to enforce a singular approach, incoming educators will not understand the complexities of care, and these same educators will continue to reinforce what is already out there. They will fail to address and see care and education as integral to one another.

MacNaughton’s Critical Reflection Framework

As identified in Chapter Three, MacNaughton’s critical reflection framework was applied to further analyze the results of this study. MacNaughton (2003) posits the role of critical reflection in early childhood education and how it can contribute to new ways of being, thinking and doing in ECEC program. MacNaughton (2003) stresses that this framework is “an attempt to provide early childhood educators with tools to help them to reflect critically on the ‘big ideas’ that they use to shape their daily deeds with young children” (p. 2). MacNaughton (2003) notes that this framework’s goal is to assist educators in the process of critical reflection and in internally identifying purposefully and mindfully, “which approach is the best one...[noting that] one cannot choose not to choose, because to accept the status quo is also to make a choice” (MacNaughton, 2013, p. 3). It is important to highlight again, that although MacNaughton’s framework is centered around shaping ECEC curriculum, I maintain that it is also helpful for

further analysis of the role of care and care work in ECEC programs. MacNaughton (2003) suggests three positions that can create space for critical reflection and thinking: (1) conforming; (2) reforming; and (3) transforming. Each of these positions will be examined in relation to my research results.

A conforming devaluation of care. As previously discussed, ‘conforming’ can be defined as, “complying with the existing practices, rules, traditions and understandings” (Mac Naughton, 2013, p. 121). Looking at the results of this study and linked to the PEC analysis there were many concepts that participants shared which conform to the dominant social and historical understandings of care and carework. First, six participants suggested that women have a natural predisposition to caring; which conforms to a societal belief of women as caregivers, and educators as mother-substitutes (Ailwood, 2008). The second was a majority belief that care and education are both important but are separate activities. Participants believe that care is more than custodial but not intellectual or educational. This thinking conforms to the historical divide between care and education described by a number of scholars (Ailwood, 2008, 2017; Langford et. al., 2017; Van Laere, Peeters, & Vandenbroeck, 2012, Armstrong & Armstrong, 2005).

Reforming the devaluation of care. As previously mentioned, reforming can be defined as, “making moderate changes to something” (MacNaughton, 2003, p. 155); this reforming position can exist when there is a desire to confront dominant discourses, however, in reforming, there can also be a struggle in actively challenging and changing the status quo. For example, participants do not see the integration of care and education. However, they do see both care and education as important in ECEC. This perspective could be considered as being on the cusp of 'reforming'. In addition, the majority of participants identified that care is more than custodial care. They suggest that care includes emotional care but they are unable to see care as

educational or intellectual. I would suggest that the belief of ‘more than custodial’ is a result of a reformation of ideas associated with care and carework. The participants in this study, believed that looking at emotional care was challenging the dominant understandings of carework as only physical and custodial. Because the participants are thinking differently about care, they are trying to reform their thinking to challenge the dominant and making moderate changes to their beliefs. However, I was surprised that there was no suggested reforming position in connecting the devaluation of carework to gender and race by the participants.

All participants suggested that there are barriers to caring well and in identifying these barriers, they are signalling that change is needed. However, a majority of participants have not been able to resist, challenge and advocate for change, due to the lack of time. The participants provide ways in which these barriers can be challenged and suggest that there needs to be support from governments in understanding the value of the carework being done. Educators suggest that this can be done with investment in ECEC and changes in policies in the ECEC sector. A few participants suggest that by addressing the barriers, there will also be a change in the wages of educators, resulting in changes in the exploitation of ECE and the precarity of their work.

Transforming the devaluation of care. MacNaughton (2003) defines the transforming position as, “fundamentally changing the existing practices, rules, traditions and understandings” (p. 182); this transforming process exists when beliefs are liberated and materialized to create environments that are enabling, democratic and when dominant discourses and understandings are deconstructed. Although a majority of educators do not take a transforming position, I would argue that three of the seven participants are on the cusp between reforming and transforming. For example, Aniya and Sanjana discussed that, in their practice, caring interactions are seen as

intellectual and educational experiences. Alisha also suggests that although there are times when she does not naturally ‘love’ a child, she still views it as her responsibility to care for this child. Taken together, these perspectives, directly challenge existing practices and dominant views of care and education as two distinct components in ECEC programs.

Three participants did agree that there is a need for more public funding in the ECEC system, and that with this funding the ECEC system could be transformed. Alisha highlights that ECEC has never been given the funding it deserves and notes that “if there was more funding for everyone and other families could afford to access programs, I think more people would see the value in what we do for work. If we made it [ECEC] accessible to everyone, it would be better”. This transformation could make childcare part of the education system and would see ECEC as a public system, with public funding and public value. In this way, the participants are asserting care in practice and policy (Langford et al., 2017). Reinke, Stephanie, Peters, Lacey, Castner and Daniel, (2019) suggest that when, “[educators] critically deconstruct the hegemonies of standardization that structure early childhood classrooms and teacher education, [they] simultaneously strive to reconstruct alternative ways of being early childhood educators” (p. 192). As previously mentioned, all educators believed that there is a need to transform the ways that pre-service programs position the value of care and carework.

Although this application of MacNaughton’s (2003) framework is brief, it can begin to further important necessary dialogue for transforming ideas about care and carework in ECEC programs. It can begin to shift our own thinking, and can, potentially, lead to transformed understandings of the value of care, carework and care practices in ECEC programs.

Further Research

Given my findings, I would be interested in extending the existing study with a larger, more racially and geographically diverse sample. I believe this would give me better insight into the various carework experiences of gendered and racialized women in the ECEC sector in urban and rural communities in Ontario, and potentially across Canada. There are also a number of other avenues for possible future research. Many participants mentioned the topics of ECE professional identity and professionalism in relation to carework, training, regulation, policy and the role of the College of Early Childhood Educators. Therefore, further research could explore early childhood educators' perspectives on relationships between carework and their own professional identity. This research could also examine connections between educators' perspectives and the ways in which the College of Early Childhood Educators communicate links between care and professionalism.

Limitations

This study was limited in a number of ways that may have affected the data collection and overall analysis. The leading limitations of this study include the relatively small sample size, geographic location of the participants and racial diversity. Although I indicated that the small sample size yielded rich and pertinent data, I believe that a sample size of seven educators, largely homogenous, from the City of Toronto and GTA is too small for critical discussion and transformation. The devaluation of care and carework is central to educators across Ontario, and so when looking to provide space for marginalized voices, there is a need for it to be geographically representative of the workforce. As such, it would have been beneficial to hear from educators in other parts of the province, to see if these findings were consistent across Ontario. It would have also strengthened my research if my sample had included more racial

diversity to investigate if various groups of educators experience and see care, carework and care practices differently.

Further, participants in the study did not have more than 10 years of work experience. This was a limitation in that there were no perspectives on care or carework prior to the implementation of more regulations and policies by the Ministry of Education and the College of Early Childhood Educators. Hence, I was not able to see in participants, an evolution of their understandings of care or carework. By including educators with a range of work experience, it would have enabled me to look at how generational differences may impact educators descriptions of care as custodial or more than custodial. In addition, the variability of years of work, would potentially give me insight into historical maternal dispositions of care and carework; to see how these dispositions, may or may not have been more evident in seasoned educators as opposed to new educators. Finally, I think that there is an opportunity to further engage in CQI with educators. With this study, I was able to engage in what Flick (2017) describes as the first level of CQI, where, my research addressed, “a social problem of a vulnerable group” and provided a modest space “for [them to] mak[e] a contribution” (p. 3). Flick (2017) suggests that the overall goal of CQI is to have critical discussions about the findings and:

To remain in the game and to continue with doing qualitative research, identifying issues and people concerned by them, trying to identify problems and possible suggestions of how to solve them and to avoid being just driven aside by the common trends in social research – which may foresee limited spaces for qualitative and critical research. (p. 4)

This furthers my thinking, in that not only can CQI be further applied towards this study, but also other issues or factors relating to the ECEC workforce such as wages and working conditions.

Recommendations

The findings of this study point to some recommendations that could potentially enhance ECEs' perspectives on the value of care, carework and care practices in ECEC programs. The findings suggest that: (1) the low wages and precarious working conditions of ECEs need to be tackled; (2) pre-service education programs need to contest dominant discourses on care and education in ECEC; and (3) there is a need for on-going professional development that critically examines how care and education can be seen as integral to one another.

I understand that increasing the wages and enhancing the working conditions of early childhood educators is not a recommendation will come to fruition overnight. As indicated by Martina, society associates the value of your job with the wages that you receive. I know the Professional Pay and Decent Work Campaign by the AECEO in partnership with the Ontario Coalition for Better Childcare is working towards this (Association of Early Childhood Educator's Decent Work Task Force, 2017). However, I believe that more can be done by the College of Early Childhood Educators and the Ministry of Education in reinforcing and addressing the value that quality educators bring to the sector. With a federal election on the horizon, I hope that the value of the ECEC workforce will be addressed in campaign platforms.

Reforming pre-service education programs is something that Ontario is already addressing with the Provincial Centre of Excellence for Early Years and Child Care lead by Western University in London, Ontario. It is also time to ensure that pre-service ECE programs are not erasing care from course work, but instead highlighting that good education is good care and good care is good education. I believe that by imbedding alternative narratives and pedagogies proposed by scholars such as Moss (2005, 2006, 2010, 2014, 2019), Dahlberg (2005), Canella (2008, 2009), Langford (2006, 2015, 2017), Pacini-Ketchabaw (2012, 2016) and others

into pre-service programs, the ways in which the integration of care and education is possible will be more evident.

With the implementation of the Continuous Professional Learning portfolio by the College of Early Childhood Educators, I believe there is a need for the CECE to create and administer more on-going professional development activities (PD). There are over 53,000 RECEs in Ontario who are required to complete PD. This is an opportune moment in time to create workshops, seminars and other venues for new ways of thinking, being, learning and doing. If educators become more familiar with varied ways of thinking, doing, being and understanding they are more likely to incorporate different even transforming approaches of interacting with, caring for and educating young children (Perlman, Kankesan & Zhang, 2008).

Chapter Six – Conclusion

This critical quality inquiry study was conducted with seven registered early childhood educators from the City of Toronto and the GTA. The purpose of this study was to provide a space where educators could modestly contribute to thinking differently about care, carework and care practices in ECEC. The study answered the research question: How do Ontario registered early childhood educators (RECEs) describe care, carework and care practices in early childhood education and care programs? Findings suggested that participants believe: (1) Care is devalued but, is viewed as natural to ECEs; (2) Care is more than custodial but is not educational or intellectual; and (3) Educators face barriers to caring well in ECEC programs. MacNaughton's (2003) critical framework was applied to these beliefs. This application indicates that the participants held some conventional understandings. At the same time, the participants resisted other dominant ideas about care and carework and suggested some preliminary ways to reform and transform these ideas (Moss, 2010, 2014, 2018; Dahlberg & Moss, 2005; Pacini-Ketchabaw et. al., 2015,).

It is my hope that this study, modestly contributes to a growing body of literature surrounding the devaluation of care and carework. I hope that this study begins to prioritize the marginalized voices of RECEs and potentially provides educators with a space to discuss, inform, and engage in critical dialogue about care and carework in ECEC programs. As Moss (2018) states, "I see the strategic role of the resistance movement, to be ready for the crisis, with developed ideas and 'alternatives to existing policies' " (p. 175). I believe that from this study, there is hope that educators are interested in sharing their perspectives and in thinking about ways to transform and reassert the value of care and carework in ECEC programs.

APPENDIX

Appendix A – Research Ethics Board Approval



To: Sophia Mohamed
Early Childhood Studies
Re: REB 2019-142: Understanding Early Childhood Educators' Perspectives of Care
Date: May 8, 2019

Dear Sophia Mohamed,

The review of your protocol REB File REB 2019-142 is now complete. The project has been approved for a one year period. Please note that before proceeding with your project, compliance with other required University approvals/certifications, institutional requirements, or governmental authorizations may be required.

This approval may be extended after one year upon request. Please be advised that if the project is not renewed, approval will expire and no more research involving humans may take place. If this is a funded project, access to research funds may also be affected.

Please note that REB approval policies require that you adhere strictly to the protocol as last reviewed by the REB and that any modifications must be approved by the Board before they can be implemented. Adverse or unexpected events must be reported to the REB as soon as possible with an indication from the Principal Investigator as to how, in the view of the Principal Investigator, these events affect the continuation of the protocol.

Finally, if research subjects are in the care of a health facility, at a school, or other institution or community organization, it is the responsibility of the Principal Investigator to ensure that the ethical guidelines and approvals of those facilities or institutions are obtained and filed with the REB prior to the initiation of any research.

Please quote your REB file number (REB 2019-142) on future correspondence.

Congratulations and best of luck in conducting your research.

A handwritten signature in black ink, appearing to read "Patrizia", followed by a stylized flourish.

Dr. Patrizia Albanese, PhD
Chair, Ryerson University Research Ethics Board

The Following protocol attachments have been reviewed and approved.

Appendix B – Participant Recruitment Email to Directors



Email to Supervisors/ Director/ Owner/ Manager

Hello (Manager, Director or Centre Supervisor),

My name is Sophia Mohamed and I am a Masters of Arts in Early Childhood Studies Student at Ryerson University. I am in the process of recruiting participants for my Major Research Paper which is being conducted as part of my graduate studies for the partial completion of my Master's degree.

The title of my research study is: Understanding Early Childhood Educators' Perspectives of Care. The purpose of my research study is to understand care and care practices in early childhood education from the lived experiences of early childhood educators.

I am looking for **RECEs** who are working or have worked in an ECEC setting or program within the City of Toronto or GTA within the last year. Participant should have a **minimum of one year experience** in an **ECEC program or setting** and who would be willing to **take part in a one time, 1-hour, audio recorded, one-on-one interview**. Please see the attached flyer for more information.

I have attached a recruitment letter and flyer to this email and hope that you would be willing to share it with staff at your centre to see if any RECEs would be interested in participating in my study.

If you have any questions, please feel free to contact me at sophia1.mohamed@ryerson.ca or my supervisor Dr. Rachel Lanford at rlangfor@ryerson.ca

Thank you for your time. I look forward to hearing from some prospective participants.

Best regards,

Sophia Mohamed

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Sophia Mohamed, B ECL (*Hons.*), RECE
Student, MA Early Childhood Studies, Ryerson University
sophia1.mohamed@ryerson.ca

This research has been reviewed by the Ryerson REB # 2019-142

Appendix C – Participant Recruitment Letter



Recruitment Letter for Centre Supervisors to Share with Staff

Hello RECEs,

My name is Sophia Mohamed and I am a Masters of Arts in Early Childhood Studies Student at Ryerson University. I am in the process of recruiting participants for my Major Research Paper which is being conducted as part of my graduate studies for the partial completion of my Master's degree.

The title of my research study is: Understanding Early Childhood Educators' Perspectives of Care. The purpose of my research study is to understand care and care practices in early childhood education from the lived experiences of early childhood educators working in ECEC programs and settings.

I am looking for **RECEs** who **are working full time or have worked** in an ECEC setting or program within the City of Toronto or GTA **within the last year**. Participant should have a **minimum of one year experience** in an **ECEC program or setting** and who would be willing to **take part in a one time, 1-hour, audio recorded, one-on-one interview**. Please see the attached flyer for more information.

If you are interested in participating or would like more information – please email me at sophia1.mohamed@ryerson.ca.

Thank you for your time.

I look forward to hearing from some of you!

Best regards,

Sophia Mohamed

--

Sophia Mohamed, B ECL (*Hons.*), RECE
Student, MA Early Childhood Studies, Ryerson University
sophia1.mohamed@ryerson.ca

This research has been reviewed by the Ryerson REB # 2019-142

Appendix D – Participant Recruitment Flyer



This research has been reviewed by the Ryerson REB # 2019-142

Are you a RECE? Are you interested in Care and Care Practices? If so...see below!

The purpose of this study is to understand Registered Early Childhood Educators' perspectives and definitions of care, care work and care practices in early childhood education and care settings and programs.

WHO: Registered Early Childhood Educator, who is working/ has worked in a ECEC Program or Setting in Toronto or the GTA in the last year?

WHAT: One time, one hour, audio recorded, one-on-one interview about your perspective of care work and care practices in early childhood education and care settings and programs. Participation in this study is voluntary.

WHERE: Ryerson University, Skype/ Over the Phone

If you are interested or would like more details please email sophia1.mohamed@ryerson.ca to be part of an exciting research opportunity! Only selected participants will be contacted for further information.

Cost of travel up to \$8.00/ per way to a maximum of \$16.00 total will be covered if receipts are provided and interview is conducted in person



Appendix E – Consent Form

School of Early Childhood Studies
Faculty of Community Services
Master of Arts in Early Childhood Studies
Consent Agreement

You are being asked to participate in a Master of Arts Research Project exploring Early Childhood Educators perspectives of care and care practices. Before you consent to participate, please read the document ask any questions to be sure you understand what your participation will involve.

Title of the Study: Understanding Early Childhood Educators' Perspectives of Care.

Investigators: This research study is being conducted by Sophia Mohamed under the supervision on Dr. Rachel Langford, from School of Early Childhood Studies, Faculty of Community Services at Ryerson University. Sophia Mohamed is completing this research study as part of their graduate studies program for the partial completion of their Master's degree.

Researcher: **Sophia S. Mohamed**
sophia1.mohamed@ryerson.ca
647-530-5021

Supervisor: **Dr. Rachel Langford**
School of Early Childhood Studies
Ryerson University
rlangfor@ryerson.ca
416-979-5000, x 2516

Purpose of the Research Study: This research study is part of the principal researcher's Master's Research Paper (MRP) in fulfilment as part of the requirements for the Master of Arts in Early Childhood Studies degree program at Ryerson University.

The research will investigate the lived experiences of 8 – 10 Registered Early Childhood Educators, currently working full-time, with a minimum of one year work experience and their experiences relating to care and care practices in early childhood education and care programs or settings. The data collected for this assignment will be used for the purpose of completing a Master's Research Paper (MRP) by the researcher. The data may be used in future publications by the researcher.

Description of the Study: The purpose of this study is to research registered early childhood educators' understandings and definitions of care, carework and care practices in early childhood education and care settings and programs.

This research has been reviewed by the Ryerson REB # 2019-142

You will participate in a one-hour, one on one, semi-structured, open-ended, individual interview about your understandings of and experiences with care and care practices in ECEC. The interview will take approximately 1 hour and will be done in-person/over the phone/ via Skype.

You will be asked open-ended questions and will be given the opportunity to elaborate on your perspectives and experiences. All responses, upon consent, will be audio recorded and transcribed verbatim.

Participants will have the opportunity to read the transcripts of their interview, and will have one week (7 days) to make any changes using the 'Track Changes' tool in Microsoft Word.

- **Sample Question:** Can you describe a time where you practiced care? (probe: In what ways do you see care practiced in your program?)

Benefits: The aim of the study is to reaffirm and value the carework and care practices that educators engage in. The study will contribute to the growing body of literature seeking to reassert the importance of care and carework in ECEC. It is not guaranteed, however that you will receive any benefits from participating in this study.

Risk: Minimal psychological risk may occur when an educator is asked to speak about their own care practices and understanding of care, in that participants may feel uncomfortable sharing experiences with children and families they have worked with. The reason this risk is minimal, is that no harm will be coming to the participant, the child or family, they may or may not be referring to. This will be mitigated by the investigator by ensuring that the participant knows that the information shared is entirely confidential and voluntary.

Minimal financial, professional and legal risk may occur if and when a participant discloses information to the researcher about child abuse, neglect or other information that falls under duty to report for Registered Early Childhood Educators.

Supports for participants to talk about care and care practices can be accessed through the Association of Early Childhood Educators website and if the participant feels there is a need to report any suspicion of child abuse or neglect, the information is available from the College of Early Childhood Educators

https://www.collegeece.ca/en/Documents/Professional_Advisory_Duty_to_Report.pdf

Confidentiality: Your responses and confidentiality will be protected throughout the process of this study. A fictitious name (pseudonym) will be used for you and any specific identifiable characteristics will be altered. If you disclose your place of a work, a pseudonym will also be given for your place of employment. Your perspectives and opinions will be kept strictly confidential by the researcher. Direct quotes from you may be used in the final report, if consented, but they will not be attributable to you or reveal your identity.

This research has been reviewed by the Ryerson REB # 2019-142

Participants will have the right to review/edit copies of the transcript of their interview if they choose to do so, as stated above.

Duty to Report & Loss of Confidentiality: If at any point during the interview, the researcher is notified of an instance or suspects any child abuse or neglect concerning the welfare of a child, the researcher will be forced to terminate the interview. As the researcher is also a RECE, they are bound by a 'Duty to Report' clause in the Child, Youth and Family Services Act, 2017 in accordance with the Code of Ethics and Standards of Practice by the College of Early Childhood Educators Ontario, in this case, participants will forfeit their right to confidentiality.

This research has been reviewed by the Ryerson REB # 2019-142

Data Storage: The audio recordings of the interview will be destroyed upon transcription and transcripts will be kept on the researchers Ryerson University Google Drive which is locked and password protected with two-factor authentication. This information is accessible only to the researcher and MRP supervisor for three (3) years.

All digital consent forms will be stored on the researchers Ryerson University Google Drive which is locked and password protected with two-factor authentication. This information is accessible only to the researcher and MRP supervisor for three (3) years. No hard copy of consent forms will be stored and upon digitization, hard copies will be destroyed via secure shredding. After three (3) years, the researcher will delete all data related this research study.

Cost of Participation: Participants will be reimbursed transit expenses in the event they engage in face-to-face interviews with the researcher. The maximum reimbursement for travel is \$16.00 per/participant and participants will need to provide researcher with receipts for travel costs.

Voluntary nature of Participation: Participation in this study is voluntary. If any questions make you uncomfortable, you do not have to answer them. You may choose to stop participating in this study at any time and will still be reimbursed cost of travel if applicable. You may also choose not to have your data included in the study up to one week after your interview.

Your choice of whether you would like to participate, or not, will not influence your future relations with Ryerson University, the School of Early Childhood Studies, Sophia Mohamed, Dr. Rachel Langford, or the agency where you are employed unless it is related to 'Duty to Report'.

Findings: All Ryerson University MRPs are available on the Ryerson University digital repository. Upon completion of the study the final paper will be available at <https://digital.library.ryerson.ca/> and is open for all to access.

This research has been reviewed by the Ryerson REB # 2019-142

Questions about the Study: The data in this study will be used for the MRP and maybe used for future publications. If you have any questions about the study, you may ask them now. If you have any questions later, you may contact:

Researcher: Sophia Mohamed,
sophia1.mohamed@ryerson.ca
647-530-5021

Supervisor: Dr. Rachel Langford,
rlangfor@ryerson.ca
416-979-5000, X **2516**

This study has been reviewed by the Ryerson University Research Ethics Board. If you have questions regarding your rights as a participant in this study, please contact:

Research Ethics Board
c/o Office of the Vice President,
Research and Innovation
Ryerson University
350 Victoria Street
Toronto, ON, M5B 2K3
416-979-5042
rebchair@ryerson.ca

Understanding Early Childhood Educators' Perspectives of Care

CONFIRMATION OF AGREEMENT

Agreement to participate:

I have read and understand the information provided above for the MRP Research Study within the School of Early Childhood Studies, Ryerson University. I have been given sufficient time to consider the information and have had the opportunity to ask questions which have been answered to my satisfaction. I am voluntarily signing this consent agreement and will receive a copy for my information, and I understand that only pseudonyms of participants and places of work will be used and that no identifying characteristics used in the final MRP.

Your signature below indicates that you have read the information in this agreement and have had a chance to ask any questions you have about the study. Your signature also indicates that you agree to participate in the study and have been told that you can change your mind and withdraw your consent to participate at any time. You have been given a copy of this agreement. You have been told that by signing this consent agreement you are not giving up any of your legal rights.

I understand that I will be interviewed for approximately 60 minutes and that this interview will be audio-tape recorded, transcribed and the researcher may take notes during the interview. I have been given a copy of this agreement and I can contact the researcher or supervisor at any time in the future to request information about this study

Name of Participant (print): _____

Signature of Participant: _____ Date: _____

Audio Recordings	YES	NO	Initial
I grant permission for audio recordings to be taken during interviews to be used during data analysis. I understand how these recordings will be stored and destroyed.			
I would like a copy of the transcribed interview to make changes if need be (within 7 days) using 'Track Changes'.			
I grant permission for direct quotations to be used from the interview.			

Name of Participant (print): _____

Signature of Participant: _____ Date: _____

This research has been reviewed by the Ryerson REB # 2019-142

Appendix F – Data Collection Tool



Open-ended, Semi-structured Interview Questions


















1. To begin, can you share with me your experiences in working in ECEC? (probe: What types of ECEC programs have you worked in?)
2. How would you define care?
3. What are your understandings of care practices?
4. What is your experience with care? (probe: From your perspective: Do the care practices differ?)
5. What do you do to in your practice to showcase care? (probe: What kind of care? Physical, mental, emotional?)
6. What are some types of care that you practice in your program?
7. Can you describe a time where you practiced care? (probe: In what ways do you see care practiced in your program? At what times throughout the day?)
8. What are your roles and responsibilities in relation to care in your job? (probe: do you think care is inherent in your role?, In your team do some educators assume more responsibility for care than others?)
9. What role do children play in care? (probe: How do you know if children have received care?)
10. What do you think are some barriers to practicing care in ECEC? (probe: What is the relationship between care and education?)
11. What do you see as the value of care in ECEC? (probe: How do you feel about the value of care in ECEC?)

12. What changes have you seen over the course of your ECEC career in relation to care?
13. In what ways should pre-service education for ECEs focus on care or care practices?
14. What is your understanding of professional identity?
15. Do you see yourself as a professional? Why or why not? (probe: Do you think being a professional and care go together?)

Is there anything else you would like to share in relation to carework, care practices and professional identity?

Appendix G – Coding Legend

Coding Legend – Data Analysis

Code	Association
	Definition of Care
	Definition of Carework
	Emotional/Relational Care
	Custodia/Physical Care
	Role; Maternal/Natural
	Role; ECE
	Value
	Devaluation
	Professional Work
	Care > Education
	Education > Care
	Care=Education
	Professional Identity
	Yes: Professional
	No; Not Professional
	Type of Program
	Barrier for Educators

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