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Literature Review:
Governance of Integrated Early Care and Learning Systems

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Contents

Glossary

governmentality – a concept associated with French philosopher, Michel Foucault, and further developed by others. It stresses that governance (i.e. regulation, control, management) does not occur only through traditional state institutions, but that power is also exercised more informally through interpersonal relationships, families, neighbourhoods, etc.

liberal regime – describes welfare states that have a limited array of social programs, and emphasize targeted services over universal ones. They rely heavily on services provided in the market, and emphasize individual responsibility. Examples include Canada, the US, Australia, and New Zealand.

neoliberalism – an ideology based on limited government intervention in the economy and individualism. It became dominant in the 1980s, and formed the basis for cuts to taxes and social programs, especially over the 1990s.

social capital – a concept used to refer to relationships of trust and social networks in communities. It has been linked to a range of positive outcomes including social cohesion, cooperation, and democratic participation, but has been contested by others.

social democracy – an ideology that believes the state should play a central role in providing for the social welfare of its citizens. Notions of universal entitlement and collective responsibility are paramount. This is the prevailing view in countries like Sweden, Norway, Finland, and Denmark (also known as 'social democratic regimes')

The first section reviews a range of sources related to early care and learning (ECL) in specific international case studies: Australia; Reggio Emilia (Italy); New Jersey, USA; New Zealand; South Korea; and Venezuela. The literature in the next section looks at governance more broadly, beyond a particular jurisdiction, and includes examples in different social policy fields. The final section discusses more theoretical pieces that are not necessarily specific to child care, but are useful in thinking about issues of democracy, governance, and women's equality in social welfare policy.

A) <u>International Models</u>

Australia

*Note: the sources in this section are describing Australia's system **prior** to the shift toward corporate child care and its subsequent collapse. The pieces explore the community-based model that had been in place for several decades.*

Brennan, Deborah. (1998). *The Politics of Australian Child Care: Philanthropy to Feminism and Beyond*. 2nd Edition. Cambridge: Cambridge University Press.

Brennan reviews the history of the "Australian community child care movement" (2), arguing that its unique governance model has been influenced by women and feminists. In Australia (prior to the 1990s), the "majority of child care services are provided by non-profit organisations managed by community groups (usually comprised of parents and child care workers)" (Brennan 5). This can be traced back to the 1890s, when voluntary organizations emerged to improve the care and education of children (6), and was taken up by the women's movement in the 1960s. Brennan defines community-based as non-profit services that are run by parent committees (11). She discusses the advantages and challenges associated with this governance model.

Brennan, Deborah. (2007). "The ABC of Child Care Politics." *Australian Journal of Social Issues*. 42 no. 2. pp. 213-225.

Brennan examines the rise for-profit child care chains in Australia. She cites research showing that corporate chains score below community-based and independent private providers on service quality, staff relationships with children, and food provision, and that "private operators are far more likely than community-based services to seek exemptions from state requirements to employ trained teachers" (2007 291-220). The growth of commercial providers may also act as a barrier to a more comprehensive system of family policy, as businesses resist other parental supports, such as maternity leave, that could affect their profits. Brennan notes that the "prospectus for the now defunct Child Care Centres Australia, developed by Michael Kroger and Andrew Peacock, named paid maternity leave as one of the commercial 'risks' the business faced" (220).

O'Connor, Julia S, Ann Shola Orloff and Sheila Shaver. (1999). *States, Markets, Families: Gender, Liberalism and Social Policy in Australia, Canada, Great Britain and the United States*. Cambridge: Cambridge University Press.

O'Connor et al. compare the welfare states of four 'liberal' regimes: Australia, Canada, Great Britain and the U.S. in order to demonstrate variation within them. In child care, Australia's model has been unique, taking a "mixed public/private/community approach to

child care" (82). They also point out that an "additional contrast between Australia and the other three countries [US, Britain and Canada] is that, unlike those national governments, the Australian Commonwealth Government plays a major role in funding child care services and Australia has more government provision of child care than any of the other countries" (82).

How Does the Australian System Match With the Starting Principles?

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1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

In the community-based model, the national government played an important function (O'Connor et al. 1999). The Labor government in Australia, "had accorded a major role to the commonwealth in funding a variety of social welfare programs, including child care. This approach sprang from the belief that only the commonwealth, with its major financial powers and ability to plan programs at the national level, could ensure some degree of equality provision throughout the nation. It was also an acknowledgement that some kinds of social goods were no likely to be produced at an affordable level by 'the market' and would never be provided by state governments" (Brennan 1998 97).

2. **Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.**

Australia developed an extensive system of community control. One of the essential elements of this model was that public funding was linked to requirements for community management. This was spelled out in the 1972 Child Care Act, which provided that "the only services to receive federal funding would be those initiated by local groups" (Brennan 1998 68). National governments would allocate funds to local governments on the condition that they "demonstrated that they had consulted with their residents. Local governments were expected to 'initiate community planning, make the final decisions as to which groups [would] be funded, disburse funds and co-ordinate the programmes in each area" (1998 88). While this meant that participation or 'community management' was integral to the system, it also relied on a 'submission model of funding,' where communities initiate all projects (Brennan 1998 92). The implications of this are discussed below in reference to social inclusion.

In terms of integrating early care and learning, like many countries, Australia has a history of dividing care and education (Brennan 1998 7). This split occurred very early, when kindergarten was provided by teachers and day nurseries by nurses (Brennan 1998 28). Very different values were attached to each, with state support favouring kindergarten as more "respectable" (Brennan 31). The submission process also seems to have contributed to the lack of integration of care and learning because there was no central coordination of services. The division was also reflected in civil society itself, with some focused on kindergartens and others on nurseries, and only started to diminish in the late 1970s, when feminist and early childhood organizations started to align (Brennan 1998 102). An issue for further consideration is that community democracy has the potential to intensify the care/learning division, if ELC for children under 3 strives to integrate community participation, while education services (pre-K and beyond) remain distant from popular input.

As private, for-profit child care services increased in the 1990s, there were no planning criteria applied to the providers to ensure equity in access, and no requirements for parent involvement in governance (unlike for the community-based services) (Brennan 1998 68, 111, 214). Brennan (2007) addresses arguments that market-based services empower customers, pointing out that, "in order for markets to be effective, competing products need to be available and customers must be able to 'shop around' for products that suit them. In the case of child care, these conditions are rarely met. Most parents have little knowledge about the quality of services and, in any case, shortages of supply mean that families often have to take what they can get" (219). A question that remains to be answered is whether the community-based model made the shift to privatization easier in Australia?

The principles underlying Australia's community-based model stem from a context similar to that discussed by Fraser and Rebick (see section C). Brennan explains that in the late 1960s, "[f]eminists formed community child care lobby groups … and called for the public provision of a range of child care services which would be run by parents and which families could use at their own discretion … Feminists expressed demands for new types of services which would be government-funded but managed and controlled by parents" (1998 8). The Women's Liberation 'Community Controlled Child Care' action group formed, and the "philosophy of the group was firmly grounded in a variant of feminism which placed a high value on self-help activities and opposed the 'professionalization' of child care … According to this ideal, women could develop child care services where they controlled what happened and were involved in choosing staff and planning the program. The skills and resources of residents of the local neighbourhoods should be drawn upon wherever possible before recourse was taken to outside experts. It was a model in which, to use and expression of the times, professionals were 'on tap, not on top'" (Brennan 1998 66-67).

Women in the trade union movement also called for state-funded, parent-controlled services (Brennan 1998 67), and in 1975, the Social Welfare Commission released a report called *Project Care* that "recommended that the Australian government sponsor a range of early childhood services including pre-school, day care, family day care, play groups and toddler groups, baby sitting clubs and support services for private members. The mix of services in a particular neighbourhood would be decided by local residents assisted by a community worker or 'catalyst.' These community workers would be required to be thoroughly versed in the Australian government's policy and have considerable knowledge of the local area. They would be required to publicise the policy through the local media, public meetings and small groups and to explain to people how they could use the program" (Brennan 1998 87). In fact, this community-based approach can be traced back further. In 1944 the Australian Women's Charter called for the commonwealth (national) government to "subsidise the establishment of a network of child centres to be developed and administered by a combination of State and local governments and elected citizens' bodies" (1998 50).

These principles were put into practice through a range of strategies, including the submission process discussed above. In addition, in the 1980s, "[p]lanning committees were established in each state and territory to give advice on funding priorities and to represent the interests of each level of government as well as a range of community groups … The composition of these committees varied but in addition to representatives from commonwealth, state and local governments, they generally included members of community organizations, ethnic groups and women's advisory units" (Brennan 1998 175).

The Australian case seems to be an example of progressive movements building on a voluntary tradition that already exists, but steering it in a more inclusive, participatory direction. Canada is also a liberal welfare regime, with a comparable history of voluntary sector service provision. It may be that the community-based model is well suited to the political culture of Canada. Alternatively, this may act to reinforce liberal tendencies.

3. The system of early care and learning advances equity and social inclusion for all.

Australia's history of philanthropy in ECL is similar to Canada's. Brennan refers to the early kindergarten movement's "child-saving mission," where kindergarten was part of the early 19th century social reform and philanthropic movement targeted at the poor and working class to impart middle class values and morals (Brennan 1998 7, 13, 16, 21). Aboriginal peoples also have a similar suspicion of child welfare due to a history of intervention and apprehension (Brennan 1998 6). This history has a racial and cultural legacy that continues to shape communities today.

Brennan also notes that the gendered nature of community was not considered in the Labor government's community management approach (1998 92), and that the submissions process acted to intensify community inequalities. Providers had to be approved, legal organizations, which favoured historical voluntary organizations with professional skills, that were best able to compete for funding. The most advantaged neighbourhoods benefited, resulting in regional disparities across states (Brennan 1998 92- 94). This affirms other research (i.e. Mahon and Jenson, 2006) that inequalities in neighbourhood social capital translate into unequal access to services. Brennan summarizes the contradictory nature of the submissions approach: "Its purpose was to minimise government involvement in day-to-day administrative tasks and to allow local groups to manage their own services. Community management meant that a vast amount of work (from overseeing the construction of centres through to advertising the service, hiring staff, administering the commonwealth grant and liasing with state agencies) was performed by unpaid volunteers" (127).

4. Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.

These sources provide no information on this area.

5. Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.

Australia's system does not stand out based on its level of child care provision. (Brennan 1998 5), and places it in the company of other liberal regimes. The promise of rapid expansion in spaces was one of the major reasons that commercial providers were integrated into the system.

6. Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.

The community-based model had ramifications for the child care workforce. Brennan indicates that, "[a]n ethos of voluntarism and self-help has pervaded the early childhood field since its inception" and that the "ideology of community management – an ideology which

conveys the message 'we're all in this together' – made it extremely difficult for staff to assert their rights" (122, 127).

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

see # 1 & 2

Italy (Reggio Emilia)

Martin, Brendan. (1997). "Growing Trust in Public Service: Why Reggio Emilia's Pre-schools are World Class." Access at: http://www.publicworld.org/docs/italykids.pdf

Martin looks at the participatory tradition in Reggio Emilia. He argues that "Reggio has achieved just what modern public service reform is supposed to be aimed at: efficient, affordable and responsive services of high quality, provided through well-motivated and continually innovating workforces, securely rooted in—and, therefore, all the more responsive to—local communities. Underpinned by democratic accountability, Reggio's route to excellence provides an object lesson and challenge to the market-based orthodoxies of the international technocracy driving public service reform worldwide" (2). Martin shows that the internationally renowned Reggio Emilia system is unique not only in its pedagogical approach, but also in its "radical transformation of municipal governance" in 1960 and 1970s (3).

Moss, Peter. (2007). Bringing Politics into the Nursery: Early Childhood Education as Democratic Practice." Working Paper 43. Bernard van Leer Foundation: The Hague, The Netherlands. Access at: http://www.ecdgroup.com/docs/lib_004343335.pdf

Moss builds on Bentley's concept of 'everyday democracy.' Bentley maintains that "[b]uilding everyday democracy therefore depends on applying its principles to everyday institutions through which people make their choices and develop their identities" (Moss 6). As ECE services are expanding, Moss makes the case for ECE as "forums, spaces or sites for political practice, and specifically for democratic political practice" (1). He argues that many view ECE in terms of the production of human capital, or an opportunity for profit-making, saying very little about democracy (1). For Moss, democracy is important because it is a basic right of citizenship, it discourages "unaccountable exercise of power," it can promote cultural diversity, can bring in new ideas, and is more likely to ensure pursuit of the common good (3-4). This is increasingly relevant with the spread of neoliberal ideas about efficiency, effectiveness and managerialism, and the growing depoliticization, political disengagement and cynicism of citizens (Moss 4-5). He uses examples from Reggio Emilia to support his case.

Soler, Janet and Linda Miller. (2007). "The Struggle for Early Childhood Curricula: A Comparison of the English Foundation State Curriculum *Te Whāriki* and Reggio Emilia. In The Routledge Reader in Early Childhood Education, Elizabeth Wood, ed. New York: Routledge.

Soler and Miller focus on variations in national and local control of early childhood curriculum, through the examples of Te Whāriki in New Zealand and Reggio Emilia in Italy. Both have taken innovative approaches to involving communities in curriculum development.

Spaggiari, Sergio. (1998). "The Community-Teacher Partnership in the Governance of the Schools." In *The Hundred Languages of Children: The Reggio Emilia Approach-Advanced Reflections*. **Second Edition**. **Carolyn Edwards, Lella Gandini and George Forman, eds. Greenwich: Ablex Publishing. pp. 99-112.**

Spaggiari examines the governance model of Reggio Emilia that is based on the principle of 'social' or community participation (99). He traces the official idea of community participation back to the 1970s, explaining that "[i] has been viewed as a means of fostering innovation, protecting educational institutions from excessive bureaucracy, and stimulating cooperation between educators and parents (99-100). Participation in preprimary services has an even longer history dating back to the 1940s, as a result of "the initiative and participation of women's groups, ex-resistance fighters (ex-partisans), unions, and cooperatives – all directly involved in promoting educational and welfare services" (Spaggiari 100).

How Does Reggio Emilia Match With the Starting Principles?

1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Moss stresses the importance of recognizing the democratic responsibilities at national, regional and local level, and of a "*national framework* of entitlements and standards that expresses democratically agreed national values, expectations and objectives; and to identify and ensure the material conditions needed to make these entitlements and standards a reality, enabling other levels to play an active role in implementation" (Moss 7). National frameworks are necessary to spell out entitlement to services, secure funding, define services as a public good, set a broad curriculum framework that allows for flexibility, foster integrated policy, ensure a well educated and paid workforce, and establish comprehensive poverty and inequality reduction policies. This national framework can allow for the decentralization of management to combine equitable access with local participation (Moss 8). This may be even more important in federal systems. In Germany, there are disparities across Lander (subnational governments) in terms of access, fees and quality (Moss10-11). Moss also sees a role for national frameworks to encourage democratic participation: "national-level decision making can support democracy at other levels, through policy documents that both state unequivocally that democracy is a nationally agreed value and create 'democratic space' at more local levels for democratic interpretation of national policy" (10).

However, in the case of Italy, Moss argues that it is unique, in that it "may be made possible be a weak national government and local governments with strong democratic traditions, willing and able to use space made available to them by default not intention" (11). The problem, is that in Italy there are large regional variations in access and quality. Soler and Miller (2007) also note that there has been criticism for the lack of wider accountability for curriculum in Reggio Emilia.

2. Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.

In the Reggio system, there is no national framework. It is local, and community-based, with involvement of children, parents, teachers, administrators and politicians. Funding is provided by the municipality of Reggio Emilia, where 12% of the budget is for ECD. Reggio has highly developed structures for democratic, community control. Most were started by progressive municipal governments, and some by the Catholic community (Spaggiari 100). The services emerged from an historical context in which "the schools were the outcome of an alliance between the community and advocates of a pioneering pedagogical approach. Families wanted not just a social service but an educational service'" (Martin 4).

According to Martin, "Reggio services have been built on the basis of continually developing relationships between the local state and citizens, between management and employees, between professionals and other workers, between the staff, children and parents, and, more recently, between the public, private and voluntary sectors … The services are excellent because the participatory processes through which they have been developed over three decades find expression too in every moment of their delivery" (Martin 2). Steps have been taken to ensure broad participation through a variety of outlets: "Parents, other community representatives (typically parents whose children have earlier been at the centres) and pedagogical specialists employed by the municipality all contribute to governance. The service's staff are also management committee members *ex officio*, and their contractual hours of work allow for attendance at committee meetings. In practice, they delegate three or four of their number to go to each meeting, so that, while all staff have regular opportunities to attend, they do not dominate the committees. In addition, the whole staff, including auxiliary workers, take part in *ad hoc* meetings (at which a visiting pedagogical specialist is also present) to plan projects in each age group sector and for the institution as a whole" (Martin 5).

In this model, they have attempted to strike a balance between parent empowerment and overload. As Martin indicates, "these children and their parents are not 'consumers' of a service, much less its 'customers'. They have much more power over the deployment of state resources than either of those terms imply. They are participants in the daily recreation of the services they use, but their voluntary efforts complement those of paid staff rather than substituting for them as so many 'user involvement' projects do. The state here is indeed a facilitator, but not in the sense of abandoning its own responsibilities, but rather of acquitting them more effectively" (6). For Spaggiari, one of the advantages of the participatory approach is that it encourages collective, rather than private, individual thinking (103). In this way, the model stresses *values* rather than more technical aspects of 'governance.'

Moss also provides some interesting insight into the 'participation in what?' question. He envisions a role for communities in making decisions about "the purposes, the practices and the environment of the nursery," pedagogy, budget, staffing, evaluation, and in "contesting dominant discourses" about childhood, role of education, of women (14-15). He suggests that this can be done through co-ops run by parents, staff and communities, or elected boards (14-15).

The specific infrastructure for community participation includes school Advisory Councils and "school-city" committees that bring community members together (Spaggiari 99-100).

The role of the Advisory Committee in particular has evolved over time from a largely administrative focus (on enrolment, fees, new centres), to facilitator of participation (Spaggiari 103). The Advisory Council is elected every 2 years for each center. Since there are 32 schools in the town of Reggio Emilia, there are 32 Advisory Councils. In addition, 2-3 members from each council sit on the Municipal Board of Infant-Toddler and Preprimary Education with the Administrative Director of Early Education, pedagogical experts, the elected city official responsible for education, and the mayor. In a school with 75 students, the Council would have about 19 parents, 13 educators, and 7 townspeople, and the education staff includes teachers, cooks and aides, which Spaggiari says, allows for the "integration of different wisdoms" (Spaggiari 103-104). There are a range of other ways to participate as well at the classroom level, in small group meetings, parent-teacher conferences, theme-based meetings, contact with experts, labs, holidays and celebrations and other activities (Spaggiari 105-6).

Participation in Advisory Council elections is high -- 75% of parents vote in them, and a high proportion of the community participate as members of the Council. Spaggiari provides that "in 1993-1996, out of 2, 550 families using our municipal early childhood services, 554 parents were elected. That means that one in five families participated in the running of the infant-toddler centres and preprimary schools" (103). A remaining question is what type of parents participate? Are they primarily moms? Are they from diverse communities? Different socio-economic backgrounds?

In terms of integration of care and learning, the system is heavily education-focused. The division between learning and care is reflected in the community-based structures, where there are two different organizations – one for infant-toddler and pre-primary centres that is run by the city and community-based management, called gestione sociale – and the other committees are for public schools (Spaggiari 100). The local school is really the focal point of community activity (Spaggiar108). Because Reggio Emilia's origins are so strongly rooted in curriculum and pedagogical issues, the dominant lens is on learning, with much less emphasis on care.

Both Martin and Moss are advocates of the Reggio system, and are critical of private provision, but there is a significant private role. Martin notes that municipal centres cover only 1/3 of preschool children, so that in addition to municipal preschools, there are co-op and family run centers, a lower quality nursery run by the national Ministry of Education and private, Catholic centers, which together, cover nearly all children (Martin 5). There does seem to be several tiers of service with variation in quality and participation. It is unclear the extent to which for-profits are part of the system.

3. The system of early care and learning advances equity and social inclusion for all.

The above questions of unequal access do raise concerns about social inclusion. Some elements of this model need more research (in addition to the for-profit issue just noted). For instance, Catholic preschool organizations receive public funding if they meet certain requirements (Martin 7). It is unknown if this applies to other organizations. Moss also points out that "democracy is risky" – it may actually work to increase inequality (23). This is seen later in the social capital discussions in part C. Furthermore, when Spaggiari says that "the process of community-based management manifests itself in different ways in each

school in terms of style and procedures, at times in extremely different ways" (107), this can signal local flexibility, but also disparities across neighbourhoods.

However, these articles seem to suggest that the community infrastructure allows for greater social inclusion. Martin argues that "much more than lip service is paid to women's rights. The presence of strong women leaders among community organisations, political parties and local public administration, and the nature of their collaboration, provide one of many important lessons Reggio holds for today's public service reformers" (Martin 4). Spaggiari also believes that the community management form is adaptable to newcomers, and provides space to include, support, and connect with isolated and diverse families (Spaggiari 102-103, 106-108).

4. Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.

Reggio Emila is rooted in a pedagogical approach rooted in "a localised, learner-centred approach" (Soler and Miller 2007). The governance of ELC stems from this curriculum philosophy (Spaggiari 102). The community management "organizations were created with the specific purpose of 'inventing' a school that would involve parents, teachers, citizens, and neighborhood groups not only in the running of the school but also in defending the rights of children" (Spaggiari 100). It is unique in the emphasis it places on the participation of children in the system.

There is some cause for concern, which may result from the heavy focus on education. Spaggiari mentions that in the past, parents participated in governance based on their ideals, but with the growth of a more self-interested political culture, their motives are increasingly based on desire for personal growth and children's development (106). There is potential that school-readiness and similar discourses are filtering in to the Reggio model.

5. Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.

These points overlap with the previous discussion about the role of private providers. As seen, the municipal centres cover only 1/3 of preschool children (Martin 5). This means that the majority of parents who need ECL services must find other options. There is increased demand for services, which is being addressed not by expanding the public system, but rather through new partnerships with non-profits (Martin 7).

6. Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.

Given the above, trade unions are worried that "there is a risk that the voluntary sector becomes a mask for privatization," with lower wages and quality (Martin 8).

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

Moss maintains that "[a]lthough community action originally drove the creation of Reggio's childcare services, what made the vision of their founders a sustainable reality was their

success in securing public finance and municipal policy commitment" (Moss 4). There does appear to be adequate funding for existing spaces (Martin 2), but that expansion is not occurring in the municipal centers.

New Jersey, USA

Mead, Sara. (2009). Education Reform Starts Early Lessons from New Jersey's PreK-3rd Reform Efforts. New America Foundation. Access at: http://www.newamerica.net/sites/newamerica.net/files/policydocs/Education%20Reform%20Starts%20Early_0.pdf

Mead reviews the expansion of pre-K in New Jersey in response to the *Abbott vs. Burke* school finance case (1). In this case, a suit was launched by the Education Law Center, a civil rights advocacy group, on behalf of children in 31 of the state's highest-poverty school districts (Mead 3). As a result, "[t]oday, New Jersey has built a robust, diverse provider system to deliver high-quality universal pre-K in the *Abbott* districts, has taken steps to expand pre-K services for at risk children in the state's other 560 districts, and has done more than perhaps any other state in the country to link these early learning investments with early literacy reforms in the K-12 system, creating a seamless, high-quality PreK-3rd early learning experience for the state's most disadvantaged youngsters" (Mead 1).

"New Jersey." (2008). *The State of Preschool 2008 – State Preschool Yearbook*. National Institute for Early Education Research. pp. 94-. Access at: http://nieer.org/yearbook/pdf/NJ.pdf

This article explains the main features of the New Jersey preschool system. The system is a combination of three programs: the Abbott pre-schools, the Early Childhood Program Aid (ECPA) and the Early Launch to Learning Initiative (ELLI). The Abbott program (which covers 31 school districts, the ECPA which covers 101 school districts, and the ELLI to which non-Abbott school districts may apply for funds. There are significant variations in these in terms of funding levels, service hours, and quality across these programs (94-98).

Schumacher, Rachel, Danielle Ewen, Katherine Hart, and Joan Lombardi. (2005). All Together Now: State Experiences in Using Community Based Child Care to Provide Prekindergarten. Welfare Reform & Beyond Working Paper. The Brookings Institution. Access at: http://www.brookings.edu/es/research/projects/wrb/200502lombardi.pdf

The authors compare state prekindergarten policies across the US. They provide that "[s]ix states—Georgia, New Jersey, New York, Oklahoma, West Virginia, and Wisconsin—have policies in place or a goal to move toward universal access to pre-kindergarten, and other state leaders are contemplating universal access as well" (Schumacher et al. 1). They identify two different models. In the first model, pre-k is offered exclusively in public schools. In the second, pre-k is offered in a combination of schools and community-based child care settings (or a mixed delivery model). States or schools subcontract with community providers, which can include private, for-profit operators. The majority of states use a mixed delivery model, including New Jersey (Schumacher et al. 2).

Whitebook, Marcy, Sharon Ryan, Fran Kipnis and Laura Sakai. (2008). "Partnering for Preschool: A Study of Center Directors in New Jersey's Mixed-Delivery Abbott Program." Center for the Study of Child Care Employment. Access at: http://www.irle.berkeley.edu/cscce/pdf/partnering_preschool_report08.pdf

Whitebook et al. begin by pointing out that "publicly funded preschool programs vary along several dimensions: whom they serve: all children in the state, or target groups; who delivers the service: school districts, private child care centers, or a combination; the length of day and school year: year-round, or during the academic year only; and for two-and-a-half, three, or six hours per day" (Whitebook et al. 1). Through a survey of center Directors in the Abbott preschools, they seek to determine where the New Jersey system fits within this picture, and to identify some of the key challenges with implementing and administering a new ECL program, including rapid expansion, significant retraining requirements, and the coordination of diverse providers. They conclude that New Jersey school districts "were committed to establishing a preschool program that not only operated within school districts at school sites, but also built upon existing early care and education services in the community. Thus, the Abbott Program can provide lessons for those who are interested in developing a mixed delivery system, in which publicly funded preschool is offered in private child care centers as well as in public schools" (Whitebook et al. 2).

How Does New Jersey's Pre-K System Match With the Starting Principles?

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1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Mead takes a generally optimistic view of the New Jersey approach, believing that a mixed delivery system can work, if it is well governed: "States can build high-quality, universal pre-K systems that include both public schools and community-based preschool and child care providers—but it requires a great deal of systemic support for both school districts and providers (Mead 2). In New Jersey, there is a state regulatory code, standards, and implementation guidelines (Mead 8-9). It is one of the few states to meet quality benchmarks, provides programs free to families in Abbott districts, and has "comparable quality between private and school district classrooms" (Whitebook et al. 1, 8). There is some interest in the state in also expanding all-day K in partnership with community-based providers (Mead 33).

New Jersey's system is 'universal' only in certain disadvantaged districts. This does have some advantages. Mead argues that in the process of rolling out a system, "[t]argeting pre-K by geography, rather than family income, is an effective strategy for implementing quality programs on a smaller scale before moving toward universal pre-K (2). However, one of the results is that there are large disparities between 'Abbott districts' and others in terms of quality and access. Therefore, in districts that do not qualify for other sources of preschool funding, programs rely heavily on parent fees (Mead 15). These variations also speak to problems with federalism and coordination, and to the reality that if taken too far, local determination can lead to wide disparities.

2. **Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.**

New Jersey defines community delivery to include both non-profit and for-profit providers. The courts upheld this approach, but required that all providers meet standards (Mead 6). As Mead explains, the "system that New Jersey built to deliver *Abbott* pre-K programs employs what's known as a 'diverse delivery' model—meaning that pre-K services are delivered by a mix of providers, including public schools, community based child care centers, and Head Start programs. About two-thirds of *Abbott* pre-Kindergartners attend pre-K in 431 centers operated by community-based providers. The rest are served in public schools" (7). School districts contract with providers, ensure access, standards, and professional development (Mead 7). Thus, Mead maintains that "New Jersey's model taps the unique assets that community-based providers bring to the table while also establishing common standards across all pre-K providers in each district" (Mead 7).

One of the problems has to do with the motives underlying the community-based approach. Mead argues that it was "driven by both principle and necessity" (7). In the case of the former, "the choice to give districts a central role in implementing that system was unavoidable. New Jersey has a long history of and commitment to local control in public education" (Mead 7). However, it seems less rooted in an interest in democratic control, and much more about cost containment. Given a short deadline by the courts, the state had to expand quickly, and thought that contracting with community-based providers was most practical way to access space and was less expensive (Mead 5, 7, 31).

Actually, an important lesson from the community-based model is that "New Jersey's experience shows that it's not a money saver—providing high-quality pre-K through community-based providers costs just as much as doing so through the public schools" (Mead 31). This system required significant development of governance structures and support. According to Whitebook et al.:

> At the local level, the 31 public school district administrations were funded to develop early childhood administrative and technical assistance teams. These teams include a person designated as the district's Early Childhood Supervisor, overseeing all early childhood programs. This person's task includes developing the district's program improvement plan and accompanying budget, as well as overseeing professional development experiences for the district's preschool teachers. Each district also has a group of master teachers who report to the Early Childhood Supervisor, and provide technical assistance to teachers to implement curriculum and improve their teaching. In order to address special education and bilingual services as needed, each district has specially funded preschool special services and language education teams. If a district is contracting with Head Start and private child care centers to provide Abbott preschool services, then there is also at least one family worker, depending on the number of children being served, in one of the contracting child care centers (4).

There was a large learning curve, as school districts lacked experience contracting out to other providers, and "[m]any community-based providers, including smaller nonprofits and 'mom-and-pop' businesses, also needed assistance in managing their programs' finances and properly accounting for their use of public funds … "To address these challenges, the state required *Abbott* districts to hire fiscal specialists to monitor district contracts with

community-based providers, to work with providers on developing annual budgets and fiscal reporting, and to monitor expenditures to ensure that public dollars are being spent appropriately" (Mead 10-11).

Whitebook et al. also draw attention to the difficulty in bringing diverse partners together:

> The education of preschool children has typically been the province of multiple agencies, including Head Start, child care, public schools, and specialized programs for children with disabilities. With the implementation of the Abbott Program, there has been an effort to bring these various providers of preschool services together to create a coordinated system of early care and education. While such systems make sense, there are also challenges in building partnerships between programs that have traditionally been distinct in their funding sources and regulations (Whitebook et al. 24).

Managing these relationships was/is not easy, and there has been tension between community providers and the school district about the valuing of knowledge, with some wanting a more collaborative approach to governance (Whitebook et al. 39). One of Whitebook et al's interviews revealed that: "It's always [as if] the district knows everything, and the providers know nothing, but because the district has the money, providers don't want to complain or say anything" (38). They also provided that,

> For some Head Start directors, another signal of disrespect was a lack of recognition by district personnel of the differences in mission and staff qualifications between Head Start and child care centers: 'It has been a long battle to get districts to understand that Head Start is not child care. I have all the respect in the world for child care. [But] somewhere along the line, Head Start directors got into college, and programs began to hire quality Head Start directors at the top who were degreed. This didn't happen in child care. But the district lumps us all into one boat. We have a Head Start director who has a PhD. They made this woman sit through a paraprofessional training for months, or threaten not to refund her' (Whitebook et al. 39).

This also speaks to integration issues, which were a recurring theme in the Whitebook et al's interviews. The following are some examples:

> Almost one-half of directors spoke about challenges related to governance; these concerns were most often expressed by Head Start and multiservice organization directors, having to do with conflicting expectations and regulations between the Abbott Preschool Program and their other funding sources or organizational demands. For more than one-quarter of interviewed directors, governance-related issues included a perceived lack of respect from and/or collaboration with their school district (33).

> Generating strategies for developing a more unified early care and education system, with fewer discrepancies in quality standards and resources between preschool and wrap-around services, and allowing for coordinated budgeting and implementation (46).

> It's very hard to keep the same quality in the pre-hours and the after-hours, because we don't have the same kind of level of people in terms of credentials. The money's different. We are lucky our teachers agreed to work seven hours, because most

teachers only want to work six hours like they do in the public schools. So you have to compete with the public schools. It's very difficult (40).

Schumacher et al believe that the New Jersey model has the potential to "break the traditional barrier between early education and child care policies and address the needs of children in working families in a coordinated way," but that this depends on policy choices and implementation (3). There has been development of more of a hub model that combines preschool with comprehensive family support services, family workers, improved services for special needs and ESL children (Whitebook et al. 16-17). Yet according to Mead, pre-K and early elementary are still not well integrated (1), and Schumacher et al. also believe there is a need for better integration of community-based and pre-k programs (46). In general, the thrust seems to be primarily with integrating preschool with the existing school system, with little focus on the relationship with services for children 0-3. Also, there are indications of 'schoolification':

> Even with this ongoing professional development, however, other directors felt that their teaching staff required more preparation, particularly in the areas of child development and early education content, and working with children of particular populations … directors argued that, despite having a degree, their teachers still did not necessarily understand young children" (Whitebook et al. 21-22).

Child care appears to be afforded much less respect. For example, Mead asserts that the "use of state-approved curricula has helped community based child care providers improve their quality and understand what it means to view their work as education, rather than child care" (10).

Some have argued that a centralized governance system was needed: "I think that the whole publicly funded child care system—infant, toddler, preschool—needs to be under one department. You've got split departments who, while they say they get along, really don't talk to each other at all. And when they're creating policy, they don't ever look at how what they are doing impacts on what you're doing for the other portion of the day" (Whitebook et al. 37). The Department of Education has taken the lead on preschool, while the Department of Human services is responsible for child care, Head Start, wrap-around care and family workers (Whitebook et al. 3; "New Jersey" 94).

None of the articles sufficiently question the role of the private sector. In New Jersey, the majority of children are in private (for-profit and non-profit) centers: 56% in private, 37% in school district, and 7% in Head Start (Whitebook et al. 2-3). One of Whitebook et al's interviews outlined the 'business perspective' to explain participation in the Abbott program, emphasizing the funding attached to a steady contract, staffing improvements, and "economic survival," (or the ability to compete with the public sector) (Whitebook et al. 9). They assume that quality and access standards are sufficient.

3. The system of early care and learning advances equity and social inclusion for all.

The principle of equity and social inclusion underpins the Abbott system. The focus of the New Jersey Supreme Court mandate was on disadvantaged, highest poverty *school districts* rather than families (Mead 7; "New Jersey" 94; Whitebook et al. 1). The Abbott school districts are ethnically and racially diverse: 40.2% African American (16.7% overall in NJ);

44.6% Latino/a (18.4% overall in NJ). They also serve a slightly larger percentage of children with disabilities (13.4% in Abbott; 12.9% overall in NJ) (Mead 2). One of the attractive features of the mixed model was that community-based centers were already providing services to ethnic and linguistic minority communities that were deemed better than public services (Mead 7).

The Abbott schools have served to address inequality across districts, but there are still equity and social inclusion issues. While academic achievement has improved in the Abbott districts, it is still lower than New Jersey overall (Mead 2). Also, due to demographic shifts since the Abbott case, many disadvantaged children are left out of the preschool system (Mead 24). Another question of interest, given what we know about social capital and information inequalities, is whether there has been a movement of middle class families to the Abbott school districts in order to access services?

There are also debates about the impact of the Abbott system on staff diversity. One observation was that the new qualification levels (discussed below) have had a negative impact on African American staff, but have increased the bilingual staff. Another was that the diversity of staff has grown (Whitebook et al. 12).

4. Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.

The New Jersey system has focused strongly on quality improvements and monitoring child outcomes (Mead 1). For instance, the "*Preschool Standards* includes a section describing the features of supportive early learning environments. Each set of learning outcomes is accompanied by examples of developmentally appropriate teaching practices designed to help students reach those outcomes. Other sections address issues related to culture and diversity; inclusion of children with disabilities; and relationships between pre-K programs, community, and family" (Mead 9). School districts have a choice of five curricula, and the same curriculum is used across a school district (Mead 10). (it is unclear whether, or to what extent, community had a say in which curriculum was chosen).

There have clearly been improvements, but as Mead shows, New Jersey preschool "although still better than what exists in most of the country—falls short of providing all the state's disadvantaged youngsters the seamless, high-quality early learning experiences they really need to succeed" (Mead 1). Also, as mentioned above, there is evidence of schoolification. In an interview with Whitebook et al., someone noted that, "One of my concerns is that the teachers come in without a real knowledge of child care. It's not just about the instructional component; it's the whole child whose needs have to be met socially, as well as intellectually and health-wise" (22). Others thought that preschool teachers need better knowledge of curriculum, cultural, linguistic, social and class differences, and special needs (Whitebook et al. 22-23).

Mead offers another perspective, which is that: " Efforts to expand universal pre-K and PreK-3rd reforms are often viewed—sometimes with fear on the part of early childhood educators—as extending the public education system downward into children's earlier years. But PreK-3rd reform also creates opportunities to extend promising practices, strategies, and understandings about child development upward, from pre-K into the kindergarten and early elementary grades" (Mead 28).

5. Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.

Given that Abbott districts are only 31 of 501 New Jersey districts, most children and families still lack access to ECL (Mead 1, 2). In 2008, 16% of 3-year olds and 26% of 4-year olds were enrolled in preschool ("New Jersey" 94).

The predominant goal is literacy by grade 3 (Mead 16-22). Very little emphasis is given to supporting working parents, which Schumacher et al. identify as a major gap across the states (Schumacher et al 3). They also point out that most programs are not funded for full-day, and the number of hours are often up to local discretion (Schumacher et al 23). Only some states require measures to meet needs of working families (Schumacher et al 25).

The participation of parents in the programs also seems to be fairly limited. In one of Whitebook et al's interviews, it was said that, "Probably what teachers need the most is relational skills, because they can relate well with the children, but sometimes they can't relate as well to parents" (23).

6. Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.

One of the principal changes brought in with the Abbott schools was related to training and credentials in order to bring the community-based providers up to a comparable quality standard (Mead 5). The courts "mandated that all teachers in Abbott preschools—unless they already held the Nursery or Kindergarten through Grade 8 certificate, and had two years of experience working with preschool aged children—obtain at least a bachelor's degree and a Preschool-Grade 3 (P-3) certification by September 2004" (Whitebook et al. 2). Staff were given scholarships to upgrade their credentials to cover tuition, fees, books and other expenses (Whitebook et al. 4; Schumacher et al 32), which went directly to educational institutions so that staff did not have to pay up front (Mead 13). Along with improvements in wages, this helped with staff retention in community-based services (Mead 13; Whitebook et al. 12). Master Teachers are also available for mentoring, quality monitoring, and special needs expertise (Mead 14), and there was professional development for district personnel, such as directors and specialists, fiscal specialists, and Master Teachers (Mead 9).

Nonetheless, there were some difficulties meeting the credential requirements, including a lack of educational programs in the state to provide the upgrading (Mead 12). Some of this role was taken on by non-profit organizations, such as the Urban League (Whitebook et al. 13). Something that needs more analysis is that not only has the Abbott system provided new space for private preschool services, but a potential new market has also been created for private post-secondary educators.

There continues to be concerns about the quality of the P-3 program (the primary specialization in addition to the college degree) (Mead 14). Not all staff were able or willing to upgrade, and some who did not meet the new qualifications were shifted to infant/toddler groups (Whitebook et al. 10-11), further intensifying the division between care and learning.

There are requirements for comparable pay and benefits in public and community-based providers (Mead 13; Schumacher et al 33). However, there are still inequalities in benefits between public and community providers (Mead 13), leading to attrition of teachers from private to public schools due to better benefits, particularly pensions (Whitebook et al. 24). In addition, there are large disparities between Abbott and non-Abbott districts in terms of training, wages, and benefits, and growing resentment between Abbott and non-Abbott staff.

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

The Abbott experiment was made possible because the courts put financial responsibility on the state of New Jersey (Mead 8). There are high costs associated with the program. In 2007-2008, it cost more than $14, 000 per child, which has caused resentment from non-Abbott districts about high property taxes (Mead 24). In 2008, state funding was extended to more school districts, and the original plan was for full implementation of pre-K by 2013, using some of the federal stimulus money for pre-school expansion (Mead 25). But Progress has been threatened by the state financial crisis, and attention will now be on simply maintaining existing programs (Mead1, 25). Mead argues that if the state does not follow through by 2011 or 2012, another court case is likely (Mead 25).

Although some school districts are moving ahead with their own funds (Mead 25), other political factors also put the future of the program into question: " In November 2009, New Jersey voters elected Chris Christie, a former U.S. Attorney who had questioned the value of publicly funded pre-K, to be their governor," (29) and supports vouchers and charter schools (Mead 29). In 2007-2008, there was already a brief shift to vouchers based on income ("New Jersey" 94) that was subsequently reversed.

One of the persistent problems is the lack of capital cost funding (Whitebook et al. 34). Therefore, Mead recommends several additional financial supports including a revolving loan fund for community-based providers for facility enhancements, and community development finance assistance (Mead 3). Whitebook et al. also point out that providers "were often less concerned about inadequate funds than about not having decision-making power over how to spend the funds available to them—for example, being unable to move unspent dollars from one line item to another, or to define line items more broadly" (Whitebook et al. 34). Autonomy and accountability have sometimes been in conflict, as "ongoing concerns about whether public dollars are being well spent have given rise to strict accountability standards related to funding and program outcomes. To demonstrate that they are meeting expectations, directors and teachers must complete a variety of reports for the Abbott Preschool Program" (34-35).

This strong emphasis on accountability has expressed itself largely through the measurement of child outcomes using methods including quality self-assessment with input from teachers, parents, community and independent researcher evaluations (Mead 11-12; Whitebook et al. 4). Mead says that the "accountability system is certainly data-driven, encouraging teachers and district and state officials to use data to inform instructional decisions and drive program improvement" (Mead 12). Schumacher et al. see this program evaluation process to be essential in a mixed delivery system to ensure the maintenance of

high quality (41). The result has been that 'success' has been defined in a rather limited way, in terms of academic achievement. And the accountability measures have meant that multi-service providers must report to multiple bodies (including federal and state), money has been redirected to accounting functions, and providers are distracted by paperwork (Whitebook et al. 35-36).

New Zealand

Note: While it is not discussed in the articles below, in New Zealand, all three and four-year-olds are entitled to up to 20 hours of free early childhood education, regardless of their parents' income.

Crampton, Peter, Peter Davis, Roy Lay-Yee, Antony Raymont, Christopher B. Forrest, and Barbara Starfield. (2005). "Is Primary Care What It Claims to Be? Does Community-Governed Nonprofit Primary Care Improve Access to Services? Cross-Sectional Survey of Practice Characteristics." *International Journal of Health Services*. 35 no. 3. pp. 465–478.

Crampton et al. examine community governance in the context of primary care services. They define community governance as follows: "Community-governance seeks to ensure that an organization is in the control of the users, constituents, or clients of the organization" (466). They explain that, "New Zealand has considerable experience with private for-profit primary care and growing experience with private nonprofit primary care, but less experience with government-owned primary care. While not claiming a direct ownership stake, government has invested heavily in other facets of New Zealand's primary care infrastructure over the years. For example, over the past ten years most IPAs [Independent Practitioner Associations] and many nonprofit primary care organizations have benefited from substantial capital investment by government" (467). They argue that non-profit primary care services have several advantages over for-profits.

Larner, Wendy. "Post-Welfare State Governance: Towards a Code of Social and Family Responsibility." *Social Politics*. (Summer 2000). pp. 244-265.

Larner analyzes a public discussion document from New Zealand government called *Towards a Code of Social and Family Responsibility*. It was a sent to all households in February 1998. Like Pacini-Ketchabaw (below), Larner uses a governmentality framework to examine the shifting context of social policy reforms (Larner 245-246). She argues that, "[o]ne of the more notable features of the document is a qualitative shift in the locus of social governance – 'community' and 'family' replace 'society' as the basis for collective well-being" in areas like child care and health care (Larner 244, 252).

Mitchell, Linda. (2002). Differences Between Community Owned and Privately Owned Early Childhood Education and Care Centers: A Review of Evidence." New Zealand Council for Educational Research. Access at: http://www.nzcer.org.nz/pdfs/11743.pdf

Mitchell's study compares community-owned (nonprofit) and private ECEC centers in New Zealand from 1990-2002. During this period, there was no difference in funding levels for private and community care, so this provides a good opportunity for quality comparison

(Mitchell 1). (In 2002, new funding was introduced that was only available to community-owned [Mitchell 1]). She finds that community-owned centers have better higher wages, training, and parent involvement (1-4, 12).

How Does New Zealand's System Match With the Starting Principles?

1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Mitchell says that there is a clear link between quality services and non-profit delivery. In Canada, the US and New Zealand,

> Private centres tend to pay their staff less and offer poorer working conditions … Private centres tend to employ fewer staff holding an appropriate early childhood education qualification ... Community owned centres tend to have different spending priorities than private centres, being more likely to place priority on staff wages and conditions. Private centres place a higher priority on buildings and/or equipment. Parents tend to be less involved in private centres. Ratings of process quality tend to be higher in community owned centres than in private centers. There is evidence from a United States study that directors of community owned centres value quality of service above all other factors and make their decisions accordingly. Private centre owners are more likely to incorporate cost–benefit factors into their decision making practices (Mitchell 2-3).

Similarly, in their study of community-governed primary care, Crampton et al. found that nonprofits had lower fees, more trained staff (i.e. doctors, nurses, midwives, managers, administrators), employed more diverse staff (Maori and Pacific Island); more female GPs, and saw fewer patients (469-471).

2. **Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.**

Crampton et al. observed "important and significant differences between nonprofit and forprofit practices in terms of type and range of services, service planning, and quality-management policies … In terms of service planning, nonprofits were more likely to carry out community needs assessment, locality service planning, and intersectoral case management)," were more likely to have governance boards with patient reps, and "were more likely to have a population-orientation in their service planning (Crampton et al. 471-473, 476)." They say that nonprofits may also be more responsive than governments (Crampton et al. 468).

Mitchell's piece departs from Crampton et al. in that she makes no distinction between public and nonprofit, nor does the Ministry of Education which "defines community based services as … those established as Incorporated Societies, Charitable, Statutory, or Community trusts, or those owned by a community organisation (e.g., City Council). Community based services are prohibited from making financial gains that are distributed to their members" (Mitchell 3). They overlap though, in making the case against public funding of private providers, with Mitchell saying that "profit margins detract from spending on

factors (e.g., staffing, wages) that are linked in research evidence with good quality education; parent involvement in governance provides a mechanism for accountability to parents and offers opportunity for democratic parental participation in civil society; early childhood education is a public good, that needs to be provided and supported within the public domain" (Mitchell 4).

Yet from some perspectives, parental involvement can be more of a burden than a benefit. Mitchell notes that one of the arguments in support of for-profit provision is that "parents choose private centres because they do not have the time or do not want to be involved in governance" (4). While I think this is a some-what questionable claim, it does highlight some of the tension between participation and offloading of responsibility. This is seen in Larner's article.

Larner has a more critical view of the role of nonprofits, particularly in the current neoliberal context. She says that in the 1990s in New Zealand, there were attempts to address the 'social deficit' caused by restructuring by focusing on social capital and social responsibility (Larner 248-49). In these new forms of governance, "collective forms of social well-being are reconfigured through the concept of community, defined as 'neighbourhoods, towns, cities, hapu, iwi'" (Larner 254). She gives an example of David Green from the UK Institute of Economic Affairs, whose "argument was that the state was not the only supplier of welfare, and greater attention should be paid to other sources of welfare including families, voluntary organizations, and private insurance" (Larner 248). In this way, neoliberalism integrates progressive notions of agency and democracy in order to fundamentally restructure the provision of social welfare as it is relocated at the subnational level" (Larner 246-47, 254). (Fraser makes a similar point later on).

3. The system of early care and learning advances equity and social inclusion for all.

The principles of equity and social inclusion are reflected in New Zealand's curriculum. It is called "Te Whariki," meaning web or woven mat, and places a heavy emphasis on cultural diversity and biculturalism, an anti-racist approach, partnership with Maori community, consultation with practitioners, experts, the Maori community, service providers and organizations (Soler and Miller 2007).

In an argument similar to the one Mead makes in reference to New Jersey, Crampton et al. maintain that "[n]onprofits can respond to the needs of minority community interests—for example, minority ethnic groups—because their governance boards are more able to closely represent minority groups than are their for-profit business counterparts, whose governance boards are likely to reflect the interests of the proprietary owners or shareholders … The capacity of nonprofits to independently represent the interests of minorities assumes great importance in New Zealand, where the indigenous population, Maori, has striven to establish primary care services tailored to meet its needs and has used the nonprofit form as a vehicle for increasing self-determination" (Crampton et al. 468). They also found that nonprofits "employed considerably more Maori and Pacific Island staff" (Crampton et al. 473). Crampton et al. say that nonprofits meet the needs of diverse communities that are unmet by government and for-profits, and that this is often integral to their mission (Crampton et al. 474, 476).

4. **Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.**

These sources provide no information on this area.

5. **Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.**

These sources provide no information on this area.

6. **Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.**

Mitchell notes that "[c]ommunity owned centres were more likely to look for savings in areas that keep staffing and conditions intact," and that the highest level of training of staff was in "corporate/institutions" (polytechnics, schools, universities, city councils), followed by community owned and then for-profits (Mitchell 1, 8).

7. **Programs are adequately funded, stable and openly accountable to the communities they serve.**

In citing a 1991 report of the Parent Advisory Council, Mitchell recounts that the "committee reached the view that privately–owned early childhood institutions should be fully accountable to their parent communities and to the government for the way they spend the bulk grant and that the current system for that accountability was inadequate" (9).

South Korea

Lee, HyeKyung. (2005). "Civil Society and Welfare Reforms in Post-Crisis South Korea" Paper presented at the Canada-Korea Social Policy Symposium II. University of Toronto. Access at: http://www.utoronto.ca/ai/canada-korea/papers/Lee.CanadaCSOfa.doc

Lee explains that starting in 1999, the South Korean government pursued a policy of "Productive Welfare," which entailed an expansion of welfare programs and increased expenditure (2). This was a departure from the "development state" model which emphasized that economic growth was the best social policy and the family, the best social safety net" (Lee 3). After the financial crisis, and due to the mobilization of new civil society organizations, the government's approach to social welfare policy shifted significantly (Lee 3-4).

Peng, Ito. (2009). The Political and Social Economy of Care: Republic of Korea. Research Report 3. United Nations Research Institute for Social Development. Access at: http://www.unrisd.org/unrisd/website/document.nsf/d2a23ad2d50cb2a280256eb300385855/1ef2ae4f5e388259c125756100541f68/$FILE/RoKRR3.pdf

Peng applies the idea of the "'care diamond,' a conceptual framework used to understand how societal care is produced and provided by the state, market, family, and community, to the political and social economy of care in the Republic of Korea" (3). She argues that the care diamond has been reconfigured since the 1990s (Peng 3). According to Peng, "[i]f we follow Esping-Andersen's classification, Korean social policy regime, as in Japan and the Southern Mediterranean countries of Italy and Spain, can be categorized as 'familialistic;' – that is, a welfare regime 'that assigns a maximum of welfare obligations to the households' (3). South Korea has traditionally combined this family responsibility model with a strong male breadwinner model (Peng 3). As such, there was a lack of both public and market child care services (Peng 3). However, this social policy regime has been changing since the 1990s, as "the state's preference for assigning maximum welfare obligations to individual households is being modified by attempts to lessen women's care responsibilities through social care expansion. The process of shifting some of women's care burdens, such as child and elderly care, out of the family has resulted in the commodification of some of women's hitherto uncommodified care work at home" (4). Some of women's household caring responsibilities have been transferred to the market.

Rhee, Ock. (2007). "Childcare Policy in Korea: Current Status and Major Issues." *International Journal of Child Care and Education Policy*. 1. no. 1. pp. 59-72.

In 2004, the First Scheme of the National Childcare Support Policy was introduced in South Korea, followed by the Second Scheme of the National Childcare Support Policy in 2005. These policies were aimed at integrating ECE and child care, addressing the 'inequity' between the public and private systems, and financing the system (Rhee 60-62). One of the central factors in the expansion of child care policy was to address the low birth rate, and the main focus was on spaces, fees and quality (Rhee 60-62). This newly expanding system has sparked debates about targeting versus universality, government versus self regulation, and transfers to parents versus direct service funding (Rhee 70).

Sheridan, Sonja, Joanna Giota, You-Me Han, and Jeong-Yoon Kwon. (2009). "A Cross-Cultural Study of Preschool Quality in South Korea and Sweden: ECERS Evaluations." *Early Childhood Research Quarterly*. 24. pp. 142-156.

Sheridan et al. submit that even though 'quality' depends on cultural context, there are still common values and objectives that can allow for cross-cultural comparisons (142-43). Using the Early Childhood Environment Rating Scale (ECERS), they compare the quality of preschool in Sweden and South Korea (Sheridan et al. 143). This measure of quality is largely from a pedagogical standpoint (Sheridan et al. 143). Some of the key differences between the two systems are that "South Korea has a weak public ECE tradition and has an expanding private sector. Sweden, on the other hand, has a long tradition of ECE, well-established structural and educational reforms, as well as public funding for preschool. However, both countries have national curricula in order to guarantee the quality of ECE" (Sheridan et al. 144). They find that Swedish preschools are of higher quality on all scales (Sheridan et al. 151).

UNESCO International Bureau of Education (2006). Republic of Korea Early Childhood Care and Education (ECCE) Programmes. Country profile prepared for the Education

for All Global Monitoring Report 2007 Strong Foundations: Early Childhood Care and Education. Access at: http://unesdoc.unesco.org/images/0014/001472/147217e.pdf

UNESCO reviews the main characteristics of South Korean ECCE programmes. In South Korea, compulsory education begins at age 6 (UNESCO 1). "As of 2005, there are 28,040 childcare centers with 972,391 children at ages 0 to 5 and over 95% of the centers including home-based play rooms (41.9%) are private, serving 89.1% of the children at the age range … Although public and free early childhood education and care is now one of the top priorities of national policies, private sectors including churches and NGOs initiated the programs and have supplied the societal and market demand for early childhood education and care for many years. Private kindergartens, childcare centers, home-based playrooms, *hakwons* (profit-pursuing institutions for teaching children specialized subjects such as English, piano, fine arts, martial arts, and so on) are now the major private programs in Korea. Thus, one of the issues in ECCE in Korea is how to include these various private ECCE programs in an institutionalized public education system" (UNESCO 5-6).

How Does South Korea's System Match With the Starting Principles?

1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Since the 1982 Early Childhood Education Promotion Act, there has been rapid growth of public and private kindergartens, which intensified after the 1991 Child Care Act (Peng 15). In one year, the "total number of childcare centres nearly doubled, from 1,919 (360 public; 39 private; and 1,520 home and workplace childcare) in 1990 to 3,690 (503 public; 1,237 private; 1,950 home and workplace childcare) in 1991. Similarly, the number of children enrolled in childcare centres jumped from 48,000 (25,000 public; 1,500 private; 21,500 home and workplace daycares) in 1990, to 89,441 (37,017 public; 36,099 private; and 16,325 home and workplace daycares) in 1991. After this, the number of childcare centres and the number of children enrolled in these centres increased rapidly. By 2007, the total number of children enrolled in childcare centres had reached 1,062,415, over 22-fold increase since 1990; while the total number of childcare centres increased to 29,823, an increase of over 15-fold, during the same period" (Peng 15). (Some of this increase may be partly due to registration of already-existing private providers [Peng 15]). There is a guarantee of at least one free year of pre-school education for 5 year olds (Peng 15). This is in addition to the expansion of maternity leave in 2001 to provide to 90 days (60 days by employer and 30 by the government) (Lee 15) at 100% wage replacement. Parental leave was extended from 1 year to 3 years for public servants (Peng 18).

Both public and private providers are regulated by the Child Care Act, providers must undergo inspections and report to the Ministry, fees are regulated, standardized, fees and base on parental income, and parents may choose public or private services. The government reimburses child care centres on per capital basis (Peng 16).

The South Korean government sought a more coordinated national approach to child care services. In 1992, a national kindergarten curriculum was adopted (Peng 15). In 2004, there was the "establishment of various interministerial and national-local ECCE related committees, such as Childcare Policy Mediation Commissions (Office of the Prime Minister), Central Childcare Policy Commission (MOGEF), and Regional Childcare Policy Commission

(Seoul, metropolitan cities, Do, city/gun/gu) to develop more effective ECCE programmes. The MOGEF also took over the coordination of the implementation of national childcare policy. Both the national and regional governments assumed more responsibilities for ECCE, including up-to-date childcare related funding and increased certification requirements for ECE teachers, childcare staff, and facilities" (Peng 17). In the inter-ministerial dialogue, the "group agreed on the expansion of childcare, [however] opinions on how to achieve it differed widely. Ministry of Gender Equality and Family supported a proposal to introduce universal public childcare made by Korean Women's Development Institute (KWDI), the policy research think-tank affiliated to the Ministry of Gender Equality and Family, and Ministry of Health and Welfare," and this was the preferred options for most NGOs and mothers. But the economically-oriented ministries wanted to de-regulate and privatize child care, and increase subsidies and tax incentives (Peng 31-32). Because 95% of child care providers were private, universal public childcare was rejected in favor of private sector dominance (Peng 32-33).

The resulting system is one "where most of the childcare facilities are under private management, the Government encourages childcare facilities to voluntarily participate in the accreditation process and grants an accreditation certificate. An individual childcare center applies for quality accreditation on a voluntary basis, and conducts a self-evaluation of five to seven categories, consisting of 60 to 80 items selected by the Government, followed by the reporting of the results. Trained experts then visit the center and conduct an assessment. Through expert consultation on the self-evaluation and the on-the-spot assessment, a final decision is made whether the center will be accredited or not. Since its initiation as a trial operation in 2005, 3,300 childcare facilities have been accredited, as of August 2007. Taking into account the total number of 29,000 facilities throughout Korea, the number of accredited childcare facilities is relatively small, but it is expected that this figure will increase" (Rhee 68). Sheridan et al. say that "[b]y 2005, almost 55% of all public and private childcare centers had participated in the accreditation process, with about 27% receiving state accreditation" (Sheridan et al. 144). "In 2007, 6% of the South Korean childcare settings were public, 46% were private, 6% were employer-provided childcare or parent co-operatives, with the remaining 42% of childcare settings being daycare provided by the family" (Sheridan et al. 144).

In South Korea there are differences in quality between public and private child care. As Peng provides, "[m]any parents prefer to send their children to public childcare centres, not because of the cost differential, but because they believe these centres provide better quality childcare" (16). Likewise, according to Sheridan et al., "Ju and Lee (2001) found that, in Korea, public childcare had a higher quality compared to both private childcare and employer provided childcare. Won (2000), in another Korean study, has also reported that the structural quality of municipal childcare centers was higher than that of private and the family daycare in Ulsan city (Sheridan et al.151). Rhee makes a similar point (64).

Sheridan et al. make an interesting suggestion that the private, service-oriented nature of South Korean preschools has meant that there is close collaboration between parents, teachers, and administrators (153). This contrasts with observations in other jurisdictions that associate private services with less parent involvement (see Australia, New Zealand).

2. Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.

Notions of community control have a different history in South Korea, where Confucian tradition makes no distinction between state and society, and the state's role has been to guide moral values (Lee 4). The authoritarian tradition affected the development of civil society organizations, but they began to grow in the 1980s (Lee 4-5). The participation of civil society took on a new emphasis (Peng 26-27).

In 2003, with the rethinking of 'productive welfare policy,' some wanted a more market-oriented approach, and others were more focused on social capital and social inclusion. In the end, "[d]espite their apparently widely divergent policy ideas, the ministries' views converged on a common point: the need for increased local and community role in social development" (Peng 25- 26). This speaks to the blurred line between neoliberal and progressive strategies that Fraser talks about, and Peng also notes that while "some see civil society engagement in social welfare as an important mechanism for promoting civic participation and social integration, many economic bureaucrats see it in the light of economic productivity and efficiency" (27).

"Along with the policy focus on social capital development, the decentralization of social welfare and services from the national to local/community level has enhanced the role of local governments and the community in provision of social welfare and care. Since 2005, the Roh Moohyun government has been progressively downloading central government responsibilities onto local and regional governments through legislative reforms and fiscal transfers. A good example of this is the ECCE policy. As the central government increases its financial support to local governments, 40 local governments are expected to provide more ECCE spaces and centres for children. At the same time, the local government is mandated to expand their ECCE programmes and to improve childcare and early childhood education system by implementing new accreditation and evaluation systems for childcare centres and kindergartens. Community and businesses are encouraged to participate in the emergent social service market, including childcare; local entrepreneurs, parents, and businesses are encouraged to provide childcare services through legal mandates, financial incentives, and support for creation of social enterprises" (Peng 27-28). Therefore, "[i]n the context of the new care diamond, the community sector is charged with a much greater role in organizing and providing social welfare and care. This change has come about as a result of the combination of increased state expectation of community participation in social development, and the progressive decentralization of social welfare and social care programmes since 2003" (Peng 25). There has been a growth of home day cares and parent co-ops (Peng 28), and private providers are not always for-profit, it also includes non-profit religious and other NGOs (Peng 16).

Even so, the majority of private services are for-profit (Sheridan et al. 144). There is evidence that this is significant to the expansion and quality of services. Peng says that there was a plan to have 100% pre-school enrolment for 5 year olds by 2005, but "the government was not able to achieve the target figure due to a combination of fiscal constraints and resistance from small-scale care service providers, *hakwons*, and the Ministry of Health and Welfare" (Peng 17). Rhee notes that in response to stronger regulations, "the operators of childcare facilities have criticized the Government for excessive intervention" (Rhee 69).

Workplace child care has also been part of the expansion strategy. In 2006, legislation "imposed a new requirement on companies with more than 300 female employees or more than 500 employees, regardless of the gender composition of the employees, to provide childcare facilities in the workplace, thus raising the number of companies mandated to provide workplace childcare from 278 in 2005 to 824 in 2006. In exchange for providing workplace childcare, employers are given financial support to set up childcare spaces within workplace" (Peng 28).

The system does not seem to be integrating care and learning very well thus far. Sheridan et al. explain that "South Korea has a dual system of ECE where childcare is divided into kindergarten, for children aged between three and five, and childcare centers for those from infancy up to the age of five. Nationally, kindergartens and childcare centers are regulated by different legislation and have different overall pedagogical objectives. Kindergartens are regulated by the Early Childhood Education Act, and are answerable, ultimately, to the Ministry of Education, Science and Technology. Childcare centers are organized in accordance with the Child Care Act and come under the auspices of the Ministry for Health, Welfare and Family Affairs (2007)." This split has served to defined education as a broader service, and child care as a part of welfare system initially targeted for young children of disadvantaged groups" (UNESCO 6). In addition, "[o]ther ministries such as of Labor, of Government Administration and Home Affairs, and of Agriculture and Forestry are directly and indirectly involved in ECCE in Korea" (UNESCO 6).

The public-private delivery approach also seems to reinforce a split between urban and rural communities. UNESCO indicates that the "Ministry of Education and Human Resources Development (formerly MOE) has concentrated on building public kindergartens in rural areas while encouraging the private sector to establish kindergartens in big cities where a large number of kindergarten-aged children are concentrated. Accordingly kindergarten education largely depends on private resources" (UNESCO 6).

This lack of integration in the system does appear to be changing. Peng says that the "main objective of ECE is education and school preparation, while ECC's is care, though since the 1990s, the two objectives have began to merge as many ECE and ECC institutions are providing both education and care. A current policy issue in Korea is the institutionalization of these two separate and often private systems into a public education system" (Peng 15). UNESCO also suggests that "[a]lthough each of the two ECCE systems has followed its own path and development, the goals of the two systems are now merging into one, that is, both education and care" (UNESCO 6).

Peng makes an interesting comment that merits more thinking. Many of the sources reviewed advocate for one ministry to take on responsibility for ECL. But Peng mentions that the "Ministry of Health and Welfare lost some of its earlier vested interests in childcare when much of the family and childcare portfolio was shifted to the Ministry of Gender Equality and Family in 2005" (Peng 33), which affected the institutional support for ECL.

3. The system of early care and learning advances equity and social inclusion for all.

Several issues related to equity and social inclusion should be mentioned. One of the legacies of the tradition of familialism is that more women are entering the paid labour force, but continue to be responsible for the bulk of unpaid care work (Peng 3, 12-13). Care work

also exists within a context of high rates of multi-generational homes, where Peng says, families "exchange child and elderly care services" (5).

Some developments have been welcomed by the women's movement, including the maternity leave program which "is regarded as one of the most ambitious family-friendly, women–friendly, human capital investment policy" (Lee 16). Peng adds that "[o]ther programmes such as 'no over-time on the 6th of every month' campaign and 'daddy quota' scheme in parental leave have been also introduced since 2006 to ensure a more equitable sharing of care responsibility between men and women" (19).

In their comparison of preschool in Sweden and South Korea, Sheridan et al. consider the social inclusion of multicultural communities, saying that "most of the preschools in both countries do not seem to educate children to become aware of multicultural issues and to develop intercultural competence. Rather, the primary emphasis is on introducing the country's own culture and traditions. This issue has in South Korea been explored by Kim (2007) among others. The Korean government has, however, highlighted this issue by implementing various multicultural education projects and encouraging the provision of multicultural education in pre/school settings" (Sheridan et al. 153).

4. **Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.**

One of the focal points of ELC expansion in South Korea was to introduce national curriculum standards (Rhee 69). In their Sweden-South Korea comparison, Sheridan et al. contrast Sweden's more collaborative pedagogical approach with South Korea's more rigid, academic focus (152).

Improvement of safety was another goal, but Rhee notes that this is still an area for concern (68).

5. **Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.**

The expansion of child care in South Korea was seen as the "growth engine" for economic development" (Peng 11). Along with the programs already mentioned, "[t[o meet the growing childcare needs, 2.6 billion Won were allotted in 2007 to provide low-cost babysitting services and nighttime babysitting services for families with children between the ages of 3 and 12 months" (Peng 18).

UNESCO says that the majority of kindergarten is full-day or extended day (UNESCO 8), but Sheridan et al. provide that kindergarten is mainly half-day, while child care is full day" (Sheridan et al. 145). The "enrolment rate for 5-year-old children is about 50% for kindergarten and about 35% for childcare centers" (Sheridan et al. 145).

6. **Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.**

As noted, South Korea has a long history of a male breadwinner model, but the "market's role in supplying and maintaining steady and secure employment for male breadwinners has weakened as a result of labour market reforms; as a result, it has repositioned itself as a supplier of social and care services, and a source of new, albeit precarious, service sector employment. Since a significant portion of this new service sector industry relates to care – for children and elderly – the market will likely take on an increasing role within the care diamond" (Peng 14). There is reason for concern that women are increasingly pushed into a precarious labour market, and that some of that work will be found in the child care sector (Peng 22-24). There has been some focus on improving staff wages and working conditions, but Rhee argues that more is needed (68-69).

Child care workers were unsure about their preferred strategy for system expansion. Peng recalls that the "Korean Childcare Teachers' Association (KCTA), the majority of whose membership worked in private sector childcare centres, was divided on the issue. In their view, the universal public childcare policy presented both opportunities and constraints. Making childcare centres public would imply formalization of their employment status as public service workers, which came with employment security, union representation, and higher wage and better working conditions; but it would most likely entail stricter certification requirements. In the end the KCTA accepted the position of private provision of childcare" (Peng 32).

Public childcare centers "are considered pure public institutions. Childcare workers in public childcare centres are thus considered public servants" (Peng 16). Kindergarten teachers are usually college graduates, but public kindergarten teachers have higher training (UNESCO 6).

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

According to Peng, "[n]ational government budgets for ECE and childcare have increased markedly, with ECE budgets more than doubling, from 356 billion Won in 2002 to 886 billion Won in 2006, and childcare nearly quintupling, from 435 billion to 2,038 billion, in 2002 and 2006, respectively (see Table 8 for national budget for ECCE programmes between 2005 and 2006). The total national budget for ECCE programmes thus increased from 0.12 percent to 0.349 percent of GDP" (Peng 17). In 2007, parent's share of costs had declined to 46% of costs (Peng 17), as fees support for families has increased (Rhee 66). Tax deductions were also introduced (Peng 8).

Still, there is low expenditure as a percentage of GDP. Total ECEC spending in 2006 was 0.349% of GDP (Rhee 66). And the public is not necessarily convinced that even this is being used effectively: "Despite the high childcare expenses incurred by the general public, parents are not fully satisfied with the quality of service they receive. The inequity between the private and public sectors remains as a poignant focus of social conflict. Some are skeptical as to the effects of the four-fold increase in the childcare support budget over the past four years. This sentiment stems from a lack of trust in transparency in supporting and operating childcare centers and kindergartens" (Rhee 69).

Sweden

Åsén, Gunnar and Lena M Olsson. (2008). "Ten Years after the Pre-school Reform: A National Evaluation of the Swedish Pre-school." A Summary of Report 318, 2008. Swedish National Agency for Education.

This report is based on a ten year review of Sweden's preschool reform. It focuses mainly on the national curriculum and pedagogical issues.

Bergqvist, Christina and Anita Nyberg. (2002). "Welfare State Restructuring and Child Care in Sweden." In *Child Care Policy at the Crossroads: Gender and Welfare State Restructuring*. Sonjya Michel and Rianne Mahon, eds. New York: Routledge.

Bergvist and Nyberg trace the development of Sweden's public child care system, which was designed with the goals of gender equality, full employment, and equal opportunities in mind (287). They identify five characteristics of Swedish child care: "(1) generous public funding; (2) high quality in social services; (3) limited scope for the private sector in social services; (4) universalism; and (5) egalitarianism" (Bergvist and Nyberg 287). Child care in Sweden is typical of social democratic regimes, where there are universal benefits, high staff compensation and quality, and a commitment to equality and full employment (Bergvist and Nyberg 288). They argue that while child care has been affected by restructuring in the 1990s, by the late 1990s, the system has become more universal.

Mahon, Rianne. (2005). "Rescaling Social Reproduction: Childcare in Toronto/Canada and Stockholm/Sweden." *International Journal of Urban and Regional Research*. 29 no. 2. pp. 341-357.

Mahon notes that there has been pressure around the world to restructure welfare states through rescaling and downloading, but that changes are not only due to neoliberalism. States are struggling to address a crisis in social reproduction, as the male breadwinner model is disappearing, and to provide more local autonomy in governance. In this context, there are different national responses to challenges across liberal and social democratic regimes. However, the cases of child care in Toronto and Stockholm demonstrate that there are also "alternative logics" or spaces for subnational actors to challenge regimes from within and from below' in either progressive or conservative ways (Mahon 341, 345-46). In the end though, neither city could sustain an alternative path in the face of national and provincial forces (Mahon 349).

Nyberg, Anita. (2004). "Parental Leave, Public Childcare and the Dual Earner/Dual Carer Model in Sweden." Swedish National Institute for Working Life, Discussion Paper. Access at:
http://pdf.mutual-learning-employment.net/pdf/sweden04/disspapSWE04.pdf

Nyberg traces the beginnings of Sweden's "dual-earner/dual-carer model" to the 1960s-1970s. It was during this time that accessible, high quality, affordable public child care was expanding (1-2). She examines changes that weakened the child care system since the 1980s, and the more recent attempts to strengthen universality.

Sweden. (2000). "Early Childhood Education and Care Policy in Sweden." Ministry of Education and Science. Access at: http://www.oecd.org/dataoecd/31/17/31551259.pdf

This report looks at how child care has unfolded in Sweden since the 1970s, with a focus on funding, fees, access, quality, curriculum, and governance. It outlines the respective roles of the national and municipal governments, and the balance of public and private provision.

Sweden. (2006). "Descriptive Data on Pre-school Activities, School-age Childcare, Schools and Adult Education in Sweden 2006." Swedish National Agency for Education. Access at: http://www.skolverket.se/sb/d/193/url/006800740074007000747003a002f002f00770077007700 34002e0073006b006f006c007600650072006b00650074002e00730065003a00380030000 380030002f0077007400700075006200 2f00770073002f0073006b006f006c0062006f006b00 2f0077007000700075006200650078007400 2f00740072007200079006300060073003007300 61006b002f0052 00650063006f0072006b003d0031003700300035/target/Record%3Fk%3D1705

This report provides data on Sweden's education system, including pre-school. It addresses issues of enrolment, fees, access, staffing, and quality, and gives a profile of private child care in the country.

Sweden. (2008a). "Funding of the Swedish School System." Fact Sheet. Ministry of Education and Research. Access at: http://www.sweden.gov.se/content/1/c6/10/15/07/0d562525.pdf

This source provides a brief explanation of how preschool is funded in Sweden and describes the national and municipal responsibilities for child care.

How Does Sweden's System Match With the Starting Principles?

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1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Even until the 1980s, families relied heavily on the informal sector for child care in Sweden. (Bergvist and Nyberg 288). But the Swedish child care system started developing in the 1970s and has undergone rapid expansion since the 1990s (Sweden 2006 18). The move away from targeting toward universality was essential to building the system. Bergvist and Nyberg show that "[i]n the first half of the twentieth century, full-time child care was clearly linked to poverty relief, and child care centers did not enjoy a good reputation as long as their main role was to mind the children while their mothers, of necessity, worked. When their role was expanded to stimulate and educate the children too, middle-class parents became interested" (299).

Child care in Sweden is publicly funded, provided through the public school system, and is organized by the municipalities (Sweden 2000 1; Sweden 2008 1). "The municipalities are responsible for offering children between the ages of one and five years preschool activities, and children up to the age of 12 years school-age child care" (Sweden 2008 3). The national government sets standards and provides grants (Mahon 344). The national state is also responsible for education for indigenous peoples (Sami) (Sweden 2008 1).

In the 1970s and 1980s, the national and municipal government each contributed about 45% of the costs (Sweden 2000 6). This balance has shifted over time. In 2008, funding came from 68% tax revenue; 11% general grants; 5% special grants; 7% fees and charges; and 9% other revenue (Sweden 2008 1). Municipalities are much more powerful in Sweden

than in Canada. The main source of municipal revenue is from local taxes and local governments set their own tax rates (Sweden 2000 4). The national government gives general grants to equalize across the municipalities and county councils as well as targeted grants for special initiatives such as teacher training (Sweden 2008 1-2). The Ministry of Education and Science notes that Sweden's system has resulted less from legislation than from these special targeted grants (Sweden 2008 1; Sweden 2000 2, 4). In her comparison of child care in Toronto and Stockholm, Mahon also indicates that,

> [l]ike Toronto, they aimed to establish the kind of childcare system — universal, high quality, public and centre-based – that has come to be identified as social democratic. Unlike Toronto, the local vision coincided with national plans and from the 1960s through the 1980s, the Swedish government offered the municipalities increasing financial incentives to back this vision (351).

There is national legislation governing child care (or preschool as it is now called in Sweden). In 1975, the National Preschool Act required municipalities to expand child care, requiring part-time services for 6 year olds (Bergvist and Nyberg 288). This took negotiation with the municipalities. As Mahon explains,

> [i]t was not until the 1970s that the commitment to early child education and care was enshrined in national legislation. Even then, however, municipal 'autonomy' precluded unilateral action. It took the negotiation of an agreement between the national government and the Swedish Association of Municipalities, sweetened by a substantial increase in national funds for operating and capital costs, to really launch the development of the childcare system lauded today by the OECD and others (345).

In 1985, there was further legislation that "all children aged between 18 months and school age with working or studying parents or children with special needs were to be entitled to a place in public childcare by 1991" (Nyberg 3).

However, legislation does not guarantee access to child care:

> Today almost all children aged one to twelve, have the right to public childcare. This, however, does not necessarily mean that the supply is large enough to meet the demand. Legislation has to be accompanied by resources to make expansion possible. In fact, the supply of childcare has hardly ever matched the demand, so not all employed or studying parents, who were entitled to public childcare, had access to the childcare they needed. Waiting lists were long and parents have had to make their own childcare arrangements in the informal sector (Nyberg 4).

> The supply of services did not keep up with the demand (Nyberg 3). Therefore, in 1995, new legislation was introduced
>
> > specifying the municipalities' obligations to provide pre-school activities and childcare without unreasonable delay, meaning within three to four months of a parent applying for childcare. A place must be offered as close to the child's home as possible and with reasonable consideration being given to the parents' wishes (Nyberg 3).

The legislation also stipulated that "children are to be offered preschool education free of charge for at least 525 hours per year from the autumn term of the year in which they turn four (universal preschool)" (Sweden 2008 3).

Access has improved over time. In 2000, "the Ministry of Education said that "75 percent of all children between 1-5 years take part and 68 percent of school children between the ages of 6-9 years" (Sweden 2000 2). In 2002, 68.8% of children 0-6 were in public child care (Nyberg 9). In 2005, 46% of one-year olds were enrolled in child care, 75% of children age 1-3 (62.9% in public, 12.4% in private), 96.7% of children age 4-5 (80.7% in public, 15.7% in private), and 95% of 6 year olds were enrolled in pre-school (Sweden 2006 6, 19). Pre-school for 6 year olds voluntary (Sweden 2000 3). The proportion of enrolled children is increasing in all age groups (Sweden 2006 19). Since 2008, all 4-5 year olds have a right to attend preschool for minimum 3 hours per day or 15 hrs per week (Sweden 2006 6, 14). Access has also improved for unemployed parents (Sweden 2006 16) (discussed more below).

Changes in fees have affected access, especially for low income families (Sweden 2000 7). In the 1990s, there was a decline in expenditures per child on child care, and parents were paying an increased share of the costs. Parents were paying 10% of the costs in 1990, and 17% in 1998 and "[b]y 2000 this proportion had increased to 19 per cent" (Bergvist and Nyberg 292; Sweden 2000 6; Nyberg 7). Bergvist and Nyberg argue that this was a "temporary' retrenchment," and that resources for child care increased in the late 1990s (292). Nyberg explains that

> in 2002 a maximum childcare fee was introduced by the central government. This meant that a ceiling was set on the fees payable by parents for childcare. One important reason for this was to level out the considerable differences in childcare fees between different municipalities; another was to lower the level of the fees and, thirdly, to eliminate the marginal effects of childcare fees on parents' (mothers') income. After the introduction of the maximum fee, almost all families pay lower fees and 9 per cent of the total cost for public childcare (Nyberg 7).

Municipalities were given incentives to cap fees (Nyberg 7). If they took up the maximum fee system, they became eligible for a special government grant. All municipalities have now signed on (Sweden 2008 3). The fee is based on a percentage of family income (Sweden 2008 3), so "[f]or preschool activities, this means that for the first, second and third child in the household, the monthly fee is a maximum of three, two and one percent respectively of the monthly household income" (Sweden 2008 3). "Fees may not exceed SEK 1 140 per month for the first child, SEK 760 for the second and SEK 380 for the third child in pre-school activities," and there are no fees for fourth child (Sweden 2000 8-9). (These figures in CAD are about $155, $103, $52).

There does continue to be regional disparities in access. For instance, "[t]here are no pre-school classes at all in 5 municipalities and in one further municipality the number of children in pre-school class is less than 5 percent" (Sweden 2006 32).

In terms of quality, Swedish child care is ranked highly by the OECD, and "a recent investigation concerning the quality of nine sectors in the economy found that child care was rated the highest while local traffic companies and insurance services were rated lowest (Bergvist and Nyberg 295-96). There is an 'inspectorate' in the National Agency for Education that is responsible for observing the quality of preschool services, and there are -

quality requirements in legislation including the size and composition of groups, the premises and the staff (Sweden 2006 13, 15).

Yet there has been a growth in child/staff ratio (Bergvist and Nyberg 294; Nyberg 6): "the average group size was about 15 children in 1991 and 17.4 in 2002" (Nyberg 7). Bergvist and Nyberg make a somewhat dubious claim that this may simply indicate "an increase in productivity. That is, it is possible that the municipalities are producing as high quality child care with fewer resources" and that gains have been made through decentralization and better coordination (Bergvist and Nyberg 294-95). The Ministry of Education and Science makes a similar point (Sweden 2000 5). But there are indications that quality has been under strain. There is wide variation in group size across and within municipalities, and differences in quality for school-aged child care (Sweden 2006 13, 24). For example, in the same municipality "the group size in infant groups can vary between 10 and 22 children and in groups of older children between 15 and 25 children" (Sweden 2006 25). Furthermore, "[p]re-schools within the same municipality often worked under different conditions including varying sizes of children's groups, the design of the premises and the possibilities to recruit educated pre-school teachers. Pre-schools located in socially challenged areas often had more difficulties in carrying out their assignment in a satisfactory manner" (Åsén and Olsson 24). Mahon also notes that managers have argued that regulations are too onerous (352),

2. Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.

Sweden has a history of strong local organizing. Mahon argues that

> Stockholm was in advance of the national government, which only began to offer special incentives to tip the balance in favour of centre-based care in the latter part of the 1970s. Stockholm also was ahead in developing standards, set higher than the national government's. It was here too that childcare programs were initially organized for the main immigrant groups — Finnish, Yugoslavian, Turkish, Latin American — in their mother tongues. Thus, while national incentives played their part in making the construction of a high-quality system possible, it would be wrong to ignore the active role played by local forces in Stockholm (350).

She goes on to say that

> as in Toronto, these local achievements were not simply the result of benevolent city planners, responding to changing labour market conditions. Local politicians, especially from the Social Democrats (SAP), the Left Communist Party (VPK) and the Liberals (Fp) often played an important part in pushing for more rapid expansion, equally often opposed by the Conservatives who preferred a slower rate, commensurate with lower taxes. At least as important were local parent action groups, inspired, like their Toronto counterparts, by a mix of New Left and feminist ideals. In the 1970s, these parent-based groups worked with childcare staff and their union locals, the radical feminist group, 'Group 8', and friendly politicians (both local and national), to accelerate the expansion of this kind of childcare system (Mahon 350-51).

Over time, efforts have been made to strengthen the role of local governments in child care through decentralization (Nyberg 3): "[f]rom the mid 80s there has been an explicit trend in

administration policy in Sweden to give the local authorities greater responsibility and self-determination" (Sweden 2000 4). In the 1980s, municipalities gained more flexibility in adapting national legislation (Bergvist and Nyberg 300), and in 1993, a block grant to the municipalities was introduced (Nyberg 3; Sweden 2000 4; Bergvist and Nyberg 290). All grants from the national government were rolled into one general grant and municipalities were able to distribute it across preschool, school, elder care, and social services, "according to local needs and priorities" (Sweden 2008 2). In this process, the "state lays down goals and guidelines for the activities of municipalities and at the same time sets the financial framework. It is thus the municipalities themselves who determine how they will fulfil [sic] the national goals and how they will use the funds allocated" (Sweden 2000 4). Within the system, power has also been decentralized to schools: "Principals often have major freedom to decide how they will utilise the resources, and in the majority of municipalities the principal can also allocate resources between different operational forms" (Åsén and Olsson 21). On the flip side,

> with an increased decentralisation, the municipalities' supervision and control over pre-schools has increased in several regards. The fact that decentralisation often goes hand in hand with expanded control is a known pattern from other studies. In a decentralised system, follow-up and evaluation are important functions in order to maintain the necessary control (Åsén and Olsson 21).

It is debatable whether this decentralization was motivated by neoliberal or democratic impulses. As Bergvist and Nyberg provide, "[s]ome regarded this as a way of introducing more of a market orientation into the public sector, while others spoke about user influence and power of the citizens" (300). In the Canadian context, changing the way the federal government makes transfers to the provinces and territories (such as through the Canada Health and Social Transfer block grant) was a central neoliberal strategy.

This fine line between democratic and neoliberal decentralization can also be seen in the converging positions on private child care: "neoliberals had joined the New Left in critiquing the 'bureaucratic welfare state.' Whereas Pysslingen [a for-profit child care company] might be rejected by those sympathetic to the Left, parent co-operatives fit the New Left discursive themes of democratization, participation, self-management and mutual aid" (Mahon 352). Thus, even though the Social Democrats had long defended the public child care system, while out of office in the 1990s, they began to re-think their position, influenced by New Public Management ideas about greater efficiency and less bureaucracy (352). Once they returned to government, the Social Democrats did not reverse the Right wing changes to child care, maintaining that "more local influence over activities, improved quality of service, better use of resources, and services that are more compatible with users' needs" (Mahon 352). Mahon elaborates that

> the Social Democrats had come to see a connection between the need to increase citizen influence at the local level, where service providers and citizen-users meet, and an openness to alternative forms of delivery. This is why they were receptive to private provision of childcare by non-profit groups in the early 1980s (353).

There is some irony that with the increased power of the municipalities, in the 1980s, neoliberal forces worked at the city level to undermine the public system, "attacking the social democratic welfare state from below" in municipalities "where the bourgeois parties formed the majority" (Mahon 351).

Several initiatives have allowed for expansion of private provision (for-profit, non-profit, family-based) (Bergvist and Nyberg 296) of child care and have evolved over time. In the 1980s, "embedded in a discourse of 'choice,' [debates] arose over whether to increase for-profit alternatives. The social democratic government opened up the possibility for public support to centers not run by the municipalities but continued to exclude private for-profit child care" (Bergvist and Nyberg 289). Public funding could go to non-profits if they met national requirements (Bergvist and Nyberg 296; Sweden 2008 3). In 1994, the Right wing coalition government introduced a child care allowance that could be used for child care (whether public or private) as well as public funding for private centres (Bergvist and Nyberg 289). This allowance was abolished by the Social Democrats in 1994 (Bergvist and Nyberg 290), but in 2008, the national government introduced child care vouchers that can be used in municipal or private preschool or other child care (Sweden 2008 3). As seen above, the Social Democrats continued to allow public funding for commercial centres (Bergvist and Nyberg 290). As a result, the "proportion of children in private nonprofit and commercial child care centers rose from 5 percent in 1990 to 15 percent in 1999" (Bergvist and Nyberg 297).

Despite this private presence, Bergvist and Nyberg note that it wasn't easy for the Right wing government to proceed. In order to get the agreement of their coalition partners, the Liberal Party, who favored "institutionalized child care and a more equal division of labor between women and men in the family" they also has to introduce Sweden's now-famous "daddy month" for parental leave (Bergvist and Nyberg 290). The authors insist that there has always been private child care in Sweden, the most common being unregistered family care until the 1990s (Bergvist and Nyberg 296). The bulk of private child care is nonprofit, especially parent co-ops, which are an alternative to waiting for a public space (Bergvist and Nyberg 297; Mahon 351-52; Sweden 2000 5). There has been a decline in the number of children in family child care (Sweden 2006 18). In 1998, commercial centres were about ¼ of private child care (Bergvist and Nyberg 297). In 2005, 7.4% of children are in private preschool (Sweden 2006 33). Private child care is expanding in Stockholm, where demand is high (Mahon 351-2). Nyberg explains that

> [p]rivately organised (but publicly regulated and financed) childcare has become ever more common. The proportion of children in privately organised pre-schools increased from 5 per cent in 1990 to 15 per cent in 2000 and 17 per cent in 2002. However, most of the so-called private pre-schools are run by non-profit organisations. This is partly a legacy from the 1980s, when parents set up parent co-operatives (which already at that time could receive subsidies) as a response to the lack of places in public childcare. Parent co-operatives are still the most common form of private pre-schools (40 per cent), but there are also pre-schools run by companies (30 per cent), employee co-operatives and other organizations (3).

Bergvist and Nyberg conclude that

> [t]he general impression is that the private sector in child care has grown. This can, however, be contested. The proportion of children in private child care of all children in child care is smaller today (16 percent) than in the 1980s (40 percent). Private child care is also less 'private' today since it is now publicly regulated and financed … The great majority of child care is today run by the municipalities (297).

For-profit appears to have grown since the above articles were published. The Ministry of Education and Science says that

> [p]rivately run childcare became more common in the 1990s. It consists primarily in pre-schools that are run as private enterprises. In 2005, 17 percent of the children enrolled in pre-school attended a private pre-school, the same figure as in 2004. A little more than one third of these children attended a pre-school run by a company and slightly less attended a parents' cooperative (Sweden 2006 21).

Still, there are variations in the mix of public and private provision: "In certain municipalities more than 20 percent of the pupils attended privately run schools while more than half of the municipalities had no such activity at all" (Sweden 2006 33).

The Swedish child care system has also sought to become more integrated. The shift from the Ministry of Health and Social Affairs to the Ministry of Education and Science in 1996 was to strengthen the links between ECEC, school and school-age child care and child care legislation was brought into the School Act, under the National Agency for Education (Sweden 2000 1, 3; (Nyberg 10). The goal was to integrate preschool, leisure services and school (Sweden 2006 16).

It should be stressed that Sweden already had near universal coverage before child care was moved to education (Sweden 2000 3) and that there are continued challenges with integration. The Ministry of Education and Science says that the "staff employed in pre-school activities and in schools do not always cooperate in a way that is to the advantage of children in the transition from pre-school to pre-school class" and that the "inspectorate holds that politicians, local education directorates and school administrators need to engage more in a common dialogue concerning pre-school activities" (Sweden 2006 13).

Parental leave is an important part of the integrated family policy system. Parents have access to 16 months of parental leave, and each parent must use at least 60 days, or lose them (Nyberg 11). Nyberg also notes that the "parental leave system is very flexible. Today it is possible to choose between a full day's leave, three-quarters, half, one-quarter or one-eighth (*ie* one hour) of a day's leave" and has a high wage replacement rate (12).

3. The system of early care and learning advances equity and social inclusion for all.

Equity and social inclusion are at the heart of the Swedish child care system. The Ministry of Education and Science states that the "overarching goals of Swedish ECEC are the fostering of democracy, equality, solidarity and responsibility" (Sweden 2000 3). Furthermore,

> [u]nder the Education Act all children and young people in Sweden, irrespective of gender, place of residence, social or financial situation, shall have equal access to education in the public school system. All children and young people shall be offered a place by their home municipality in the appropriate forms of education, even if pupils are only required by law to attend compulsory school or equivalent forms of education … The Education Act also states that the education provided in each respective type of school shall be equal in value, wherever in the country it is provided (Sweden 2008 1).

Gender equality is integral to the education system:

> Schools shall actively and consciously promote equal opportunities for both men and women. Moreover, schools have a responsibility for combating traditional gender patterns and giving pupils scope to develop their abilities and interests irrespective of sex. The manner in which girls and boys are treated at school and the demands and expectations imposed on them contribute to form their conceptions of and attitudes to masculinity and femininity (Sweden 2006 14).

ECEC was also intended for integration of special needs children (Sweden 2000 1).

Nevertheless, there are still access and inclusion gaps. Some of these issues stem from the way that access has been linked to parental employment status and labour market participation (Nyberg 2). Child care wasn't truly universal, as it was tied to employment status or special needs (Bergvist and Nyberg 293). The unequal access was related to mother's working time, as public child care was designed for two full-time working parents (Bergvist and Nyberg 299). In the 1960s and 1970s, when the system was developing, the share of middle class children in public child care increased, while it decreased for the working class (Bergvist and Nyberg 299). This posed a political problem for the Social Democrats because higher income earners were benefitting more (Bergvist and Nyberg 299). It also resulted in a structural inequality because immigrants were more likely to be unemployed, or to work part-time and therefore were less likely to have access to public child care, and therefore, "already vulnerable groups that are shut out of public child care" (Bergvist and Nyberg 300). In addition, if a parent lost their job, they also lost their child care space (Bergvist and Nyberg 300).

The Ministry also recognized this problem, pointing out in 2000 that:

> all children do not have access to ECEC in Sweden. The right to a place in a pre-school is today dependent on the employment status of a child´s parents. Municipalities are obliged to provide places for children only if parents are working or studying or if the child has special needs of its own. This has lead [sic] to a situation where a number of children with parents who are unemployed do not have access to pre-school. Many of these children have immigrant backgrounds. For children whose parents have taken leave of absence to take care of a baby in the family, the rules are the same as for unemployed parents. The child might lose its place in the pre-school during this period (Sweden 2000 7).

They continue to explain that

> [c]hildren in family day care homes, children whose parents work in shift to avoid costs of child care, children taken care of by relatives or neighbours and children with a home working mother – although few in Sweden, are groups of children with no access to pre-school of today. Not many in numbers, but nevertheless children that would benefit from pre-school just as much or maybe even more than others. The children without access to ECEC has for the past years been a main challenge to ECEC policy (Sweden 2000 7).

Access for children of the unemployed, immigrant and ethnic minority children and children with special needs has been unequal. For instance, "[c]hildren in need of special support … do not always have their rights upheld and the possibilities are very inadequate for children

with a first language other than Swedish of finding support in developing both Swedish and their first language (Sweden 2006 13). The Ministry specifically highlights the difficulties for language minorities:

Although the curriculum prescribes that pre-school must contribute to providing children whose first language is not Swedish with the opportunity of developing both Swedish and their own first language, it is unusual that children receive first language support. In 2005, 15 percent of children in preschools spoke a first language that was not Swedish. In family day-care homes the proportion was 5 percent among 1–5 year-olds, which represents altogether 56,800 children. Of these only 14 percent received first language support; a weak increase, nevertheless, compared with previous years. The proportion of children whose first language is not Swedish receiving first language support in pre-schools or family day-care homes increased by a few tenths of a percentage every year during the 2000s. Nevertheless, the proportion is still very low compared with the trend in the 1980s when about 60 percent of 'entitled' children in pre-school were given first language support (Sweden 2006 22-23).

There is variation in access to first language services by municipality as well:

> Broadly speaking, in all municipalities there are children in pre-school whose first language is not Swedish. Nevertheless, only about seventy municipalities provide first language support. This is, however, an increase compared with 2004 when only about fifty municipalities offered first language support (Sweden 2006 23).

In general, there is differential access across municipalities, especially urban vs. rural (Bergvist and Nyberg 300; Sweden 2006 23), and an uneven regional distribution of school-age child care (Sweden 2006 23). Due to a combination of social and demographic factors and political priorities, expenditures per child vary across municipalities (Sweden 2006 29). Municipalities with Social Democratic governments are more apt to be driven by universalism and egalitarianism (i.e .they are more likely to allow unemployed parents to keep a public space, and more likely to have higher local taxes, and lower fees), whereas private child care is more common in municipalities with bourgeois governments (Bergvist and Nyberg 300-301).

There has been improvement in access more recently, but there are still some access and inclusion issues:

> The educational level, ethnicity, civil status and place of residence of the parents were influential factors in the child's childcare. The higher the educational level, the more common it was for the child to be in public childcare. Children of parents born outside Sweden and children of cohabiting parents were less likely to be in childcare than children of Swedish parents and single parents. These differences have now almost disappeared and almost all children are in public childcare. Only about 2 per cent of children are more permanently at home with an 'at-home-parent', but some differences still exist. Children of parents with a university education spend about three hours more per week in childcare than children whose parents only have a nine-year compulsory school education and they are also more often in childcare run by parental co-operatives. While long-established differences between groups diminished, new ones appeared in the 1990s, especially the growing differences between municipalities as far as supply, childcare fees, etc were concerned. For example, big cities, suburban municipalities, and larger towns had the highest

proportion of children in childcare, while rural municipalities had the lowest (Nyberg 5).

In Sweden, co-op child care is a large portion of the private component of the system. In these centres,

> [p]arental groups are the organisers and employ the personnel. Parents often themselves work on a rotating basis and are thus able to reduce cost. Many parental co-operatives were started by parents full of initiative wanting to bypass the long waiting times for places in municipal pre-school during the expansion years, and despite the fact that there is now full coverage the parental co-operatives continue to flourish. Other nonpublicly organised ECEC-settings include personnel co-operatives, and programs organised by various organizations, corporations or churches (Sweden 2000 5).

And as seen in other systems, there are trade-offs to consider in terms of community control versus parents' time and unpaid work. This is reflected in comments from the Ministry of Education and Science that "[p]rivately run pre-schools finance their activities by municipal grants, parent fees and sometimes also by the unpaid work of parents" (Sweden 2006 31). Other equity concerns have also been raised by Mahon. She maintains that the

> growth of parent co-ops contributed more to class segregation than Pysslingen [the for-profits]. Whereas municipalities can make support for commercial childcare centres conditional on their willingness to take children from the municipal queue, no such stricture can be imposed on parent co-ops because of the requirement of parental time contributions. The Social Democrats have used legislative and financial resources of the national government to mitigate these effects (Mahon 353).

It is significant that many of the access gaps have been pointed out by the Swedish government itself, and effort has been taken to try to address them. In the 1990s, there was more emphasis placed on part-time child care, increased access to public child care for the working class, and a growing equity focus in terms of employment status and ethnic background (Bergvist and Nyberg 299- 300). Over this time, "there was also a trend toward a more universalistic system" (Bergvist and Nyberg 293, 302). From 2001-2002, there was an extension of some entitlement for the unemployed or those on parental leave, and in 2003, fifteen hours of free preschool was introduced (Nyberg 4). In addition, the "*open pre-school* is intended for parents who are at home and their children. Together with the staff the parents are given the opportunity of developing pedagogical group activities for the children. The children are not enrolled. In many places family day-care homes also have access to open pre-school activities (Sweden 2006 17).

It is possible that an over-emphasis on universality may be detrimental to social inclusion. All providers must meet the same standards and national principles of democracy, equality and solidarity (Sweden 2000 5). However, depending on how these values are put into practice (for example, 'solidarity'), there may be negative consequences for diverse communities.

4. Programs provide play-based, inclusive experiences that meet all children's

Preschool in Sweden aims to meet multiple goals of women's equality, parental labour market participation or educational support, children's equality, lifelong learning, human

capital development, and high quality pedagogy (Sweden 2000 2, 9; Sweden 2006 15; Nyberg 10; Bergvist and Nyberg 294; Åsén and Olsson 8). The Swedish preschool curriculum is designed to promote play, creativity and fun, to meet children's developmental needs, and to respect their right to quality of life (Sweden 2006 13; Sweden 2000 2). The overarching emphasis is on the rights of children and teaching democratic values, where children are seen as citizens (Sweden 2000 2). According to the Ministry,

> in the pre-school and school great efforts are made to give children influence and encourage their participation. Sweden has also come far in developing a child perspective which permeates activities and decisions affecting children. The Office of the Children´s Ombudsman was set up in 1993 with the task of monitoring children´s rights in accordance with the UN Convention on The Rights of the Child (Sweden 2000 2-3).

Preschool was moved to the Ministry of Education to enhance the pedagogical focus, and in 1998, a national preschool curriculum was adopted (Sweden 2000 3, 7; Bergvist and Nyberg 293).

Since the move to Education, there are some concerns about schoolification (Sweden 2006 16) and about the growing attention to the measurement of children's performance and language development (Nyberg 10; Åsén and Olsson 25, 28). Åsén and Olsson say that fears about a narrowing of the curriculum especially with increased emphasis on testing and school readiness are less pronounced in the Nordic countries, but that there is some indication that Sweden is moving in the same direction (28-29).

The Ministry insists that Sweden is not experiencing schoolification under the national curriculum:

> The new – and first – curriculum for pre-school does not mean that preschool will in fact become 'school.' On the contrary, traditional pre-school pedagogical approaches are emphasised in the curriculum such as the child´s well-being as a whole, the importance of play etc. The pre-school as before will maintain the role of 'play,' and ensure that learning takes place on the basis of the child´s individual interests and needs. However, pedagogical content has been given a clearer focus and greater emphasis. The child´s curiosity, industriousness and desire to learn should be taken account of. The pre-school should provide 'security, enjoyment and a wealth of learning opportunities' (Sweden 2000 7).

Åsén and Olsson also provide that the goal was to improve the pedagogy of pre-school, but also to allow for pre-school pedagogy to influence school (8). They say that "[n]ew methods for developing children's influence have been formulated where children are more often involved in evaluations. Sensitivity and respect for children's initiative have also increased." (Åsén and Olsson 20). One of these techniques is called "pedagogical documentation." Influenced by Reggio Emilia, it

> is for the purpose of making the children and the activities more visible as well as to evaluate the importance of the context of the learning and the learning environment to children's learning, play and cooperation. Pedagogic documentation can be seen as a collective evaluation instrument and differentiates from individual development

plans and such documentation that is only directed at the individual (Åsén and Olsson 28).

5. **Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.**

At the beginning of the 1990s, women's labour market participation in Sweden was 86% and they had one of highest birth rates in Europe (Sweden 2000 2). Nonetheless, Nyberg makes an important point:

> It is often assumed that, in Sweden, mothers' employment was the result of an intensive gender equality policy and the expansion of public childcare. However, as we can see in Table 1 below, it would be more correct to describe the order of development the other way around: mothers entered the labour market first and this created a demand for public childcare. Swedish mothers entered the labour market long before there was enough public childcare (Nyberg 8).

This is relevant to Canada, where there are high female labour participation rates in the absence of public child care.

As seen above, child care services were linked to parental employment status (Bergvist and Nyberg 288). Family and labour market policy were seen as intertwined, designed for parents to combine work and family (Sweden 2000 1). .Nevertheless, "supply has never matched demand, so even employed parents have been unable to find the child care they need" (Bergvist and Nyberg 293). But changes described earlier have increased access for unemployed parents and those on parental leave, including preschool for 4-5 year olds and the fee cap (Bergvist and Nyberg 294; Sweden 2000 8). While lone mothers have historically had access to child care, the situation has also improved for cohabitating mothers (Bergvist and Nyberg 298).

Operating hours are flexible to meet the needs of working parents, yet again, there is variation:

> a very large proportion of pre-schools (around 90 per cent) are open 10–12 hours per day. However … this share decreased between 1996 and 1998 and … privately run pre-schools had shorter opening hours than those run by the municipalities. In 2003, 52 per cent of the municipalities could also offer night-open childcare centres to the children of parents who work nights. A large proportion of other municipalities maintain that there is no demand for childcare at night. In 2002, children aged between one and five with employed or studying parents spent on average 32 hours per week in childcare (Nyberg 6).

Some centres shortened their operating hours to save money (Nyberg 8).

6. **Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education**

Preschool teachers are highly trained in ECE (Sweden 2000 4):

> Childcare staff are generally well educated. In 2005, 95 percent of the annual employees in pre-schools were trained for working with children. The proportion of

annual employees with higher education teaching qualifications (preschool and leisure-time pedagogic education or teacher-training) was 51 percent, the same figure as in the year before. In leisure time centres the proportion of annual workers with higher education teaching qualifications was 59 percent, an increase of one percentage point compared with the year before. Fully 70 percent of family child-minders in family day-care homes have some training for working with children, most often childminder training (33 %) or other training for working with children (35 %) other than higher education" (Sweden 2006 26).

Nyberg adds that "[u]p until 1990 child-minders made up the largest group of employees in public childcare, but today university-trained pre-school teachers form the biggest category, although in recent years the average educational level has decreased somewhat. One reason for this is that it is hard to find pre-school-teachers" (Nyberg 7). In 2005, a special grant was introduced to increase staffing (Sweden 2006 27). 65% of expenditure is on staff costs (Sweden 2006 36). The majority of preschool teachers are women (Sweden 2006 14, 26).

Workers have faced pressure and declining working conditions though "due to the continued shortage of training personnel and municipal efforts to cut corners by not paying for substitutes or by enlarging group size" (Mahon 352). Furthermore, for the municipalities, private child care providers "were seen to offer adequate quality at a lower price because fewer caregivers were required. For Pysslingen, this was done by hiring only pre-school teachers, whom, they argued, were able to look after larger groups of young children. For the co-ops, parent inputs of time allowed for reduced staffing requirements" (Mahon 352). "The mixture of staff with higher education differs between the various organisers. In municipal operations the proportion of staff with pre-school teacher training was 71 percent while the corresponding figure for independent schools was 46 percent" (Sweden 2006 35).

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

For more, see #1

In 1966, grants for child care centres were doubled to encourage expansion, and in the 1970s, grants were given to municipalities specifically to achieve uniform child care services across the country (Nyberg 2-3). Spending per child decreased in the 1990s, but increased by the late 1990s (Nyberg 6). In 2006, 3% of total education expenditure was spent on preschool, and "[e]xpenditure per pre-school class pupil is in total SEK 45,300" (Sweden 2006 35) (or about $137, 000 CAD). The Ministry of Education and Science underscores that "ECEC has received a large proportion of society's resources, but it is also quite apparent that the expansion of ECEC has been national economically profitable, despite the costs involved" (Sweden 2000 2).

Venezuela

Albert, Michael. (2008). "Gender in Venezuela." Access at:
http://www.venezuelanalysis.com/analysis/3818

Albert conducts an interview with Nora Castañeda, the head of the Women's Bank in Venezuela and part of the women's movement. They discuss the role of neighbourhood caregivers.

Fernandes, Sujatha. (2007). "Barrio Women and Popular Politics in Chavez's Venezuela." *Latin American Politics and Society.* **49 no. 3. pp. 97-127.**

Fernandes discusses the role of women in the barrios (shantytowns) (97). Because traditionally, most community leaders have been men, Fernandes seeks to explore the "[w]hat possibilities exist for poor women mobilized in the framework of state-managed programs in a revolutionary-populist state?" (97). "This study argues that the ability of barrio women in Caracas to build local 'spaces' of political participation partly outside of state control has increased their power of negotiation in state-sponsored programs, such as soup kitchens. Despite male leadership and authority, the growing presence of women in local assemblies, committees, and communal kitchens has created forms of popular participation that challenge gender roles, collectivize private tasks, and create alternatives to male-centric politics. Women's experiences of shared struggle from previous decades, along with their use of democratic methods of popular control, such as local assemblies, help to prevent the state's appropriation of women's labor for its own ends. But these spaces of popular participation exist in dynamic tension with more vertical, populist notions of politics that are characteristic of official sectors of Chavismo" (Fernandes 98).

Government of Venezuela. (2004) Early Childhood in the Venezuelan Education Sector: Implementing Child Rights. Submission to the United Nations Committee on the Rights of the Child. Access at:
http://www.crin.org/docs/resources/treaties/crc.37/government_of_venezuela.pdf

The Government of Venezuela explains that its early childhood policy exists within "the frame of co-responsibility. The State understands education as a task that belongs to the whole society, a task in which family, society and Government join efforts for the promotion of equity as an ethic principle, with the purpose of achieving social equilibrium and giving significance to social justice, and granting social context to democracy within the frame of humanism" (1). Pre-schools in particular are part of the "*Simoncito* project, which offers orientation to mothers during pregnancy and after giving birth; it provides medical care to babies until four years of age, when they entered an integral kindergarten" (2). The state has built 2000 pre-schools for 70, 000 children, and 1.5 million children are in pre-school (2).

Velásquez, Mayerling. (2009). "Day Care in Danger of Closing." *Nueva Prensa de Guayana.* **Access at: http://nuevaprensa.com.ve/content/view/34190/14/**

In the municipality of Caroni, Care Homes and Community simoncito are in danger of closing or cutting their hours, due to a delay in payment from government. 163 care givers have not been paid for 3 months, and care givers have been making up for inadequate meals at the centers. The regional government says they are not to blame for the late

payments that the funding comes from the national government – the National Autonomous Service for Integral Care of Children and Family (SENIFA) under the Ministry of Popular Power for Education (MPPE).

Suggett, James. (2008). "Venezuela Expands Preschool and Drug Prevention Programs." Access at: http://www.venezuelanalysis.com/news/3799

Federal social programs in Venezuela are called 'missions.' The national preschool program is called Mission Simoncito. "'Simoncito' means 'Little Simón,' a reference to Venezuelan independence leader Simón Bolívar, after whom the Bolivarian Revolution led by President Hugo Chávez is named."

The system has expanded to cover 70% of children, and preschool enrollment in 2008 was at 1.5million. Children ages 3-6 receive daily meals, and have play and classroom space. There is also infant care, maternal health and nutritional instruction for pregnant mothers. "According to the Minister of Planning and Development, Haiman El Troudi, Venezuela is on track to satisfy the United Nations Millennium Development Goals for the universalization of pre-school, primary, and secondary education by the year 2015." Community councils play a major role in governing the centres.

Suggett, James. (2009). "Venezuelan Education Law: Socialist Indoctrination or Liberatory Education?" Access at http://www.venezuelanalysis.com/analysis/4734

The Venezuelan government passed a law that establishes a right to free, quality education from childhood to university. "The official title of the law is, 'Organic Education Law,' meaning it has the highest legal stature under the constitution and is required by the constitution to uphold constitutional principles." There are angry opponents to the law, especially from the private education sector, and Suggett responds to the criticisms.

United Nations. (2006). Committee on the Rights of the Child. Consideration of Reports Submitted by States Parties Under Article 44 of the Convention, Second Periodic Reports of States Parties due in 1997, Bolivarian Republic of Venezuela. Access at:
http://www2.ohchr.org/english/bodies/crc/docs/AdvanceVersions/CRC.C.VEN.2.doc

In 2002, the poverty rate in Veneuela was 55.3%, with goal to reduce it to to 25% by 2015 via social programs (United Nations 4). These social programs are delivered through "a new form of management based on institutional co-responsibility and equitable distribution of services … suited to the needs children and adolescents have in different regions, ethnic groups and social classes" (United Nations 5).

"Nursery education includes preschool education for the population aged between 0 and 5 years 11 months. It is taught in two phases - kindergarten and preschool - with the active involvement of the family and community. Encompassing conventional and non-conventional care, it is available nationwide. Conventional care is included in the national education system, whereas the non-conventional part is covered by special programmes such as Plan Simoncito. This provides comprehensive care in the areas of diet, education, health, recreation and protection of the rights of children aged between 0 and 5 years 11 months who belong to marginalized sectors of society. The 'A teacher in your home'

programme (supported by the Bernard Van Leer Foundation), run by volunteers, is operating in the States of Yaracuy, Falcón, Sucre, Trujillo and Portuguesa. It includes the design and publication of four leaflets aimed at the family as a means of buttressing the teachers' work. A CD containing traditional children's songs, stories and legends has also been produced for distribution among the community. Toy libraries have been made available for work with significant adults and children. With the support of 60 public and private bodies, 123 local social networks have been organized and encouraged" (United Nations 23).

UNICEF. Education Statistics: Venezuela. Access at:
http://www.childinfo.org/files/LAC_Venezuela.pdf

Pre-primary enrolment in Venezuela has increased from under 40% in 1980 to about 60% in 2006 (UNICEF 1). Preschool starts at age 3 (UNICEF 3). In 2006 85.6% of preschool teachers were trained, and 94% of teachers are female (UNICEF 3).

"Venezuela - Preprimary Primary Education," Access at:
http://education.stateuniversity.com/pages/1664/Venezuela-PREPRIMARY-PRIMARY-EDUCATION.html#ixzz0ie3stSqN

"An experimental phase started in September of 1999 and includes 525 'Bolivarian schools' all over the country. The purpose of this program is to create a new educational philosophy inspired by the ideas of Simón Bolívar. According to this philosophy, there must be a permanent dialogue between the school system and the needs of the social community" (Venezuela – Preprimary). "According to the Chávez administration, the teaching philosophy of the 'Bolivarian schools' can be summarized as follows:

   To be a model of integral attention for social equity.
   To provide participation, autonomy, and democracy.
   To provide a school system that values and respects students, the culture, and the community.
   To be a model for permanent teaching improvement.
   To be aware that the Bolivarian Schools are for the community and with community participation" (Venezuela – Preprimary).

This article says that private preprimary provision is growing in urban areas, but this could not be confirmed in the other sources, and 'private' is not defined.

Wagner, Sarah and Gregory Wilpert. (2005). "Now We Must Consolidate This Bolivarian Educational System." Access at:
http://www.venezuelanalysis.com/analysis/1061

The education system is based on the principle of co-responsibility, which "means that the State is not a paternalistic state, but instead that the people have duties as well as rights … The people have the right to participate in the planning, the executing, and in the evaluation of public policies. We are organizing the people to participate, and trying to support the training of the people. The communities of education are a form of participation. The civil

society organizations in the schools are a form of participation. The cooperatives of the schools are a form of participation for people" (Wagner and Wilpert 2005).

How Does Venezuela's System Match With the Starting Principles?

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1. **The right of all children to access universal, high quality publicly funded early care and learning programs is enshrined in legislation.**

Early education is a constitutional right in Venezuela. Article 103 of the constitution says that: "it is the state's duty to provide free, high-quality education from the 'maternal' years through undergraduate university level" (Suggett 2008). In addition, there is "Article 5, which says the state must guarantee education 'as a universal human right and a fundamental, inalienable, non-renounceable social duty, and a public service... governed by the principles of integrality, cooperation, solidarity, attentiveness, and co-responsibility' " (Suggett 2009).

There is also another law called the "the Protection of Children and Adolescents (Organization) Act, which provides guidance on five main areas:

    (a)   Legal framework, based on guaranteeing the human and social rights of children and adolescents;
    (b)   Institutional framework, to strengthen and reform the formulation, implementation, execution and evaluation of comprehensive childcare policies;
    (c)   Programme framework, which involves designing plans, policies and programmes for comprehensive childcare, sharing responsibility with various social partners;
    (d)   Institutional framework, with a focus on distributing resources for comprehensive childcare;
    (e)   Financial framework, i.e. cooperation between national, multilateral and bilateral bodies" (United Nations 8).

A body was created "to oversee the national child protection system. This is a public body with its own legal personality, and functions completely independently from other public bodies. Its purpose is to deliberate, advise and audit, and it comprises representatives of both the public sector and civil society. It upholds children's and adolescents rights through "comprehensive care", sharing responsibility with the State, civil society and families. It functions on the basis of respect for and encouragement of administrative decentralization" (United Nations 8-9).

2. **Programs are planned, delivered and governed on a democratic, community driven, not-for-profit basis through an integrated system of early care and learning.**

One of the central principles of the Venezuelan system is local democratic control, and "Chavez has encouraged barrio residents to create a range of committees and cooperative organizations" (Fernandes 110). Services are controlled through "local governing bodies known as community councils, which receive national funding to solve community problems at the local level" (Suggett 2009). As noted above, participation and popular control are required by the constitution and national law, which "expands the legal definition of the

educational community to include families, community organizations, and wage laborers in addition to the formal educational workers" (Suggett 2009).

Some have criticized these measures, saying that they amount to politicization of classrooms and state custody of children, that there was a lack of discussion before the law was passed, that it violates the autonomy of universities, and threatens family and religion (Suggett 2009). Suggett responds to these concerns. First, he says that "the perspective of many proponents of the law is that previous education laws, which did not advocate participatory democracy and the other values established in the new law, were no less political" (Suggett 2009). He also says that community councils, even if they are publicly funded, are independent from government, and that there are councils that are opponents to Chavez (Suggett 2009). Finally, he argues that the reforms do not threaten religion, but move toward a secular education system (Suggett 2009).

As will be seen in part C, these governance forms are also contradictory in terms of gender relations, and the Velásquez piece demonstrates clearly that women have taken on responsibility for services without funding. Fernandes points out that "[m]any theorists have noted the paradoxes of international donor funding for women's organizations. In a context of privatization and cutbacks in social welfare, women in NGOs often find themselves providing the services that used to be the responsibility of the state … In Venezuela, international foundations, such as UNICEF and the National Fund for Infant Attention *(Fondo Nacional de Atenci6n a la Infancia,* FONAIN), provided funding for day care centers *(hogares de cuidado diario)* in 1987, with the aim of establishing 42,000 centers by 1993. This program, which involved large numbers of women as 'carer mothers,' was a continuation of programs established during the first Perez administration. The *Circulos Femeninos* were also incorporated into the World Bank-funded Social Fund *(Fondo Social),* in charge of more than 14 compensatory programs. 'While providing some relief for women in a context of economic crisis, these programs also served to institutionalize women's struggles for survival.' This often meant an increased workload for poorer women and a lower likelihood that the conditions of structural adjustment policies would be challenged" (107). She adds that "[s[ome scholars have noted how women's labor has been appropriated under populist governments, such as those of Alberto Fujimori in Peru or Sixto Durán-Ballén in Ecuador, as a means of providing essential services to households as the neoliberal state retreats from this role. This devolving of responsibility for welfare services was characteristic of the day care centers and World Bank-funded women's projects under previous administrations of Herrera Campins and Perez in Venezuela. Social policy under Chavez is guided by contradictory principles that retain some aspects of this neoliberal approach to decentralization of service provision, shifting responsibility to poorer sectors. At the same time, state-sponsored programs under Chavez constitute part of a range of social welfare strategies that aim to channel funds toward social development and away from a neoliberal market model" (Fernandes 119).

Fernandes is critical of the ways in which women have had to self-organize as a survival strategy, but she also argues that there is potential for structures created out of austerity to morph into new political forms that allow women to challenge traditional gender roles and exclusion from male-dominated political institutions. To a certain extent, this has been facilitated by new funding for NGOs (107, 111, 115).

Women's local organizing has brought about innovative governance approaches and is "building new spaces of democratic community participation" (Fernandes 122). Here are two examples:

"The women of the Carretera Negra first formed their Health Committee in July 2003, when a Cuban doctor was sent to the barrio. The women found a house to use as the clinic; they looked for equipment, chairs, and beds; and they found the doctor a residence in the barrio. They organized meetings between the Cuban doctor and the community, they took health censuses, and they visited families to explain the idea of the popular clinics. In September 2003, the women started an Urban Land Committee consisting of 21 people who took censuses of families and began to distribute land titles, giving titles to 98 families by June 2004. In September 2004, the community activists set up a soup kitchen, which was functioning by October" (Fernandes 114).

"In parishes such as La Vega, moreover, which have a long history of community activism, women have sought to retain community control over the programs through the practices of local assemblies. They view food preparation in soup kitchens as a collective task rather than the responsibility of individual cooks, and therefore they seek collective rather than private solutions to the problems presented" (Fernandes 122).

In developing the system, a variety of strategies for coordination and integration have been explored. For instance:

> "One way of ensuring constant coordination between the economic and social policies forged by the Government is through the Social Cabinet, comprising the Ministries of education and sport; culture; health; participation and social development; labour; infrastructure; planning and development; the environment; and the interior and justice. The Cabinet makes the feasibility of these policies clear by assessing, controlling and monitoring their impact on the population" (United Nations 11).

> "Schemes to benefit children include the 'Bolivarian' schools, which follow a comprehensive education model targeting the most deprived children at the preschool and basic (first to sixth grade) levels. They seek to provide the population with a comprehensive, good-quality education at no cost by extending the school day and offering medical and dental services, a balanced diet and artistic, sporting and recreational activities, complemented by other activities to reinforce learning" (United Nations 17).

> "The first phase of Bolivarian education begins with nursery education or 'Proyecto Simoncito', which "seeks to attain the comprehensive development of children between the ages of 0 and 6 years or until they begin the first grade of basic education Proyecto Simoncito is one of the strategies formulated by the Ministry of Education and Sport as part of the State policy for the comprehensive care of children and adolescents" (United Nations 17).

3. **The system of early care and learning advances equity and social inclusion for all.**

While women are taking on new leadership roles in communities, Nora Castañeda, from the Women's Bank says that "there is some resentment and then too men complain that women aren't taking proper care of children, or aren't properly cleaning and ironing men's clothes,

and that they are always outside the home, working in the health committees and the communal councils" (Albert). She goes on to say that, "[o]ur revolution seems to be one that is of the women and for the women. Women are working a lot and this means that they are getting stretched thin because they have so much to do. Of course we don't want that. We want that men and women are equal, inside and outside the home. In paid work, house work, and participating in social programs … The woman is now mainly responsible for child care and for the home, and is also working outside the home at a paid job, and is also volunteering in the community. So it is like having three responsibilities. For the men it is not the same" (Albert). However, there are some indications that men are participating more in communities and taking on traditionally domestic responsibilities, in soup kitchens, for example, which is challenging gender roles (Fernandes 115, 121).

In the education laws, equity and social inclusion hold a prominent place. The law guarantees equality based on gender, disability, geographic location, class; indigenous language education and cultural identity, and democratic education is defined in terms of valuing indigenous peoples and guaranteeing gender equity (Suggett 2009). In practice, some of the results have been that "[I]n the first quarter of 2004, an additional 262,056 children aged 0 to 6 years joined day care centres under the Comprehensive Care Centre Programme, which thus catered for 75 per cent of the population. Child care was developed in indigenous communities; 63 Comprehensive Care Centres were opened in the western region (Zulia - border municipalities of Mara, Páez and Machiques), providing care for 860 girls from the Wayúu and Añú indigenous groups and 2,210 girls from the Piapocos, Piaroas, Urripacos and E'ñapa indigenous groups. A further 73 Centres were opened in the Guayana region (Bolívar), in the form of *churuatas* (traditional shelters), and 10 *caneyes* (cabins) and 5 *enramadas* were built to host indigenous Comprehensive Care Centres in the western region (Zulia)" (United Nations 49).

4. **Programs provide play-based, inclusive experiences that meet all children's developmental needs and respect their right to quality of life.**

Key to a democratic education system is that the rights of children and adolescents are respected and developed. The law was designed with "a view to ensuring their rights to full development, in conformity with the type of citizen that we want to shape in a democratic, participative, active, multi-ethnic and multicultural society. It lays stress on the right to a comprehensive, good-quality education in conditions of equity and social justice, as enshrined in the Constitution of the Bolivarian Republic of Venezuela. It lasts from conception until children begin basic education, where the foundations are laid for shaping citizenship, learning, emotional development and intelligence and the capacities for coexistence and tolerance, as part of the principle of social and cultural diversity" (United Nations 17)

5. **Programs are designed to meet the needs of the majority of families where parents are in the paid labour force, studying and/or participating in community life.**

The operating hours could not be confirmed in these sources. Albert indicates that some services are free and go from 8am-3pm (Albert). The United Nations report says that preschool goes from 8am to noon or from 7am to 11am (United Nations 22).

6. Programs are delivered by socially valued and fairly compensated staff with specific education and expertise in early childhood education.

These articles provide no information on wages and training. Suggett does make an interesting comment about "the enormity and complexity of the task of equipping teachers who are steeped in a traditional, anti-democratic, competitive, and individualistic educational methods with the knowledge and tools necessary to make the transition to a new, democratic, cooperative, and social-communitarian pedagogy" (Suggett 2009), suggesting that negotiating the reforms with the ECL workforce has been a challenge.

7. Programs are adequately funded, stable and openly accountable to the communities they serve.

Funding has come from the national government (Government of Venezuela 2; Suggett 2008).

B) Child Care and Governance

This section reviews governance issues in child care, as well as other policy areas.

Bennett, John. (2008). "Early Childhood Education and Care Systems in OECD Countries: the Issue of Tradition and Governance." *Encyclopedia of Early Childhood Development.* **Access at: http://www.ccl-cca.ca/NR/rdonlyres/BA90A19A-3D33-4F9F-AE9D-CAA533A807B0/0/BennettANGxpCSAJE.pdf**

Bennett notes that Early Childhood Education and Care (ECEC) systems are governed in one of two ways: integrated (in one ministry or agency); or through split management. He maintains that, "[t]he adoption of one or other approach says much about how early childhood is understood in a country, and the relative value given by governments to policy-making, funding and regulation in this field" (Bennett 1). Historically, 'care' and 'education' policy have developed separately, often with care traced to charitable, social protection, and education linked to opportunities for upper class families or for language and cultural reasons. As welfare states developed, this split remained, and care went to health or social ministries and early education to education. This split remains in many OECD countries today. Others have integrated ECEC into a single ministry, usually education: "Influenced by a growing concern to give form to the notion of lifelong learning, Iceland (1976), New Zealand (1989), Spain (1990), Slovenia (1993), Sweden (1996), England and Scotland (1998), Norway (2005) and Netherlands (2007) have brought early services into the ambit of education, with more or less success depending on the country" (Bennett 2).

Analysis

Integration and fragmentation seem to coincide with governments' level of commitment to ECEC. Nordic countries have moved toward integration, and have higher quality, better coordinated services, while in the US, in 1999, there were 69 different federal programs for children under 9 different federal agencies and departments (Bennett 2-3). In *Starting Strong*, the OECD calls for a coordinated policy framework with a lead ministry for young children. Integrated governance also appears most compatible with the *starting principles*:

1. In liberal regimes (i.e. Canada, the US), with fragmented governance, child care is largely seen as a private responsibility and the focus is on targeting vulnerable groups (Bennett 3)
2. In liberal regimes, services are usually "unavailable on a full-day, all-year basis" (Bennett 4), and therefore do not meet the varied needs of families.
3. Fragmented governance models have uncoordinated services, and direct child care services to children under 3 and early education from 3-5. In addition, "[c]are and early education institutions differ greatly in their funding requirements, operational procedures, regulatory frameworks, staff-training and qualifications" (Bennett 2). Especially for child care, there tends to be a patchwork of services, less coverage, affordability, less training, lower wages, and higher job insecurity (Bennett 3)
4. In governance systems that allow for commercial providers, research shows that they buy up smaller services, and consistently lobby for less regulation (Bennett 3).
5. There are variations within the integrated systems. In the Nordic countries,

municipal governments deliver services (Bennett 3). Some municipalities provide services directly, some contract out the services (Bennett 3).

Bennett, John and Michelle J . Neuman. (2004). "Schooling for Early Childhood? Early Childhood, Major Challenges: Review of Early Childhood Education and Care Policies in OECD Countries." *Prospects.* **XXXIV no. 4. p.p. 423-433.**

Bennett and Neuman seek to "analyse the roles of national authorities, local authorities, NGOs and other social partners, and the institutional resources allocated to planning and implementing policies at each intervention level" (425). There are a range of partners involved in the governance of ECEC including, "regional and local administrations, social partners, professional organizations and parents associations" (Bennett and Neuman 427). and these partners are integrated in different ways across jurisdictions.

Analysis

These different ways of organizing ECEC partners have relevance for the *starting principles*:

1. The Scandinavian countries can provide some guidance on how to combine a national framework with spaces for community input. Bennett and Neuman explain that "in the Scandinavian countries, staff and parents are responsible for developing the detailed teaching programme and educational plan for their own care-centre, based on the national educational framework and the objectives of the local community" (428).
2. Participation by staff can also foster a sense of empowerment and control over their work and help them to become "reflective practitioners" (Bennett and Neuman 430).
3. The authors discuss several strategies aimed at building social inclusion. For example: "In the Netherlands and Belgium, parents from ethnic minorities have been employed in order to provide a link with the local community" and "[s]everal countries recruit immigrants – some of whom have trained as teachers in their country of origin – who will work as bilingual ECEC assistants" (433). It is important to tap into this community expertise, as long as it is properly valued.
4. Bennett and Neuman draw a clear connection between integrated systems and staff compensation and training: "Staff recruitment and training conditions depend to a large extent on the degree of identity which the ECEC sector has succeeded in forging vis-a-vis other educational sectors, and the links between the care role and the education function within the same sector … In the Scandinavian countries, early childhood facilities are considered to constitute a unified socio-education system for children from birth to the age of 6 and a social support system for their families. This explains the existence of a body of educators with a strong, unique identity. These educators are trained at university level and are seen as fulfilling a role that is different from that of teachers but just as important. However, in other countries the dichotomy between care and education persists" (Bennett and Neuman 429-430).

Marwell, Nicole P. and Paul-Brian McInerney. (2005). "The Nonprofit/For-Profit Continuum: Theorizing the Dynamics of Mixed-Form Markets." *Nonprofit and Voluntary Sector Quarterly.* **34. no. 1. pp. 7-28.**

Marwell and McInerney explore service provision in "mixed-form markets," which includes for-profit, non-profit and public providers. Using examples of community development corporations and non-profit technology organizations, they argue that there are three possible outcomes from a mixed-form: *displaced*, *stratified* and *defended* markets. In the first, for-profit providers can enter the market and push out the non-profits, or *displace* them. In the second, a *stratified market*, non-profits end up serving one segment of the market (usually the poor), while for-profits serve another (i.e. the wealthy). The final case is the *defended market*, where non-profits fight back against for-profits using fundraising, regulations, or claims of legitimacy and appealing to social values. The authors conclude that there is potential for non-profits and for-profits to complement each other in providing services (8).

Analysis

Marwell and McInerney's study speaks to two of the *starting principles* in particular: non-profit governance and social inclusion.

1. There is cross-policy research that affirms the importance of non-profit delivery. Marwell and McInerney indicate that studies on health care, as well as child care, have focused on higher quality in non-profit than for-profit services (8). One of the main reasons is that non-profits do not face profit constraints, and so there is less incentive to cut service quality (8).
2. The authors also describe a general pattern in mixed-form markets that is clearly familiar to the child care context in Canada. They explain that non-profit services emerge to fill an unmet social need. Non-profits can use a combination of money from donors, governments and private organizations to develop a service to meet this need. But once this service has been established, this process can also help to create a market for for-profit providers.
3. The above point relates also to issues of social inclusion because one theory says that often, the unmet social needs that are met by non-profits are the provision of collective goods to historically marginalized groups because government services are aimed at the 'median voter,' or the general population (Marwell and McInerney 8, 10), and not at the needs of subgroups.

Neuman, Michelle J. (2008). "Governance of Early Childhood Education and Care: Recent Developments in OECD Countries." In *The Routledge Reader in Early Childhood Education. Elizabeth Wood, ed. New York: Routledge.*

In her article, Neuman asks: "What are the roles of national and subnational governments, the private sector and other stakeholders – particularly teachers and parents – in making key policy decisions?" (163). Using data from OECD Thematic Review of Early Childhood Education and Care Policy, Neuman finds that, "[d]espite similar goals, governments have adopted very different strategies for ECEC *governance*, that is how nations allocate responsibility for decision-making and delivery within and across administrative departments, levels of government, and public and private actors" (165). She focuses on three governance issues: administrative integration, decentralisation and privatization (167).

Analysis

Neuman provides an excellent synopsis of why governance matters: "Governance is a critical component of an early childhood system, because it can determine whether or not services meet quality standards, are affordable, meet local demand, promote cost effectiveness and achieve equity goals. Governance can help ensure more coherent policy-making across government agencies, levels of government and programmes, making the ECEC system easier for families to navigate. Governance helps match the supply of programmes with the needs of different types of families and different geographical areas. In the absence of strong governance, some parents end up piecing together different ECEC arrangements with varying quality to meet their family's needs, while others fall through the cracks" (166). She also refers to "governance as the 'glue' that holds the pieces of the early childhood system together" (167).

Her observations on different governance strategies in OECD countries can help to further develop several of the *starting principles:*

1. For some countries, ECL is a legal entitlement in national legislation, including in Belgium, France, Italy, Netherlands, Denmark, Finland, Sweden (164).
2. Integration of early care and learning has been achieved in several countries: Denmark, England, Finland, New Zealand, Norway, Scotland, Spain and Sweden (168). The trend has been to house it in the education system (For instance, in 1996, Sweden moved ECL from the Ministry of Social Affairs to the Ministry of Education (Neuman 165). In integrated systems, there is a consistent policy from birth to 6, higher levels of staff training, good working conditions, low parent fees, less inequality in services (168). There are some concerns with this approach, notably the loss of ECE focus and fears of Schoolification,' but it might: bring more political and policy status; bring staff into powerful teachers' unions; help define ECEC as a public good and services as a right for children; highlight free services; facilitate a common curriculum; and lead to higher training (169).
3. Many countries continue to divide the administration of care and education including Australia, Belgium, Czech Republic, France, Italy, Netherlands, Portugal, USA. In these countries, typically children over the age of 3 fall under the Ministry of Education, and those under 3, Social Welfare or Health (Neuman167). Usually, the consequences of a split system are: contradictory funding and regulation and competing visions. Those services provided through Social Welfare or Health tend to have less staff training, lower compensation, higher fees for parents, but *full day* services, while those provided through Education have higher pay and training, are free to parents, with only part-day services (Neuman 168).
4. Privatization is also a trend in many countries, and is justified as providing parental choice, and increased quality through competition. The for-profit sector remains small in most of Europe, but is being employed to expand services more quickly, especially for diverse populations in the Netherlands and the UK. Most have quality standards for public and private providers in order to receive public funding, and Neuman argues that government regulation is needed for private providers (171-172). She looks to the US case where "[a]bout 90% of child-care services are privately operated centres or family child-care homes, and more than half of these operate for profit. There are no federal quality regulations, and the states are free to set their own standards. As a result, there are wide disparities in staff-child ratios, staff training requirements, and even health and

safety requirements. Some US states, for example, exempt religious school-based, part-day and family child-care providers from any government oversight" (172). Neuman does not address the concern that once for-profit providers receive public funding, they lobby for deregulation. She also does not consider the lack of democratic control for communities in for-profit services.

5. Neuman sees decentralization as a trend in many countries, such as the USA, Denmark, Sweden, and the Netherlands. This is not the case in all countries. Italy, Belgium and France have national regulations and inspections, but many are moving toward a reduced role for national governments in decision-making, regulation, steering, monitoring, evaluating, and greater flexibility at the sub-national level. She believes that decentralization can increase local democracy, reduce bureaucracy, and improve client-orientation by giving more say to staff and parents (170). Neuman posits that, "[t]here is a trend towards engaging a wide range of stakeholders in quality assurance and evaluation. For example, in Denmark, Norway, Sweden and parts of Italy, municipal pedagogical advisers work alongside teachers and parents to define programme goals and document their progress towards achieving them" (171). She adds that "[t]here is great variation in the extent to which parents are involved in decision-making. Denmark is an exemplar. Parents form the majority of the management councils for kindergartens and family day care and make decisions about staffing, curriculum and program organisation" (171). Neuman concludes that, "[a] common challenge for central governments is how to balance local control with the need to address equity concerns such as the limited access and quality in rural areas, inner cities and children in need of special support (low-income, minority and special education needs). Country experiences suggest that within a decentralised framework, localities need adequate funding and technical assistance to meet national goals and policy objectives" (170).

Petrella, Francesca. (2009). "Civil Society and New Forms of Governance: The Case of Childcare Services in a European Perspective." pp. 25-48.

Petrella outlines the range of governance forms in child care in Europe, specifically the role of public and private partners in implementing public policies. She shows that despite common objectives at the European level, there is significant variation in governance, policy, and service delivery, including individual and collective responsibility, public, nonprofit and for-profit, cash transfers, direct service provision, subsidize private services, family leaves, and different levels of social spending on families and children. Her particular focus in on the relationships between providers and users, which she maintains, is key to quality and governance (26). Petrella uses the concept of governance regime to refer to "the participants involved and their features, the public-policy instruments used to serve the public interest, the institutional forms of co-ordination and the interaction between actors within a public-policy network" (26-27). She introduced a typology of regimes based on level of inclusion of civil society in the process of service provision and public policy development.

Analysis

Petrella builds on a framework created by Enjolras, that identifies four types of governance: 1) *public governance* (there are only public actors or responsibility is delegated to third sector organizations with direct public funding); 2) *corporatist governance* (the public authority gives a monopoly to a third sector umbrella organization with public regulation and financing); 3) *competitive governance* (the market is involved, with regulation by public

authorities); and 4) *partnership or multi-actor governance* (various institutional and non-institutional actors are involved in the policy process, service provision and financing are provided by a range of public and private actors, with the partnership initiated by government. She adds a fifth type that she calls *civic governance*, where: multiple actors, mainly civil society, put forth social demands that are not well recognized by the public sector; the partnership is initiated by civil society; there is limited, project-by-project funding; civil society creates its own coordination bodies; and governance is often unstable. She describes this as a horizontal or 'bottom-up' approach to governance, that is self-organized. It can become more institutionalized. Petrella argues that the type of governance regime may foster or limit participation, and may encourage cooperation or competition.

Her *civic governance* type seems to best describe the current situation in Canada. Therefore, her analysis of the potential and challenges of this model are is significant to the *starting principles*.

1. Petrella notes that the models described above are ideal types and that most governance in Europe is a hybrid form. However, some countries fit better into some categories than others. For instance, in some countries, such as France, more top-down governance allows for few civil society actors to be involved in decision-making (39). Similarly, "the public governance regimes remain predominant in the Scandinavian countries, leaving little room for civil society organizations in governance structures" (45). The UK relies heavily on partnerships with non- profit and for-profit services purchased by public authorities. The emphasis is on the participation of disadvantaged groups, and while structures have been developed to coordinate policy actors, they lack decision-making power and funding (parallels to Canada). Other countries have partnerships that are more centrally directed. For example, in Germany, federal law makes it compulsory for municipalities to create childhood municipal committees with local institutional and non-institutional actors, there is a national legal framework and objectives, the subnational government (Land) can add its own add rules and objectives, and the municipality implements and finances services with Land and municipal funding. In Italy, since 2000, national law sets out objectives, the regions decide how to meet the objectives, and the municipalities implement child care services. "The national law also allows for the creation of municipal committees to develop their 'local social plans.' These committees involve, in varying degrees, civil society representatives, notably social cooperatives whose emergence was encouraged by a previous law" (Petrella 33). There are some places with more history of civil society participation in early childhood policy. The city of Frankfort has integrated parental organizations in child care since the 1970s. In the municipality, "questions concerning the management of places, the creation of new services, the integration of children from immigrant families, pedagogy and quality have been able to be discussed and negotiated through networks, work groups and regular meetings involving heads of the main private childcare services," but family associations and parents are not involved in this particular process (Petrella 41). In Marseille, Child Care Committees made up of neighbours, social workers, third sector organizations and institutional actors develop child care services in neighbourhoods (Petrella 41).
2. There are trends across all of the models toward decentralization and marketization. There is a history of third sector, religious organization service provision in Europe, especially in Germany, Belgium and France. Subsidized with public funds, most European countries have a growing role for the third sector and for-profit providers. The

share of the voluntary sector in child care spaces is increasing in Germany, Sweden, Belgium, France, Italy (Petrella 36). According to Petrella, the "associative sector is thus part of a dual process of diversifying supply: on the one hand, by default or 'delegation of public service', to make up for the lack of places in public structures and, on the other, by project, to meet emerging social demands" (36). The voluntary sector has introduced service innovations in hours, locations, populations served, parent participation, and inclusion of children with disabilities (36).

3. There are advantages and disadvantages to civil society participation. Petrella notes "the limits of participative dynamics" (28), including the reality that government policy is increasingly aimed at fostering competition between local actors, that local management can lead to territorial disparities (34).and that civil society are treated much more as service providers rather than as partners who participate in local governance structures and influence policy (34, 42-46). Thus, the 'participation in what?' question is central to thinking about community control.

4. Along with different governance regimes, there is also wide variation in goals that child care is expected to meet: promoting fertility, women's labour market participation, child development, poverty reduction (Petrella 30).

Taylor, Peter Shawn. (2006). *Child CARE, Improving Child Care Services for Canadian Families: Evidence from Canada and Around the World*. The Association of Day Care Operators of Ontario. Access at:
http://childcaretoday.ca/files/ADCO20child20care20paper_1.pdf

Taylor makes the case for a role for for-profit services, using Australia as an example (before the collapse of ABC). He also looks at Canada, the U.S., the U.K, Sweden, the Netherlands, and South Korea. In Australia, subsidies to for-profits allowed for rapid expansion of regulated child care services at a lower cost. Taylor argues that the private sector (both non-profit and for-profit) can address the slow expansion of services, and that the OECD recommended subsidies for the private sector to address expansion challenges (16).

Analysis

The models that Taylor discusses raise issues for the *starting principles* in several ways.

1. He discusses the British model, where in 2005, 85% of the child care centres were for-profit (Taylor 13). He explains that the "government also provides an entitlement of 12.5 hours per week for 33 weeks per year of free early education for all three and four year olds. This service is provided to parents who may choose their preferred facility, either for-profit or non-profit; the centre is then reimbursed by the municipal government. It thus operates as a voucher-type system" (Taylor 13-14). While these services are publicly funded, they do not meet the criteria of universality or quality. In her article, Petrella specifically mentions the quality and equality issues in the UK system (Petrella 35).

2. Taylor also claims that, "based on the fact that the British child care system currently has a 17% vacancy rate, this suggests that parental demands for space are being met" (14), which does not address questions of fees and access.

3. This article does help to get a sense of the role of the private sector (non-profit and for-profit) in a range of jurisdictions. He indicates that in Sweden, in 2004, 17% of children were in private child care, and that in the Netherlands, half of the 0-4 spaces are

employer-provided. Private, commercial providers also play a central role in South Korea for pre-Kindergarten and Kindergarten through Hakwons, or "learning places" (Taylor 16). However, he makes little distinction between non-profit and for-profit providers, and therefore does not shed much light on any governance differences.

4. But Taylor does link private service to values of responsiveness and social inclusion: "The entrepreneurial perspective of the independent child care operator means that those centres tend to be more responsive to the needs of parents in offering non-traditional services. This can include faith-based care, emphasis on certain aspects such as etiquette or an alternative educational focus, including Montessori, Waldorf or Reggio Emilia curriculum" (19).

Veenstra, Gerry and Jonathan Lomas. (1999). "Home is Where the Governing Is: Social Capital and Regional Health Governance. *Health & Place.* **5. pp. 1-12.**

Veenstra and Lomas consider governance in the area of health care. They note that in Canada, nine provinces have devolved responsibility to regional health boards, and therefore seek to explore different explanations for effective governance. Some of the possible explanations include organizational design, the quality and nature of information, and the social capital of communities. They argue that "social capital is a crucial element in local effective governance … [which] entails moving attention from the political institutions of health care to the poorly-understood interactional and participatory qualities of the community" (2).

Analysis

Their findings on the governance of health care are applicable to several of the ELC *starting principles*.

1. In terms of democratic, community involvement, Veenstra and Lomas explain that their "model of social capital describes the constructs of trust, commitment and identity, associational and civic activity and collaborative problem-solving skills and opportunities" (2).

2. The authors make some crucial points about the relationship between the state and social capital. They see a clear role for the state in supporting communities, arguing that "an effective government can contribute to and increase a community's store of social capital, by enlisting community participation and providing opportunities for network affiliations in people's lives" (9). They add that, "given adequate resources directed at the appropriate targets a society can 'purchase' social capital and its consequent benefits … The government might want to act as a catalyst for social capital, to provide support for programs that entice community members into interaction with one another, lower barriers among interest groups and ethnic communities and that allow individuals to learn about civic issues, learn to trust one another more readily and to develop the skills and commitment toward solving community problems in a collective manner" (Veenstra and Lomas 11). Not only is social capital necessary for effective governance, but public support is vital to the development of social capital and civic engagement.

3. They also emphasize the ways in which community engagement can break down hierarchical and paternalistic approaches to policy knowledge, and support policy formulation, while also engaging in some service provision. In the case of regional health boards, "service implementation and provision is collaborative problem-solving: a collaboration between community groups, voluntary organizations, individuals and

regional governments. The identification of solutions to meet community difficulties and needs is not only in the hands of the regional board, collaboration within the community and between it and the regional authority can bring about innovations that the regional legislators alone are not capable of producing" (Veenstra and Lomas 8).

4. They also link social capital with better coordination and integration of services because it helps to build a "common community-wide culture" (Veenstra and Lomas 9). They provide an example: "One Canadian province, Prince Edward Island, has decided to combine nearly all human services under one devolved governing structure. This combination may encourage interventions on community structure such as skills exchanges for seniors, programs for high school volunteers to visit disabled 'shut-ins', community daycare services, cooperative housing developments and so on. To the extent that these are not only facilitating and coordinating service delivery, but are also doing so in a way that encourages trust and community commitment among individuals and strengthens community opportunities for associationalism, civic participation and collaborative problem-solving, then effective governance as well as improved health and well-being are the potential outcomes of such social capital inducing measures" (Veenstra and Lomas 11).

5. Because of their focus on social capital, there are issues of equity and social inclusion that must be considered. The authors acknowledge that social capital can reflect or reproduce social divisions. This is especially important since they place a lot of emphasis on "trust in institutions" (5), which is clearly stronger in some communities than in others. However, they believe that trust can be developed (for instance, as seen above through public support for civic activity), and that " [a]ssociational activity can also serve to increase an individual's commitment to the larger community, if the people one associates with represent a broad spectrum of the community's disparate groups" (Veenstra and Lomas 5).

C) Feminism, Governance and Democracy

This final section considers some of the theoretical questions that are raised by various governance models – particularly in terms of women's equality, and the inclusion of Aboriginal, multicultural, and other marginalized groups.

Arneil, Barbara. (2006). *Diverse Communities: The Problem with Social Capital*. New York: Cambridge University Press.

Arneil provides a critique of 'mainstream' social capital research and theory, such as that of Robert Putnam. She argues that much of the work on social capital is based on a false sense of solidarity and problematic nostalgia and idealism about America's past that ignores the experiences of women and cultural minorities. Historically, the process of building social capital has excluded women, the poor, Aboriginal peoples, racialized groups, immigrants, people with disabilities, and sexual minorities, or acted as a means of discrimination, exploitation, and assimilation. Through (seemingly well-intentioned) social reform and religious organizations, and educational and social welfare projects, cultural minorities were often treated as "charitable projects" (Arneil 20).

Analysis

In the context of child care, it is important to keep in mind the central role that kindergartens and residential schools played in the past in fostering 'civilization' and cultural integration in Aboriginal and immigrant communities (Arneil 30). This has relevance for present-day trust in public institutions, but also those in the voluntary sector. Appeals to social capital and 'community' as the way forward tend to ignore the ways in which this can serve to reproduce inequality and to gloss over conflict and diversity. Other contemporary challenges that could be significant for child care are related to issues of faith-based services, low wages in the voluntary sector, and the offloading of state responsibilities onto overburdened communities, largely women. Therefore, Arneil's piece invites us to reflect on the *starting principles* from a number of angles:

1. The need to be aware that 'universal' ECL programs may be more readily appealing to communities who have had a more positive relationship with the state and public institutions in the past
2. The need to address potential sensitivies to both public and non-profit governance
3. The need to consider the difference between offloading responsibilities onto communities, and fostering their real participation in governance
4. The need to acknowledge that equity and social inclusion must be actively built and that by and large, they do not currently exist (for Arneil, this requires a rather centralized system of rights protection through courts)
5. The need to explore what inclusion means to diverse communities
6. The need to think about the value of secular vs. faith-based services
7. The need to compare the wages and working conditions in public and non-profit services
8. The need to define who we mean by 'community'

Fraser, Nancy. (2009). "Feminism, Capitalism and the Cunning of History." *New Left Review*. 56. pp. 97-117.

Fraser traces the history of the women's movement in the US in relation to 4 key characteristics of capitalism: economism, androcentrism, étatism, and Westphalianism (101-102). The notion of étatism is particularly relevant to the governance of child care (102). Étatism refers to the organization of welfare states based on bureaucratic forms and professional, technical expertise. The result, Fraser argues, is that, "Far from being empowered to interpret their needs democratically, via political deliberation and contestation, ordinary citizens were positioned (at best) as passive recipients of satisfactions defined and dispensed from on high" (102). Second-wave feminism developed a critique of étatism, based on concerns about *process*. Feminists sought alternatives to top-down, masculine forms of organization that emerged out of consciousness-raising groups and emphasized democratic (i.e. participatory, anti-hierarchical, grassroots) organization (105). This did not entail a rejection of the state, but rather "re-imagining the relation between state and society, they sought to transform those positioned as passive objects of welfare and development policy into active subjects, empowered to participate in democratic processes of need interpretation" (105). The goal was to make state institutions more accountable to citizens (106). Unfortunately, in unintended ways, the feminist critique of étatism has worked to reinforce Right wing, or neoliberal attacks on the welfare state and reliance on the voluntary sector to pick up the slack (111). Feminist notions of democratic control have been subverted to promote "individual self-help and community networking" (111). In order to avoid this convergence of feminism and neoliberalism, Fraser suggests that the answer "is not to dissipate, but to strengthen public power" through participatory democracy (116).

Analysis

Fraser has identified a central tension to be considered in child care governance: the desire to avoid top-down control without reinforcing neoliberal state retrenchment. She sees participatory democracy as the way forward. While she is not specific about what this would look like, Fraser provides an important framework through which we can assess the *starting principles*. For instance:

1. The principles seem to reflect Fraser's interest in balancing central authority (legislation) with democratic accountability (democratic, community-driven governance)
2. Fraser stresses the need to strengthen public/popular power. Perhaps the role of communities needs to be more explicitly laid out in legislation, along with other principles of universality, quality and public funding?
3. In some ways, Fraser's calls for participatory democracy (and the *starting principles'* emphasis on community control) do not resolve Arneil's concerns about diverse communities. There may be real conflict between local democracy and social inclusion

Huber, Evelyne and John D Stephens. (2000). "Partisan Governance, Women's Employment, and the Social Democratic Service State." *American Sociological Review*. **65. pp. 323-342.**

Huber and Stephens argue that social democratic governance is the most important factor in determining the public provision of social services (323). Of particular interest to this project, the authors outline two models of welfare state governance: Social Democratic (i.e. Sweden, Norway, etc.) and Christian Democratic (i.e. Italy, Germany, etc.). In the Social Democratic model, the governance of services through public delivery is maintained on the basis of equal social citizenship. As Huber and Stephens explain, "social democracy has promoted

state delivery (as opposed to simply state funding) of social services and goods because it believes that only public provision would ensure that all citizens have equal access to benefits of equal value" (326). For the Christian Democratic model, social service governance prioritizes community (non-state) delivery and values subsidiarity:

According to the principle of 'subsidiarity,' that is, the reliance on the smallest possible group that can perform a given social function, the state is called upon to perform only those functions that cannot be performed by the family or various voluntary communities, in particular, churches and church-related organizations. In addition, given the strong emphasis on the traditional family and the male breadwinner/housewife model, Christian democracy is reluctant to promote women's labor force participation, and thus also public services, such as day care, that might facilitate it (Huber and Stephens 326).

Analysis

The welfare regime literature is all about contrasting models, which help us to identify different ways of organizing public institutions. But are equal citizenship and subsidiarity necessarily opposed? Can the 'spirit' of subsidiarity be integrated into public provision? If so, how? Do the *starting principles* help us to answer these questions?

1. The call for legislation in the *starting principles* stems from notions of equal citizenship, but also establishes the conditions within which communities participate in local governance, allowing for a hybrid approach
2. In certain respects, Sweden and other Nordic countries have tried to integrate some level of 'subsidiarity' by devolving service delivery to the municipalities, indicating that there is potential to combine elements of both models. (It is questionable, however, the extent to which local communities have a say outside of the electoral process in the Social Democratic regimes)
3. Neither the Social Democratic or the Christian Democratic regimes are known for their accommodation of diverse communities. Perhaps in drawing from the 'best' of both models, the *starting principles* provides an innovative alternative
4. The Social Democratic model has gone the furthest in integrating early care and learning and in compensation and training of staff, which should be kept in mind when thinking about the essential aspects of the social entitlement model

Pacini-Ketchabaw, Veronica. (2007). "Child Care and Multiculturalism: A Site of Governance Marked by Flexibility and Openness." *Contemporary Issues in Early Childhood*. 8 no. 3. pp. 222-232.

Pacini-Ketchabaw draws from Foucault, who argues that governance, regulation, and discipline occurs not only directly from large state institutions, but also indirectly, through smaller organizations and interpersonal relations. (This is Foucault's concept of 'governmentality') Pacini-Ketchabaw argues that in this way, child care acts as a site of governance -- it governs all children and families. However, immigrant children are managed differently than others, as a discourse of multiculturalism is embedded in ECE. ECE embodies notions of "acceptance," "sensitivity," "tolerance," and "flexibility" that are central to multiculturalism policy and that act to regulate behaviour to "Canadian" cultural standards (227-229).

Analysis

Pacini-Ketchabaw raises some similar issues as Arneil, but applied more specifically to the case of child care. One of the lessons we should take from this article is that any model of ECL governance will have a differential impact on marginalized groups. If we apply this lens to the *starting principles*, it begs a number of considerations:

1. As seen with Arneil, multicultural communities have a different relationship to public services than majority cultural communities. For instance, Pacini-Ketchabaw explains that 'expertise in ECE' is read differently from in marginalized communities than in other communities, and is seen as another form of regulation and assimilation.
2. Not everyone has the same appreciation of "community-driven." 'Community' has varied meanings depending on one's social location. For some, it invokes notions of solidarity, participation and empowerment. For others, it brings up experiences of exclusion, conflict and control.
3. However, Pacini-Ketchabaw also notes that child care "can become a site for resistance" (Pacini-Ketchabaw 222). It might help to make the *advocacy* role of communities more explicit in the *starting principles* when referring to the role that communities can play in ECL.
4. On a related note, the author is making the case that multicultural discourse is used to regulate immigrant children and their families, pointing to the power that dominant cultures play in the realm of ideas and language. It is essential then, that the participatory values underpinning the *starting principles* are also applied to defining what social inclusion means, and how it is achieved, because these are contested.
5. It might also be necessary to define participation more explicitly, in a way that doesn't reinforce majoritarian dominance.

Rebick, Judy. (2009). *Transforming Power: From the Personal to the Political*. Toronto: Penguin.

Judy Rebick's book traces democratic movements and experiments around the world. She focuses on questions of political *process*, arguing that "change will come from the process of building power from the bottom up" (11). Drawing from the tradition of women's movements in the 1960s and 1970s, that emphasized the democratization of services through user control, she argues that participatory democracy is the only way to sustain alternatives to neoliberalism. One of the examples she explores is the delivery of social services through community organizations "called *missions* in Venezuela. They are a decentralized, democratic model for the delivery of social, health, and other community services, and they are highly successful" (48).

Analysis

Rebick provides some very interesting examples where participatory processes are being put into place that can inform our thinking on governance. However, there are also reasons for caution in some of her examples. For instance, in discussing Porto Alegre, Brazil, she notes that child care was identified by the community as a priority: "The PT, being socialists, believed in state-run child care, but they couldn't afford it. Community groups stepped forward and offered to house the child-care centres for a fraction of the price it would cost in the public sector … This compromise began to build trust" (40). It is problematic when the

primary motivation for community involvement is cost-saving, rather than democracy, and that cost-saving often comes at the expense of staff wages and adds to women's unpaid work. Therefore, in applying the *starting principles*, we should:

1. Emphasize that community involvement is about democratic control, not cost-saving. As seen earlier in the case of New Jersey, community-based services that are of high quality are no less expensive than public services. In fact, for communities to be substantively integrated into the governance of ECL, it will require additional resources to support capacity-building
2. While as seen with Arneil and Pacini-Ketchabaw, 'community' can be exclusionary, Rebick shows that participatory processes (like participatory budgets or community organizing) have served to engage traditionally marginalized groups – women, young people, indigenous people. Therefore, we should think of ways to link the *starting principles* of democratic governance and social inclusion more directly
3. Rebick also shows that valuing local, community knowledge can lead to better public policy : "What I have found, wherever I have looked, is that ordinary people, when they are given, or when they take, the opportunity, are quite capable of making good decisions – in many ways more capable than those who have the official positions of decision-makers" (42).

Comparing International Approaches to the Governance of Integrated Care and Learning Systems

	Strengths	**Weaknesses**
For-Profit ·South Korea	· rapid expansion · compatible with Canada's liberal (market-based) approach to social welfare	· lack of entitlement for all · economic growth as primary motivation · quality; low wages · accountability for public funds · little democratic control (i.e. location of services, fees) · regional disparities (i.e. urban/rural) · integration challenges; little coordination with school system · downward pressure on other family policies and lobbying by for-profit sector for de-regulation · public cost (not necessarily less expensive than fully public system)
Mixed-Delivery · Australia (post-1990s) · New Jersey · New Zealand	· rapid expansion · compatible with Canada's liberal (market-based & charity-based) approach to social welfare · can improve quality, especially staff credentials · inclusion - may provide specialized services for diverse communities · In NJ, expansion occurred by school district, not income, and there is some indication that the NJ approach is helping to extend ECE values and practices upward into school system	· quality; low wages · pay inequities between public and community-based providers · public cost (not less expensive than fully public system in NJ) · accountability for public funds; and/or burdensome accountability provisions · reliance on accounting and financial experts · system sustainability · regional disparities (across School Districts in NJ) · hierarchy of providers – public over community-based · integration challenges – division of care and learning; schoolification · lack of full-day, full-year services · low community participation · downward pressure on other family policies (i.e. maternity leave in Australia) by for-profit sector
Community-Based · Australia (pre-1990s) · Venezuela · Reggio Emilia	· can exist within a national framework (i.e. Australia, Venezuela) · community control; highly developed structures for participation · development of women's leadership; challenge traditional gender roles · inclusion – through non-profit organizations that have a tradition of serving, and working with, marginalized groups · builds on already-existing liberal welfare tradition	· lack of entitlement for all (i.e. Reggio, Australia) · regional and neighbourhood disparities (i.e. 'submissions' model in Australia) · roots in charity model - inclusion questions, especially for Aboriginal and multicultural communities · heavy reliance on women's un-and-under-paid labour · low service coverage (i.e. Australia) · division of care and learning · school readiness · can include for-profits
Public · Sweden	· universality; near-universal coverage, conditional funding · national legislation guarantees entitlement · gender equality, children's rights, labour market participation · high quality · training and wages · flexible service hours · well integrated with the school system · "ECEification" - extending child care	· remaining access gaps: immigrants, ESL · regional variation (fees, hours, public/private); urban/rural · little space for community participation · co-ops and unpaid work · concerns about schoolification & child outcomes measurement · quality - increasing child/staff ratios · growing private presence (non-profit and for-profit)