



Policy Brief No. 9

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**Reconciling Interests of Children and Economies
during the COVID-19 pandemic:
Learning from families in Brandon, Manitoba**



The Inclusive Early Childhood Service System Project (IECSS)

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The IECSS project is a multi-year partnership that seeks to understand how institutions are constituted in our society in order to organize children and their families. The project focuses on disabled childhoods in the context family, community and society.

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Introduction

There is a long-standing tension in the fight for universal childcare between arguments that it is necessary as an economic strategy and that it is essential as a strategy to support child development (Prentice, 2009). In the time of a pandemic, the values of a society are laid bare. This policy brief examines the communications from Manitoba's Department of Families as an example of how childcare and other early childhood education, care, and intervention services are understood. These directives are analysed using data from the Inclusive Early Childhood Service System (IECSS) project, a longitudinal study of families' experiences of early childhood that has been underway since 2014 in several communities across Canada. Since 2018, we have been interviewing families who have young children accessing disability services in Brandon, Manitoba, in southwestern Manitoba. Using existing interview data, we offer strategic recommendations from the perspective of families as services are reinstated following closures due to the pandemic. With a view to maximize inclusion as restrictions lift, and economies begin to re-open, this policy brief examines how early childhood inclusion is impacted in a time of crisis and makes recommendations that may be possible as services reorganize.

Manitoba's COVID-19 response

Since the outbreak of COVID-19, the Government of Canada and provincial and territorial governments, have been working to minimize the health, economic, and social impacts of this public health threat (Government of Canada, 2020). Focused on containing the spread of COVID-19, childcare has often been at the forefront of communications, with a focus on the needs of workers. The province of Manitoba has a long history of supporting early childhood development positioning them well to ensure childcare needs are met in the province. Further, the Child Care Inclusion Support program, in place since the 1980's to support the childcare sector, indicates that Manitoba should be prepared to support all families and their children (Government of Manitoba, 2013). Since mid-April some childcare centres in Manitoba have been opened to support essential workers (a group which has undergone changing definitions as the pandemic closures have continued). These centres have been operating at reduced capacity and with public health measures in place (Government of Manitoba, 2020).

Like governments across the country, the Government of Manitoba has been responding to the global COVID-19 pandemic with ongoing directives. In response to the local impacts of the pandemic, the Department of Families, which regulates childcare, social services and disability services, has been communicating these changes on a regular basis (Department of Families, 2020). From the outset, the priorities set out in these orders are consistent with directives from across the country that have prioritized

social distancing and stay at home orders. These directives are intended to stop the community spread of the virus. Plans to reopen the economy are underway, as Manitoba and other provincial, territorial and First Nations' governments are currently implementing a phased approach.

Why economics and child development are inter-independent interests

The communications related to childcare centres have focused on the need for care for children of healthcare and other essential workers. The need to protect childcare staff and children in these centres from infection, and the reality of childcare centres facing closure and financial difficulties because of the small numbers of children enrolled and reduced revenues are also a reality not fully addressed in the communications. During the pandemic there has been a maximum of 16 children allowed in centres serving frontline healthcare workers, a situation that is likely to continue for some time (Department of Families, 2020).

In Manitoba, many of the economic measures that have been put in place reflect austerity (Brown, 2020). Significant cuts to public services and reduced government spending have been implemented with an aim to manage provincial debt acquired during the health pandemic (Hajer & Fernandez, 2020). Austerity measures have been linked to increased rates of childhood poverty (Kaplanoglou & Rapanos 2018; Ridge, 2013). The effects of COVID-19 service interruptions will not impact families equally. Income, housing, employment, number of children in a family, along with disability experiences will all be factors in the

degree to which social disruption will impact families and children.

Recommendation #1:

Recognize the importance of childcare for children, not just their families and the economy. The developmental impacts of service interruption will be experienced differently across the population, with disabled and vulnerable children likely to have the greatest adverse effects of the disruption.

What Brandon families can teach us

In Brandon, like much of the country, only a portion of children attend centre-based licensed childcare. There are childcare spaces for between 17.8% (age 0-12) and 23% (age 0-5) of children in the province (Childcare Resource and Research Unit, n.d.). The childcare shortage has continued during the pandemic. There have not been enough spaces for all of the workers who have applied for spaces, and so the government has also allowed ECEs to open their homes to provide care for essential and frontline workers. Childcare subsidy and spaces are commonly reserved for families who are working. The need for childcare spaces to get families working will be very important as economies reopen, but our research also indicates that not every childcare centre will accept or is willing to support all children.

The childcare spaces that are open need to ensure that all children have equal opportunity to be in those spaces, as new

restrictions and policies are implemented. While childcare has been opened, most of the other programs that serve children and families with disabilities, including developmental services, case management, autism programs, resource support and assistants have all been deemed non-essential. Prior to COVID-19 we heard that some childcare centres were better equipped to support disabled children.

Historically, workers and programs that serve children with disabilities have been underfunded (Seiff, 2019). In the current economic climate, childcare is being recognized for its central role in getting families back to work. However, childcare does not solely serve the economic interests of a society. It is also important for children. In Manitoba, the Child Care Inclusion Support Program is designed to support all childcare centres, but our interviews suggest that some childcare centres and early years programs are more actively supporting families. Further, most families have connections with multiple programs such as speech and language, healthcare, and family support programs.

In our interviews with families from Brandon, we found that for many children, childcare and other early years programs were a crucial site for children's development, particularly for language and social development. Childcare alone, however, does not address early childhood education and family needs. In addition to childcare, the system of early childhood services includes a standard set of interventions that families must work to gain access to, and which follows a normative pattern that sets up families to enact a developmental approach that may or may not fit with their worldview (Underwood, Frankel, Parekh, & Janus, 2019). For this reason, it is important

for families to have access to community supports that align with their worldview. Our interviews indicate that this is of particular importance for Indigenous families, and families with disabled children.

Recommendation #2:

Recognize that the early childhood education and care system is made up of more than just childcare. Critical to this system is preschool, family support, home visiting, and early intervention programs like speech and language and occupational therapy. As a result of the pandemic, many of these programs have not only stopped in-person service but the waitlists and intake processes have also been halted, so existing service delivery models must immediately be reassessed.

than families in urban centres. Health care professionals may also be asked to travel to multiple rural areas once non-essential services are reopened, putting both families and healthcare workers at risk. This service model means that rural families will need to travel to urban centres, in this case Winnipeg, or as our interviews indicate even outside the province for specialist appointments that prior to the COVID-19 pandemic were deemed necessary for diagnoses that were used to determine access to services locally. For some families, these delays may mean that they do not access these services at all, or that they are less effective, given the quick pace of development in early childhood. These effects are specific to rural communities and have a disproportionate impact on Indigenous communities.

Learning from disabled childhoods

People with disabilities are particularly vulnerable at this time because they may have underlying health conditions, and they may face discrimination in terms of access to health services (Sisti, Stramondo, & Shaul Bar Nissim, 2020). The rural service delivery model that covers most of Manitoba, including Brandon, requires many families to travel to access specialists and other health services. For many families this can result in a backlog of appointments and care.

Given the waitlists to get assessment prior to COVID-19 there is also likely to be an impact on who is gaining entry to this system. Further, the service delivery model requires families living in rural areas to travel more

Recommendation #3:

Recognize the disproportionate risk associated with the pandemic closures and reduced services for children who are accessing multiple services. These risks include disruption that could impact children's development, additional travel for families accessing services outside of their community, and risks associated with face-to-face contact with multiple professionals as services return to in-person models.

Conclusion

Worldwide, communities are experiencing health, economic, and social threats related to COVID-19. In Manitoba, the province-wide state of emergency under the Emergency Measures Act was declared on March 20, 2020. Since that declaration,

services have adapted to meet public health orders. Childcare services have been rapidly responding to changing health directives and communications from the Department of Families. This highlights how childcare affects multiple domains including economic, workforce participation, healthcare, and disability services. Our interviews indicate that the organizing of these services, into essential and non-essential, rural and urban, mainstream and disability focuses, at the provincial level affects communities, families, and children.

The pandemic has exacerbated the tension between childcare as an economic strategy and childcare as an essential strategy to support child development. The reopening process now is an opportunity to reconsider and refocus directives on the importance of childcare for children, not just their families and the economy. As services shifted online due to social distancing directives, there are now important re-considerations that could be immediately put in place that include flexible service delivery models required to adequately service rural areas. Moreover, family perspectives emphasize opportunities to maximize inclusion and to pick up on services deemed essential prior to the pandemic.

Existing programs could now be enhanced, not reduced, to more effectively meet the dynamic needs of children and their families. What we have learned from families in Brandon, what we learned during service reductions, closures, or alternative delivery models, are valuable insights as services now reorganize. We see reopening as an opportunity to adjust and adapt to our “new normal” and orientate services with renewed intentions and focus. As we approach the summer months, families already begin to think about the fall, which for many means

transitioning into school. How schools will operate remains unclear, but we do know for those children with disabilities beginning kindergarten, families have been given the message that early years programs are critical to success in the school years. As a longitudinal study, we are fortunate to have the opportunity to continue to connect with families through this dynamic situation.

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