The COVID-19 virus has changed the channel on child care. No longer a private responsibility borne largely by mothers, it is a social one vital to all those parents who make up the army of first responders in a time of crisis.

Suddenly governments have found money to keep child care centres going around the clock, 7 days a week. First available to primary health care providers, eligibility has been expanded to personal service workers, grocery clerks and food handlers, cleaners, sanitation and transit workers. The irony is that many parents whose income and work schedules eliminated any consideration of formal child care are now first in line. Moreover they, and the people who look after their children, are deemed important enough for a pay hike resembling a decent wage.

As governments put out the call for emergency care, child care operators were not uniformly ready to answer. The City of Toronto was up first, able to choose from its cache of public child care centres for the most appropriate facilities, in the best placed locations. Trained staff were available to keep operations going. The city’s protocols for delivering child care during a pandemic were in place, and were snatched up by child care providers across the country. Toronto’s publicly-operated child care was emergency ready, while many other jurisdictions struggled to find space and staff. In some regions officials out of necessity turned to schools or setup their own temporary centres. Elsewhere large commercial chains like Wee Watch and Kids and Company were selected to fill the breach. Undoubtedly many community providers are making stellar contributions. But these efforts needed to be augmented by significant government action.

Now comes the new urgency. Once the immediate health crisis has passed and restrictions are softened, child care must be readied to do its part to re-energize the economy. It won’t be back to normal care; not until a vaccine is universally available and the most optimistic projections put that at least 18 months out. In the interim the protocols in place for emergency care will continue to apply, including limits on enrolment, reduced ratios, and heightened cleaning and personal hygiene protocols. Educators will need support to adjust to a pandemic pedagogy which necessitates new ways of delivering inquiry-based learning, limits on child, educator and parent interactions, as well as restrictions on group play and playground access and activities. Needless to say, these will tax both the financial and organizational capacity of child care operators.

This is being written amidst reports of children and staff members testing positive for COVID-19 in emergency child care centres. Like all first responders, child care staff work in high-risk settings. It
is not possible to social distance from small children. Unlike many front line workers, these educators do their jobs without the benefit of protective equipment. They are true heroes.

There is no suggestion that the infections occurred because something or someone went wrong. Rather this is the insidious nature of COVID-19, heightened in an environment where one the most at-risk groups, the children of essential workers, congregate. The goal is to reduce opportunities for transmission but no one, and nowhere, is risk-free. Yet if the virus can make its way into well-resourced facilities with fully trained staff, consider the chances for transmission in low-capacity, under-supplied centres where the majority of staff lack training. This speaks to the extreme care officials must take as public health orders are loosened.

But parents cannot hold the liability for child care´s safe operation, nor for its survival. This will depend on public investment, public management and, enhanced public delivery. Child care´s pandemic transition demands a sophisticated public infrastructure to ensure the safety of children and staff. Maintaining smaller group sizes of children requires a doubling of the workforce, in a sector where educators are already in serious short supply. Public investment will need to be big; bigger than any amounts advocates ever imagined. And if the public is to pay, it should have a real ownership stake in child care.

The chronic weakness of private and community care already indicated a growing need for public leadership. Calls to bail out flailing programs and abandoning them to a financially precarious, virus laced environment aren´t reasoned. A bail out to pre-pandemic care is a return to low paid, largely untrained staff, high parent fees, poor access, questionable quality and a growing commercial presence.

This virus has exposed so much of what is wrong with how we treat our young, elderly and vulnerable and the workers who care for them. Governments from coast to coast acknowledge they need to do better. The child care Canada needs now requires a public response that is widespread, urgent, and comprehensive.

Moving from the pre-viral melange of market programs to a public system is doable and we have models and tools to draw on.

As mentioned, the City of Toronto has a robust system of public child care that could readily scale up to transition existing child care providers under its management.

The District of Rainy River has already ended its contracts with child care operators and is taking over delivery to better address quality and access issues.
Schools of early childhood in post-secondary institutions are natural places for child care, and are needed to prepare educators for the new pandemic classroom.

*With our Best Future in Mind*, the 2009 blueprint for full day kindergarten in Ontario, also outlined a future where schools took responsibility for the education and care of kindergarten and school aged children while municipalities oversaw a mix of public providers including municipalities, school boards and post-secondary institutions meeting the care needs of younger children.

Quebec’s centres de la petite enfance and PEI’s early years centres are examples of public management where the province sets salaries, fees, curriculum, staff training and program accountability. These models were readily put in place and remain popular with families and educators.

In 2018 the Ontario government was poised to provide free child care for all children from 2.5 years and a living wage for educators. The plan died with the election, but the policy work has been done and is ready to go.

In addition, there are the bilateral early learning and child care agreements already in place between the federal and provincial and territorial government. Fortuitously they are now up for renewal. We can draw from a precedent in health care which provided a federal infusion to provinces and territories providing they reorganized their health systems to better meet outcomes. Child care is ripe for a similar approach.

Amidst the horror of this pandemic it may seem incredulous to say child care’s time has come. Yet when no longer seem as a cost, public child care is positioned to tackle inequity, disadvantage and social exclusion as it drives recovery and growth.