LOW-INCOME MOTHERS, PROVISIONING, AND CHILDCARE POLICY:
A VISION OF SHARED CARING

by

Judy Marie Cerny

A thesis submitted in conformity with the requirements
for the degree of Doctor of Philosophy
Factor-Inwentash Faculty of Social Work
University of Toronto

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2009

Abstract

This research examines how childcare policy in Ontario, Canada assists and constrains low-income urban women’s strategies of provisioning for their children. Childcare policy refers to the range of programs that assist families in reconciling paid work and parenthood. In Ontario, Canada, these programs include childcare fee subsidies, tax deductions, parental leave policies, child benefits/allowances and a program regulating live-in caregivers. Provisioning is used to capture an array of daily work-related activities (e.g. paid, unpaid and caring labour) that mothers perform to ensure their children’s survival and well-being. The qualitative study, based on individual semi-structured interviews with 20 low-income mothers living in an urban community, found that women carry out various activities in provisioning for their children. Some of these are familiar and visible activities such as providing domestic
caring labour, engaging in the labour market, and undertaking volunteer work in the community. Others are less visible tasks such as sustaining their health and that of their children, making claims/asserting their rights, and ensuring safety. Low-income urban mothers provision under numerous constraints. A continuous shortage of money and childcare issues are at the core of these constraints. The study also found that the mothers encounter a variety of barriers in the community, such as a limited availability of social and community services and a high level of violence/criminal activity in their neighbourhoods. Issues related to poor health, an inadequate diet, or the necessity of caring for children with special needs further constrain women’s lives. Limited English language skills, racial barriers, and the struggles of adapting to a new country add to the multi-dimensional barriers facing low-income urban mothers. The research indicates that mothers use a variety of strategies to counter these barriers; however, these strategies cost women in terms of their time as well as their physical, mental and emotional energy. Childcare policy assists to a certain extent by providing some support to low-income mothers. Enhancements to the existing policies have potential benefits; however, they are like patches on a leaky bucket. Ultimately, the bucket needs to be replaced with a new way of envisioning family responsibilities, work and childcare.
Acknowledgements

It takes a village to produce a dissertation. I would like to thank:

- Dr. Sheila Neysmith, my thesis supervisor, for being an outstanding teacher and project manager. Sheila’s contemplation, feedback, encouragement, patience, sense of humour and prodding when needed, were truly invaluable.

- My committee members: Dr. Linda White, Dr. David Hulchanski, Dr. Donna Lero and Dr. Ramona Alaggia — for reflection, encouragement, and thought-provoking feedback.

- The twenty mothers who shared their provisioning experiences.

- Norma Wade for helping to recruit the research participants and Rosalyn Miller for her interest in the project.

- Christa Freiler and Dr. Patricia Evans for inspiration.

- Dr. Marge Reitsma-Street, Dr. Stephanie Baker Collins, Dr. Elaine Porter and Dr. Sandra Tam for mentorship and encouragement.

- Andrew Mitchell for statistical research; Katherine Partridge for editing; and Dale Lewis for transcription.

- Dr. Andrea Daley, for fun and friendship as we walked the journey together.

- Marie Cerny, for motivation, encouragement, faith, and practical help.

- Erica Cerny, for jokes and songs.

- My children — Monica, Alison and Nicholas — for warm smiles, encouragement, and allowing me to experience the act of provisioning.

- Lastly but most importantly, my husband and life partner, Dr. Bill Tassie, for provisioning with love, patience, and a sense of humour. And for planning much-needed holiday adventures during the course of this project.

I would like to acknowledge the financial assistance for this dissertation project from the Social Sciences and Humanities Research Council of Canada. I am also grateful for the encouragement from my two employers over the course of my PhD studies: the Government of Canada and the Province of Ontario.
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Chapter 1: Childcare is a Vital Yet Unresolved Policy Issue

1.1 Canada Ranks Last Again and Again

“...In 2004, the OECD ranked Canada last among developed countries ... [and] Canada tied for last place in the December 2008 UNICEF report card on childcare and other family support programs.” (CCCAC, 2009)

Canadian childcare policy has long been the subject of national and international criticism, and the literature addressing this well-deserved criticism is extensive (Broad & Foster, 2003; CCCAC, 2004 and 2009; Cleveland & Krashinsky, 2001; Friendly & Rothman, 1995; Jenson & Sineau, 2001; Mahon, 2000 and 2002; McWatt & Neysmith, 1998; Prentice, 2007; OECD, 2004a and 2004b; UNICEF, 2008; White, 2002). Canada has been “repeatedly chastised for its failed childcare policies and their impact on women’s equality and healthy child development” (CCCAC, 2009).

One important element of childcare policy is a universally accessible childcare system. The struggle for such a system surfaced in Canada in the 1960s and 1970s and continues to be an unfinished story (Mahon, 2000). However, a system of universal, accessible, and high-quality childcare is but one element of a comprehensive childcare policy. An all-inclusive policy must also give thoughtful consideration to the role and value of women’s caregiving work. Despite nearly three decades of debate, Canada has yet to develop a sound and comprehensive policy, and the debate continues unresolved.
1.2 A Vision of Shared Caring

“There’s a hole in the bucket, dear Liza, dear Liza,
There’s a hole in the bucket, dear Liza, a hole.”
(Traditional children’s song)

Childcare policy in Canada, such as it is, can be portrayed as a bucket of federal, provincial, and municipal programs designed to assist parents in reconciling their earning and caregiving responsibilities. But the bucket is filled with holes. In the popular children’s song, the bucket cannot be fixed because it is caught in an infinite loop. In the end, water is needed to fix the leaky bucket — which cannot carry water because of the holes — which cannot be fixed without water. Similarly, while childcare policy can be patched in the short-term by fixing some holes, in the end a new envisioned way of understanding and supporting families is needed.

Envisioned is a childcare policy that is based on shared caring — shared between both parents, and between the state and parents. This vision is a childcare policy that acknowledges the benefits of investing in children and their families; and a policy that recognizes the dual earning and caring responsibilities of both women and men (Kershaw, 2005; Meyers & Gornick, 2008; Neysmith et al., 2009).

Childcare is a vital policy issue to Canadian families. It is important for several reasons: it addresses issues of children’s well-being, the precarious nature of the economic security of mothers, and the barriers faced by parents in their attempts to reconcile their earning and caregiving responsibilities. These three factors have an
acute impact on families with low income, yet despite its social and economic significance, Canada’s policy on childcare has abandoned low-income families.

1.3 Childcare Policy Abandons Low-income Families

Like childcare, poverty has been a central issue in Canada for decades, yet policy development on this matter has also been elusive. When the federal government retreated from funding social programs in the 1990s, some of the consequences included visible social crises, such as homelessness. Less visible but equally significant is the crisis of the number of children growing up in low-income families. In 2006, the after-tax rate of child poverty was 11 percent — the same as the 1989 rate, when the House of Commons unanimously resolved to “seek to achieve the goal of eliminating poverty among Canadian children by the year 2000” (Campaign 2000, 2008). The consequences of policy that fails to adequately support low-income families with children are numerous.

Low income is a risk factor for a range of social problems facing children and their parents. Children growing up in poverty encounter many obstacles, as highlighted in a 2008 UNICEF report:

________________________

1 The before-tax child poverty rate also remained essentially the same in 1989 and 2006 at rates of 15.1 percent and 15.8 percent respectively.
“It is a consistent finding of research, in many different countries, that poverty in childhood is associated with negative outcomes in adolescence and adult life. More than any other variable, it is low family income that is the most reliable predictor of educational, psychological, and behavioural problems.” (UNICEF, 2008:28)

With regard to their parents, a 2009 Statistics Canada study reported that low income increases the risk of psychological distress. Compared to their higher-income counterparts, low-income families have fewer resources with which to cope and mitigate the negative effects of stressors, such as marital conflict, living in a neighbourhood that requires heightened vigilance because of crime, or inadequate resources to meet the demands of work and life (Orpana et al., 2009). Mothers living on low incomes routinely make personal sacrifices for the well-being of their children, such as compromising their nutrition to feed their children (McIntyre et al., 2003). Low-income mothers on social assistance often depend on multiple government programs; thus, they have to undertake additional tasks in order to deal with the reporting obligations and at times contradictory program requirements of a range of programs (Cumming & Cooke, 2008).

Having a low income is an obstacle to social inclusion and makes the daily task of survival arduous and stressful. External barriers such as a lack of transportation prevent low-income families from participating in economic and social activities (Jones et al., 2008). Further, low-income families in Canada have limited access to formal childcare services, and children from less-privileged families are less likely than their more affluent counterparts to be in childcare services (Japel, Tremblay, & Côté, 2005; Prentice, 2007).
1.4 A Research Contribution

This doctoral thesis is about childcare policy and low-income mothers in Toronto, Canada. The research is relevant to social work in both policy and practice areas. Issues of poverty, income security, and gender inequity have been and continue to be central to social policy debates. Also, there is a need for social workers to understand the realities of the people in whose lives they have been trained to intervene — to gain a better understanding of the problems facing people who are part of vulnerable and marginalized populations. The importance of this understanding and the role of social workers in effecting social change have been explored elsewhere in the literature (Carniol, 2000; Wharf, 1990). Regarding low-income mothers in particular, it is essential that social workers and policy makers understand the barriers that these women face, the strategies that they use, and the day-to-day work that they perform.

This dissertation research builds on the existing body of literature about low-income mothers and contributes to the collective understanding of the dynamics around low-income mothers and childcare policy. Campbell (2006) argues that "while it should be meant to promote re-entry into the labour force for women who seek this path, a national childcare system must also place appropriate emphasis on the labour of women who undertake the care of children" (Campbell, 2006:221). My research advances this call to emphasize and understand women’s caregiving responsibilities for their children.
The thesis is organized around three main concepts: the provisioning work that low-income mothers carry out; the barriers that low-income mothers face and the strategies they adopt to meet these constraints; and the extent to which childcare policy impedes and supports low-income mothers. The purpose of my research is twofold: first, to examine how childcare policy assists and constrains low-income urban mothers’ strategies of providing care for their children and, second, to document the various types of provisioning activities that these women carry out for their children. Provisioning (described in more detail in Chapter 3) was used to capture a broad range of work and work-related activities that include paid, unpaid, and caring labour. It is “the daily work performed to acquire material and intangible resources for meeting the responsibilities that ensure the survival and well-being of people” (Neysmith et al., 2009).

Chapter 2 of this thesis defines childcare policy and describes the patchwork of programs that constitute the policy. This chapter also explores childcare policy elsewhere, including the approach in the province of Québec and in other countries. Theoretical perspectives on childcare policy are presented in Chapter 3. This includes an examination of the discourse surrounding this policy issue, namely gender equity, child development, and the tension between supporting mothers as earners versus as carers. Chapter 4 outlines the research method used in this study. The research findings, based on interviews with 20 low-income mothers, are presented in chapters 5 (Low-income Women and Their Provisioning), 6 (Barriers to Provisioning and Women’s Strategies) and 7 (Experiences with Childcare Policy). The thesis concludes with a summary of key findings and policy implications discussed in Chapter 8.
Chapter 2: Childcare Policy in Canada and Beyond

The childcare policy debate fits within a multi-dimensional and a multi-disciplinary framework. It encompasses the dimensions of gender equity, child development, and the family-employment nexus. The debate is taken up in various disciplines — economics, political science, women’s studies, social work — and childcare policy falls under the broad umbrella of family policy. I will present perspectives from these various disciplines in this chapter as I examine childcare policy in Canada and beyond.

2.1 A Broad Definition of Childcare Policy

An understanding of childcare policy calls for a definition of the two components of the term: childcare and policy. Childcare is commonly characterized in reference to non-parental care, especially in sectors such as the early childhood education field, childcare advocacy organizations, or in provincial/municipal governments. For example, a 2006 Statistics Canada report entitled Child Care in Canada illustrates the way childcare is commonly viewed as non-parental care. The report focuses on the childcare experiences of children aged six months to five years between 1994 and 2003 but examines only non-parental care. Childcare is frequently coupled with the concepts of early education or early learning, hence the commonly cited terms ‘early childhood education and care’ or ‘early learning and childcare’. This union of education and care is discussed in Chapter 3.
Sonya Michel (1999) argues that childcare needs to be defined as broadly as possible because of its many forms. Nevertheless, she too limits her definition to “the care of children by someone other than their parents, whether in an institution or in some sort of informal or domestic arrangement inside or outside the home” (Michel, 1999:4) and concedes that even the term ‘childcare’ cannot completely describe the many programs, institutions, and private arrangements that parents use to care for their children.

In this dissertation, I define childcare quite simply as the care of children — regardless of whether the care is provided by a parent or a non-parental caregiver. This definition facilitates the capture and analysis of the complex issues that stem from the notion of childcare — issues that go beyond simply non-parental care and are especially relevant to low-income families.

2.2 **Canada’s Childcare Policy: A Course of Action and Inaction by Government**

Childcare policy in Canada is referred to as a never-ending story (Mahon, 2000), a canary in a coal mine (Friendly, 2001), and a patchwork of programs (CCAAC, 2004). Some argue that childcare policy in Canada is non-existent (Broad & Foster, 2003). But Canadian childcare policy does exist, albeit not as a single program or framework, or in a formal, official policy document. Pal (2006) defines policy as “a course of action or inaction chosen by public authorities to address a given problem or interrelated set of problems” (Pal, 2006:2). An important aspect of the definition is that it refers to *inaction*, as well as action, on behalf of public authorities. Pal (2006) explains that
policy as *inaction* assumes that the policy issue is one which would have entered the minds of most policy-makers and is an issue that ought to be addressed; thus, the absence of action can be seen as policy choice.

Despite its unofficial and patchwork nature, Canadian childcare policy is experienced by parents and children in a concrete way, and it substantially impacts their lives. It is problematic in several aspects: The cost of high-quality childcare is onerous; there is a severe shortage of childcare spaces; and there is an inability to monitor quality of care since most children are cared for in unregulated and informal settings. Equally problematic is that mothers’ caregiving duties in relation to childrearing are neither recognized nor compensated. This is the experienced, or realized, policy — and however problematic it may be — it is Canada’s childcare policy.

A final point of clarification regarding my definition of childcare policy relates to jurisdiction. The research presented in this dissertation is situated in Toronto, the largest city in Canada and located in the province of Ontario. Since childcare policy in Canada involves a mix of federal, provincial/territorial, and municipal/regional programs, I refer to federal (i.e. Canadian) childcare policy as well as provincial (i.e. Ontario) and municipal (Toronto) policy. All three levels of government play a role in the lives of the women who were the research participants in this study.
2.3 Goals of Childcare Policy

“Whether as an explicit goal or as an unintended by-product ... public early childhood education and care has significant but largely overlooked implications for several forms of inequality, both across families and between women and men.” (Meyers & Gornick, 2003:380)

Childcare policy, like many other social policies, has to address multiple and conflicting goals (Pal, 2006). Thus, the articulation of goals and objectives is the most controversial part of policy development (Freiler et al., 2001). The issue of childcare is no exception, and addressing the goals and objectives of childcare presents a potentially contradictory dilemma. Jenson & Sineau (2001) identify three goals of social programs related to childcare: to redistribute the risk of differential needs for care (e.g. family policy redistributing the financial burden of raising children); to develop programs that seek to improve the quality of care (e.g. by providing early childhood education or regulating service providers as well as by professionalizing care); and to reduce dependence and sustain autonomy (e.g. maternity/parental leaves permit women to reconcile work and family responsibilities so that they do not have to trade away their income in order to raise a family). A similar view is presented by Beach (2001), who identifies four objectives of childcare policy: to support the optimal development of children; to support the labour force participation of parents; to support and strengthen the parenting role; and to provide additional resources and supports for children living with conditions of risk (Beach, 2001).
The goals of childcare policy described above and other goals frequently cited from the fields of social justice and gender equity can be summarized as follows: to reduce and prevent poverty; to advance gender equity; to support families with children; to improve the well-being of children; to promote equity and redistribution among families; and to promote labour force attachment. With the exception of the last point relating to the labour force, there is broad agreement that these are appropriate goals of childcare policy. The issue of labour force attachment has been the subject of some debate, which I outline next.

Social and family policies have a strong employment focus in many countries (OECD, 2005). There are numerous reasons for encouraging women to enter the labour market. In addition to gender equity goals and the satisfaction that comes from some forms of employment, there are the issues of rising divorce rates and the financial struggles of single mothers, not to mention an ageing population and the need to maximize the number of working-age adults.

Maternal employment is an important source of economic support for families. Research suggests that measures aimed at facilitating the labour market participation of mothers and increasing their employment and earnings capacity are essential ingredients of any successful policy aimed at reducing poverty rates (Kamerman et al., 2003). Since access to the labour market is generally considered to be an effective way to bring mothers and children out of poverty, the policy focus in Canada has been on increasing access to regulated childcare. Susan Prentice (2007) summarizes this
position when she states that “secure and affordable childcare enables parents to work or study. When parents, particularly mothers, participate in paid labour (or prepare for paid employment through education, training, and skills development) family income rises and child poverty falls and/or the depth of poverty decreases” (Prentice, 2007:60).

The focus on paid work also fits with the trend of individualism. Paid work is, from a social perspective, highly visible compared to household, community, and voluntary work. The growing status of paid work has resulted in the relative degrading of caregiving and voluntary work, and this relative degrading has hurt the gender balance because unpaid work is largely done by women and does not bear the same social status as paid work (Ghysels, 2004).

The goal of labour force attachment, however, is questionable. First, it often channels low-income women into ‘dead-end’ jobs with inadequate wages and working conditions. David Blau (2001) argues that childcare policy should be neutral with respect to employment because, in his view, the focus of childcare policy should be on quality rather than employment. While Blau's (2001) main argument centres on the lack of quality childcare and the reasons behind it, he contends that the state should not be subsidizing the childcare costs of two-parent, middle-income families and that, for single mothers, providing financial assistance with the costs of raising children is more helpful than promoting employment.

Second, promoting maternal employment requires a cluster of policy interventions, including higher wage levels, income transfers to supplement low wages
and childcare services, along with comprehensive parental leave policies (Kamerman et al., 2003). Unfortunately, many of these programs and services have not been made available to Canadian women or are provided at inadequate levels (Esping-Andersen, 1990).

Third, the greatest challenge facing mothers who engage in paid work, either by choice or by necessity, is finding time to take care of all the responsibilities that accumulate each day. Women have to adjust their responsibilities by doing less housework than they would do if they were not working, or buying prepared meals, or sleeping fewer hours. If they are able to, they may hire someone to help with at least some of the domestic tasks, but this is only an option for higher-income families. Nevertheless, many responsibilities cannot be paid for, either because it is not possible for someone else to do them or because the mothers prefer to do the tasks that relate to children themselves (Clarke-Stewart & Allhusen, 2005).

2.4 Policy Principles

A balanced childcare policy framework reaches several important goals that simultaneously support families, reduce gender inequalities, and address family poverty. It is based on the following three principles: responsibility for children should be shared between parents and the state; responsibility for children should be shared between parents; and children must be seen as having a distinct claim on the state’s resources (Eichler, 1997; Freiler & Cerny, 1998; and Kitchen, 1995).
Responsibility for children should be shared between parents and the state

The tension between considering children as a private consumption decision versus children as a public good is alive and well in Canada and is reflected in childcare policy. Parents want control over their own childrearing and, in conjunction, a segment of the population resents the notion of collective responsibility for someone else’s children. Children do not, however, live in isolation, and they grow into active members of a community. Society has a responsibility to make a contribution to both the direct costs (clothing, feeding and housing) and indirect costs (reduced parental earning ability) of raising children. If children are thought of as a public good, it is understood that the decisions parents make about childrearing and the resources they have to devote to the job have social and economic consequences for everyone (Eichler, 1997; Folbre, 1994; Novick & Shillington, 1996). Kitchen (1995) argues that behind the idea of supporting children with tax dollars lies the implicit agreement of a mutual obligation among generations. By spreading consumption costs among households over time so that childless persons as well as parents contribute to the cost of other people’s children, the retired population will be assured that their pensions will be paid. Further, caring for dependants (such as children, the disabled, or elderly parents) is seen as qualitatively different from general domestic labour, such as housework, because it is socially useful and benefits everyone.
Responsibility for children should be shared between parents

Both parents must be able to combine work and family responsibilities over the parenting life cycle. Parents should not have to choose between earning an adequate living and spending adequate time with their children. Public policy could contribute to the assumption of greater responsibility for men by providing better remuneration for caregiving work, and workplace rules should encourage men and women to combine caregiving and market work (Folbre, 1994). By supporting both men and women in their caregiving and nurturing roles, we take a step closer to universalizing caregiving and inducing men to become more like women are now (Fraser, 1997; Kershaw, 2005). When men assume their share of caregiving, women will be in a better position to take on their share of breadwinning. In a sense, this is beginning to happen due to increasing divorce rates that place men in the position of caregivers. Promoting equity between men and women means that “the separate sphere borders need to be transgressed in both directions” (Neysmith & Reitsma-Street, 2005:384).

Children must be seen as having a distinct claim on the state’s resources

Skevik (2003) argues that children are hidden in social policy and continue to be seen as policy objects rather than subjects. One of the debates among government policymakers working in the area of children’s policy is whether their client is the family or the child. Clearly, primary caregivers bear responsibility for children and the well-being of children is usually inseparable from that of their caregivers, particularly that of their mothers. In this sense, the policy client is the family. At the same time,
while public policy needs to focus on both children and their parents, children must be seen as distinct claimants and should have a claim on a society’s resources in their own right. Recognizing children’s claims on the state does not remove the need for parental employment and other supports to families. However, it means that the state has an obligation to support children irrespective of whether their parents are in the workforce. Canadian policy is increasingly becoming focused on children (Jenson, 2004; Lefebvre & Merrigan, 2003). One of the goals of the Canadian child tax benefit system, for example, is to remove children from social assistance by increasing the amount of financial support that families with children receive through child tax benefits and removing that amount from social assistance payments. While this is a step toward recognizing the children as distinct claimants on the state’s resources, continued improvements in this area are needed.

2.5 The Political Context

“2003 and 2004 have seen unprecedented recognition that early learning and childcare ... is central to Canadian social and economic policy.” (Friendly & Beach, 2005:vii)

As discussed earlier, childcare policy in Canada involves a mix of federal, provincial/territorial, and municipal/regional programs. Though benefits such as family allowances and maternity leave had long been directed at children and families, it was only during the 1980s and 1990s that children became a key focus of public policy and occupied a prominent position in social policy discourse (Lefebvre & Merrigan, 2003). During this period, there were some indications that the
responsibility for childcare was shifting from the private to the public domain (Jenson, 2004; Mahon, 2002). This was largely due to the recognition of child poverty as a growing social problem and to the linking of childcare to early childhood education, discussed in Chapter 3. Numerous child-related programs and policies appeared, signaling a shift in policy focus from a paradigm where parents assume full responsibility for their children’s well-being to one that Jenson (2004) labels an ‘investing-in-children’ paradigm, in which responsibility for children’s well-being is shared by families and the state.

This interest in children resulted in the 1997 National Children’s Agenda and the 2000 Early Childhood Development Agreement. These initiatives grew out of Canada’s 1990 ratification of the United Nations Convention on the Rights of the Child and carried federal funds for provincial children’s programs. Despite regional variations in attitudes and policies, the federal Liberal government reached a historic agreement with all of the provinces in 2003: the Multilateral Framework on Early Learning and Child Care. This agreement was the most significant achievement on childcare policy made by a Canadian government. In 2004, the Liberal government promised a national childcare scheme—a pledge that had been made by the Liberals back in 1993 but had gone unfilled. This federal commitment to develop a national childcare system was made during the same period as the release of an Organisation for Economic Co-operation and Development (OECD) report criticizing Canada’s dismal patchwork of childcare programs (OECD, 2004a). The childcare system was to have been based on
four principles: quality, universality, accessibility and developmental programming (QUAD).

The 2006 federal election, however, saw the defeat of the Liberals by the Conservatives. In the newly elected Conservative government’s first federal budget, one of its five priorities was to implement the campaign promise of a ‘Choice in Child Care Allowance’ along with a commitment to cancel the federal-provincial childcare agreements after one year. The Choice in Child Care Allowance was renamed the Universal Child Care Benefit (UCCB) in the 2006 budget, reflecting the valid criticism it received for claiming to offer ‘choice’ with a mere $1,200/year allowance — an amount that did not come close to improving the childcare options of Canadian families. This is not meant to suggest that an increased child allowance was undesirable. Even a small increase was welcome as it recognized the extra costs of raising children and improved horizontal equity among families (Freiler et al., 2001). The universal nature of the benefit provided parental recognition for these costs to all families. However, the outcome of the view that children are their parents’ full responsibility is that childcare in Canada is delivered largely as a private service in a mixed market consisting of public, private and non-profit provision of services. In addition to the UCCB, the Conservative government proposed to create childcare spaces in the workplace and in communities by establishing a tax credit for capital costs. Subsequent consultations with employers, however, found that they were not prepared to enter the business of providing childcare services for their employees (Canada, 2007).
The termination of the federal-provincial childcare agreements meant that the development of a long-awaited national childcare system was disrupted in favour of a minimal child allowance. This signalled a backwards shift in childcare policy: in addition to the federal-provincial agreements, the previous Liberal government had announced further increases to federal spending on childcare to come into effect 2005-06 onwards. With the election of the Conservative government in early 2006, the childcare commitments made by the Liberals were nullified.

The 2006 Conservative policy initiative also brought to the forefront the ongoing dispute between two opposing public policy positions. One, as illustrated by the Liberal agenda, is that the federal government should develop a publicly-funded childcare system accessible to all children (CCAAC, 2004). The second position, demonstrated by the Conservative policy, argues that the state should not interfere in the childcare decisions of Canadian families, and that funds for early learning and childcare should be put into a universal child benefit (Kids First, 2005). From a gender equity perspective, these positions reflected two opposing feminist approaches: gender equity would be achieved through supporting women in the labour market versus gender equity would not be achieved until women’s caring/nurturing roles were validated. This debate takes place in the context of a much broader issue, which is the way women’s caregiving work is viewed and addressed through public policy. These two ideological positions regarding childcare and the role of the state stem from different theoretical perspectives. These perspectives are discussed in more detail in Chapter 3.
At the end of the first decade of the 21st century, the 2008-09 global economic recession displaced many federal policy priorities, including childcare. At the provincial level, considerable policy attention was devoted in Ontario to the issue of poverty, with the provincial government implementing a poverty reduction strategy, a new Ontario child tax benefit for low-income families, and poverty-related legislation. The major childcare reform in Ontario in 2009 was a plan to implement full-day learning for 4- and 5-year-old children.

2.6 Canadian Policy is a Bucket of Programs ... Filled with Holes

“A national childcare system is one of the most recommended and studied policy options, dating from the 1970 Report of the Royal Commission on the Status of Women yet Canada is still far behind other countries on this issue.” (NCW, 2008:11)

As noted by Johnson et al. (2001), the issue of integrating work and family responsibilities has been the subject of federal and provincial/territorial policy planning and several task forces in Canada. The struggles faced by parents in meeting their childcare needs are well documented, and the need for a comprehensive system of childcare is abundantly clear (Beach & Bertrand, 2000; Cleveland & Krashinsky, 2001; Doherty et al., 1995; Ferguson, 1998; Friendly et al., 2002). The problems with Canada’s current childcare policy are numerous. It is disjointed and inequitable, and the cost of high-quality childcare is especially onerous for families with middle-to-low incomes. There is a severe lack of available and affordable childcare spaces. Care that is available is often poorly synchronized with parents’ work schedules. There is also an
inability to monitor the quality of care — a significant concern given that most children are cared for in unregulated and informal childcare arrangements. Equally problematic is the non-recognition of the caregiving work that mothers carry out for their preschool-age children.

Childcare policy in Canada encompasses a range of programs and services designed to assist parents in reconciling their employment responsibilities with their childcare needs. Relative to other countries, Canada lags behind in public spending. Comparative analysis of public spending in OECD countries — both social expenditure and total government expenditure — indicates that Canada’s spending is well below the OECD average (Joumard, et al., 2004). Canada also continues to lag behind in the vital childcare policy realm. In 2008, UNICEF released a report in which it proposed a set of benchmarks or standards against which the world’s prosperous countries could be measured with respect to early childhood education and care (UNICEF, 2008). The report was in response to the increasing number of children who were spending a large part of their early childhoods in some sort of childcare arrangement. It recognized the potential benefits of early childhood education, while at the same time cautioning about the potential harm to babies and infants if they are not in a developmentally appropriate childcare setting.

The UNICEF report illustrates the many holes in Canada’s childcare policy. The report ranked 25 of the most affluent countries, and Canada failed to meet nine of 10 of the standards, tying for last place (see Table 1).
Table 1: UNICEF Standards for Children’s Rights in Affluent Countries

<table>
<thead>
<tr>
<th>Ten Benchmarks</th>
<th>Canada</th>
</tr>
</thead>
<tbody>
<tr>
<td>A minimum entitlement to paid parental leave (one year at 50 percent of salary).</td>
<td></td>
</tr>
<tr>
<td>A national plan with priority for disadvantaged children.</td>
<td></td>
</tr>
<tr>
<td>A minimum level of childcare provision for under-threes (subsidized and regulated childcare for 25 percent of children).</td>
<td></td>
</tr>
<tr>
<td>A minimum level of access for four-year-olds (subsidized and regulated childcare for 80 percent of children).</td>
<td></td>
</tr>
<tr>
<td>A minimum level of training for all staff (accredited training for 80 percent of childcare staff).</td>
<td></td>
</tr>
<tr>
<td>A minimum proportion of staff with higher-level education and training (50 percent of staff in accredited early-education services educated with relevant qualification).</td>
<td>✓</td>
</tr>
<tr>
<td>A minimum staff-to-children ratio (staff-to-children ratio of 1:15 in groups of &lt;25).</td>
<td></td>
</tr>
<tr>
<td>A minimum level of public funding (minimum one percent of GDP).</td>
<td></td>
</tr>
<tr>
<td>A low level of child poverty (less than 10 percent).</td>
<td></td>
</tr>
<tr>
<td>Near-universal outreach of essential child health services.</td>
<td></td>
</tr>
</tbody>
</table>


The top and bottom five countries, along with the number of benchmarks met by each country, are as follows:

**Top Five** | **Bottom Five**
--- | ---
Sweden: 10 | Switzerland: 3
Iceland: 9 | United States: 3
Denmark: 8 | Australia: 2
Finland: 8 | Canada: 1
France: 8 | Ireland: 1

Despite the inadequacy of childcare policy, Canadian parents have no choice but to find ways to meet their childcare needs and most parents use a variety of childcare.
arrangements over time. These arrangements include turning to family members, relatives, friends or neighbours; hiring a domestic worker; finding affordable daycare services; reducing the amount of work outside the home; taking a child to the workplace; or arranging work schedules so that the child is always in the care of one or the other parent.

The latter arrangement and the childcare option of mothers staying at home with their children are not commonly reflected in studies. A 2006 Statistics Canada report entitled Child Care in Canada illustrates the way childcare is commonly viewed in this country. The report focuses on the childcare experiences of children aged six months to five years between 1994 and 2003 but examines only non-parental care. While the proportion of children in a non-parental care arrangement was a substantial 54 percent in 2002-03, the remaining (and also substantial) 46 percent of children who were cared for by their parents were outside the scope of the study (Bushnik, 2006). The vast majority of childcare services in Canada are delivered in an unlicensed and informal sector. This refers to childcare arrangements with neighbours, relatives or ‘babysitters’.

2.7 Families Who Use Childcare Services

Studies on childcare frequently begin by highlighting statistics on the employment activity of mothers with young children. After three decades of increasing participation of women in the labour market, it seems unnecessary to point out the obvious reality: most mothers are employed or work outside of the home; or they
participate in school/training; or are involved in the community. Families use childcare services either out of necessity, and/or the desire for both parents to participate in the labour market, or to be involved in community life.

Indeed, most preschool-age Canadian children receive some form of non-parental childcare every week. According to Statistics Canada, 80 percent of mothers return to work within two years of their child’s birth (Marshall, 2003). During the late 1990s, approximately 40 percent of Canada’s 2.3 million children under the age of six were in a non-parental childcare arrangement (Vanier, 2004). This figure has been steadily increasing over the past decade and, in 2002-03, 54 percent of Canadian children aged six months to five years were in a non-parental childcare arrangement (Bushnik, 2006).

Figure 1 illustrates the proportion of children, by level of household income, that were in a non-parental childcare arrangement between 1994 and 2003. The chart shows that there has been a steady increase over the past decade in the proportion of children from low-income families who are using a non-parental childcare service. Still, higher income families are more likely to use a non-parental childcare arrangement than their lower income counterparts. In 2002-03, nearly 40 percent of low-income families used non-parental childcare compared to almost 70 percent of the highest income families (Bushnik, 2006).
Interestingly, Figure 1 also illustrates that the use of non-parental childcare arrangements among the highest-income families has been dropping, albeit slightly. This observation raises the question of whether more upper-income women are choosing not to use non-parental childcare — perhaps because of the difficulty in balancing work-family responsibilities. If this is the case, would the same choice be available to low-income women?

The majority of children who are in a non-parental childcare arrangement are cared for in unregulated settings — either in someone else's home or in the child's own home (Friendly et al., 2002). Data from Statistics Canada’s National Longitudinal
Survey of Children and Youth (NLSCY) indicates that during the mid-1990s, children under the age of six receiving childcare were in the following main types of arrangements: 56 percent were cared for in someone else’s home, nine percent of which were licensed home daycare settings; 22 percent were cared for in their own home by either a relative or non-relative; and 20 percent attended a daycare centre. Of those in a daycare centre, more than one-third was in an arrangement that consisted of two or more providers, some of these in two or more different locations (Vanier, 2004).

2.8 The Focus of the Study

The academic literature on childcare policy defines the policy in different ways. Waldfogel (2001) describes three types of policies: childcare policies, parental leave policies, and child benefits/allowances. Cleveland et al. (2008) refer to Canadian childcare policy as consisting of four “pillars”: regulated childcare, the federal Child Care Expense Deduction, maternity/parental leaves, and public kindergarten. The seventh edition of Early Childhood Education and Care in Canada presents data related to childcare policy and has been reporting on trends in early childhood education and care since the early 1990s (Friendly et al., 2007). The federal childcare-related programs that Friendly et al. include in their 2007 study are maternity/parental leave, the Child Care Expense Deduction, and some smaller childminding programs. In terms of provincial childcare policy, the authors examine fee subsidies, kindergarten, the regulated childcare system, wage subsidies for staff in the childcare sector, and fee subsidies.
This dissertation focuses on programs that address both parental and non-parental childcare arrangements. Programs that support non-parental care are those which help parents with childcare costs through fee subsidies or tax deductions. Another group of programs, such as maternity and parental leave, help parents who were employed before the birth to remain at home for a period of time so that they themselves may provide care for their child. These benefits are basically cash grants that could be used to offset the costs of caring for a young child. Costs could involve either foregone earnings (due to a parent staying home from work) or childcare payments (for the purchase of non-parental care) or some combination of the two.

One policy area that is generally ignored in childcare literature is that of nannies or live-in caregivers. This is a significant omission. Canada’s Live-in Caregiver Program supports non-parental care by easing access to foreign domestic workers to care for children while their parents are at work. Given that an influential segment of the parent population relies on nannies to provide childcare, my dissertation includes the policy regarding foreign caregivers.

The foregoing discussion defines childcare policy as referring to the range of programs that assist Canadian families in reconciling paid work and parenthood. The programs I have selected are those that provide a direct benefit to parents; or, in other
words, programs that reflect the way parents experience childcare policy\(^2\). Based on this assumption, the programs that constitute childcare policy for the purpose of this research include: Employment Insurance maternity/parental leave benefits; the Canada Child Tax Benefit; the Universal Child Care Benefit; the Child Care Expense Deduction; and the Live-in Caregiver Program. Also included are provincial childcare fee subsidies and the federal child tax credit.

I have not included kindergarten and preschool programs as part of childcare policy for two reasons: First, in terms of program design, their primary objective relates to early childhood education/school readiness rather than support for parents to bridge employment with their family responsibilities; and second, from the perspective of parents, these programs provide insufficient amounts of daily childcare time for parents to be able to engage in employment or training-related activities. At the time of this study, however, Ontario was in the planning stages of implementing full-day publicly funded kindergarten for four- and five-year-old children. If implemented, this policy change would have an impact on childcare policy in the province because it would provide parents with lower childcare costs and a longer school day for their children. Further, while full-day kindergarten would likely be used as a *de facto* childcare program, that is not its main purpose.

\(^2\) Programs that benefit parents indirectly, such as provincial/municipal operating grants to childcare centres or wage subsidies to childcare staff, are not included in this definition of childcare policy. My assumption is that, since parents do not directly experience the benefit from these programs, they would not consider such programs to be part of childcare policy.
2.9 Federal Childcare Policy

There are a number of childcare programs for which the federal government is responsible. These were described in Section 2.7 and are summarized in Table 2.

<table>
<thead>
<tr>
<th>Program</th>
<th>Objective/Eligibility</th>
<th>Description of Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment Insurance (EI) Maternity/Parental Leave</td>
<td>Provides temporary financial assistance to individuals who are pregnant, have recently given birth, are adopting a child or are caring for a newborn.</td>
<td>Maternity benefits are payable to the birth mother or surrogate mother for a maximum of 15 weeks; required to have worked for 600 hours in the last 52 weeks or since last EI claim. Parental benefits are payable to either the biological or adoptive parents while they are caring for a newborn or an adopted child, up to a maximum of 35 weeks; required to have worked for 600 hours in the last 52 weeks or since last EI claim.</td>
</tr>
<tr>
<td>Canada Child Tax Benefit (CCTB)</td>
<td>Replaces the partial cost of provincially determined maternity/parental leave for newborns and newly adopted children.</td>
<td>The CCTB pays a maximum amount of $3,271 per year for the first child, $3,041 for a second child and $3,046 for a third and each additional child. Maximum benefits go to families with net incomes under $20,883, and payments decline gradually as incomes increase above that level.</td>
</tr>
<tr>
<td>Universal Child Care Benefit (UCCB)</td>
<td>The CCTB provides monthly benefits to the large majority of families with children under 18, excluding only those living in high-income families (e.g. for one or two children, net family incomes over $101,328). The CCTB consists of a base benefit and a supplement for low-income families (National Child Benefit Supplement).</td>
<td>The UCCB pays monthly benefits to all children age 5 and under. The UCCB is a taxable benefit to help eligible families provide childcare for their children under six years of age. Provides a $100 monthly payment (up to $1,200 annually) for each child under six years of age. It is paid separately from the CCTB.</td>
</tr>
<tr>
<td>Child Care Expense Deduction (CCED)</td>
<td>To reduce income tax associated with childcare costs for children 0-16 years.</td>
<td>Individual tax deduction of up to $7,000 for children under 7 and $4,000 for children ages 7-16. Tax receipts must be available upon request.</td>
</tr>
</tbody>
</table>
Table 2: Federal Childcare Programs, 2009 (cont.)

<table>
<thead>
<tr>
<th>Program (LCP)</th>
<th>Description</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Live-in Caregiver Program (LCP)</td>
<td>To facilitate the entry to Canada of foreign caregivers. The live-in caregiver program exists because there is a labour market need within Canada, that being a shortage of Canadians to fill these positions.</td>
<td>Adapted from Battle, 2008; CRA, 2009; HRSDC, 2009; Service Canada, 2009.</td>
</tr>
</tbody>
</table>

In addition to the programs summarized in Table 2, the federal government provides funding to a number of programs designed to address the needs of populations for whom the federal government has particular responsibility, such as Aboriginal people, new immigrants and refugees, military families, and young children living in conditions of risk. These programs, which include childcare programs serving primarily on-reserve Aboriginal populations, newcomers who are attending English-language instruction classes, and military families, are not included in this research because they are small in scope.

Income replacement under maternity/parental leave and the Child Care Expense Deduction (CCED) are two major federal programs and are described in the following section.

*Maternity and Parental Leave*

Baker (1995) argues that Canada, like other English-speaking countries, has tended to view maternity and parental leave as an expense, an irritant to employers, and a deterrent to hiring workers (Baker, 1995). Nonetheless, a comprehensive system of maternity and parental leave is an important component of childcare policy.
Maternity leave supports the participation of women in the labour market and parental leave encourages fathers to care for their children.

In Canada, not all mothers are eligible for maternity/parental leave benefits. In 2001, the proportion of new mothers receiving maternity or parental benefits was 61 percent (Marshall, 2003). Criticism of the maternity/parental leave policy focuses primarily on the restrictive eligibility criteria and low wage-replacement rates (Battle, 2009; Townson & Hayes, 2007). The income replacement rate in 2009 is 55 percent of insured earnings up to a maximum of $447 per week. In 2001, the federal government increased the number of weeks allowed in the parental leave portion of the benefit. Under the new rules, maternity benefits of 15 weeks and parental benefits of 35 weeks allow a total leave of 50 weeks. The parental leave component encourages fathers to withdraw temporarily from the labour market. In Canada, the number of fathers claiming paid parental leave has been increasing. Between 2000 and 2006, the proportion of fathers who claimed parental benefits went up from 3% to 20% (Marshall, 2008); however, this increase is affected by the availability of generous paternity leave benefits in Québec (see section 2.11).

There are numerous advantages to improving the maternity and parental leave system. While it provides an adequate income floor to families with children and allows parents to care for their children when they are very young, an enhanced system: would give more parents the option of caring for their children without giving up their job; further reduce gender inequalities because more women would not have to leave
the labour market entirely in order to care for their children; and expand family-time options for parents.

For a comprehensive maternity and parental leave system, benefits must be extended to parents who are self-employed, part-time employees, or doing other non-standard work, as well as to students and parents with no previous labour market attachment, including women currently on social assistance.

*Child Benefit Programs*

“The current system of federal and provincial child benefit programs has become incomprehensible to most people.”

(NCW, 2008:83)

In addition to maternity/parental leave benefits, child benefit programs are an essential component of childcare policy. The federal government delivers three child benefit programs: the Canada Child Tax Benefit (CCTB), the Universal Child Care Benefit (UCCB) and the non-refundable child tax credit (CTC). The UCCB and the CTC were created by the Conservative government in 2006 and 2007 respectively. For low-income families residing in Ontario, there are two additional tax benefit programs: the Ontario Child Care Supplement for Working Families and the Ontario Child Benefit (OCB). The OCB was launched in 2008.
Canada Child Tax Benefit

The federal child benefit programs exist in the context of the National Child Benefit (NCB), which was introduced in 1998 as part of a federal-provincial/territorial agreement that included reforms of social assistance financing (Canada, Senate Committee, 2009). The NCB combines two elements: monthly payments to low-income families with children, and spending on services designed and delivered by the provinces/territories to meet the needs of families with children in each jurisdiction. The monthly payments consist of the Canada Child Tax Benefit (CCTB) and the National Child Benefit Supplement (NCBS). According to the federal government, 82 percent of Canadian families with children received CCTB in 2001, and 40 percent received the NCBS (Canada, 2006). The basic CCTB benefit in 2008 was $108.91 per month for each child under 18 years of age, with an additional $7.58 per month for a third and each additional child). The benefit is reduced for a family with a net income of more than $37,885. The NCBS is paid to families with incomes below $21,287. A family with one child receives $168.75 per month; for a second child, a family receives $149.33 per month; for each additional child, the amount is $142 per month (Canada Senate, 2009).

Universal Child Care Benefit

“The incredible shrinking childcare allowance.”

(Battle, 2006)

A universal child benefit is a key component of childcare policy. Canada’s universal child benefit, however, is problematic. The Universal Child Care Benefit (UCCB) is one of the more recent additions to Canada’s childcare policy. Introduced in
2006, the UCCB is designed to help families secure childcare for their children by issuing a taxable $100 monthly payment (up to $1,200 annually) for each child under six years of age. It is a separate payment from the CCTB. While universal in name, the UCCB has several shortcomings. Since it is considered taxable income, families in different income brackets receive different after-tax benefits. The largest net UCCB payment of $971 per year goes to upper-income, one-earner couples, while families with modest to low incomes, including those on social assistance, receive less because other child benefits for which they were previously eligible were removed when the UCCB was implemented (Battle et al., 2006; Battle, 2008). In addition to this flaw, the amount of the benefit is trivial and, given the cost of childcare, has little impact on the childcare options for families. It is also limited to families with children under the age of six.

The UCCB has one positive feature: For the first time in decades, child benefits were being extended to all families regardless of income. This signaled an acknowledgment, however minor, of a collective responsibility for the costs of raising children.

*Child Care Expense Deduction*

The Child Care Expense Deduction (CCED) was designed to recognize the cost of earning income. The CCED assists parents with the costs of childcare and lowers the barrier for the entrance of women to the labour market. Since 1972, it has allowed families to deduct childcare expenses from their taxable income. In 2009, a tax
Taxation deductions such as the CCED often cause antagonism between high-income and low-income families, as well as one-earner and two-earner families. Critics maintain that the CCED discriminates against single-earner families where one parent provides childcare in the home. These families cannot take advantage of the deduction since they do not pay another person to care for their children. The CCED has also been criticized for perpetuating the privatization of childcare and, as a regressive tax measure, providing the most benefits to high-income earners. Only 15 percent of families with children benefit from the CCED (Freiler et al., 2001).

There are numerous other problems with the CCED. Many women cannot benefit from the deduction because they use informal childcare arrangements, often paying in cash for the service and not getting receipts. The CCED has also been criticized because it is confused with being a childcare measure, and critics charge that a tax deduction is an inappropriate way to finance childcare.

Although it treats employed and self-employed taxpayers equally, the CCED possesses the basic disadvantage of all deductions: It gives a larger benefit to the high-income earner than to the low-income earner, and no benefit at all to an individual without taxable income (Freiler et al., 2001; Hogg & Magee, 1997). Hogg & Magee (1997) argue that the CCED would be more effective as a refundable and income-tested credit, and that other policy instruments, such as the direct provision of daycare or the
direct subsidization of low-income parents, might be more effective uses of the government revenue forgone by this tax program.

*The Live-in Caregiver Program*

While child benefit programs are generally considered to play a major part in childcare policy, one significant actor in childcare policy has been invisible in the policy discourse: the Live-in Caregiver Program.

Canadian childcare policy as defined in this thesis includes the federal government’s Live-in Caregiver Program (LCP) — a program that has been referred to as part of a national childcare strategy (McWatt & Neysmith, 1998) yet is omitted in virtually all childcare policy literature (Canada Senate, 2009; Cleveland & Krashinsky, 2001; Friendly & Beach, 2005; Prentice, 2001; OECD, 2004a; Tyyskä, 2001; Waldfogel, 2001). While the LCP is seldom regarded as part of childcare policy, it nevertheless plays a significant role in the childcare system. This central role is highlighted in a 2009 article that appeared in Canada’s *Globe and Mail* newspaper under the headline ‘Daycare, nanny or grandma?’ The article opens by asking: “Choosing the right childcare is one of the most fraught decisions modern parents face: Should one of us stay home and forgo a salary? Should we choose the government-stamped daycare or the family-run one around the corner? Can we afford a nanny?” (Pearce, 2009).

The LCP is designed to allow families to hire caregivers for children, the elderly, or the disabled; however, the vast majority of foreign caregivers are brought to the
country to care for children. In 2007, the federal government approved 18,693 live-in caregivers in Ontario, of which 14,489 were for the care of children (HRSDC, 2009). It is difficult to know exactly how many live-in caregivers are working in the country at a given time. All of the caregivers approved by the federal government to work in the country do not necessarily end up coming to Canada. Further, some families hire live-in caregivers outside of the parameters of the LCP. A 2009 Toronto Star article estimated that there were approximately 8,000 caregivers working as nannies in Ontario in the late 2000s (Cribb & Brazao, 2009).

As a federal childcare program, the LCP is relatively inexpensive to deliver and serves the dual role of filling a gap in the labour market and being an immigration program. It is indispensable in meeting the childcare and domestic needs of a select group of families. The fact that parents with professional careers need a live-in nanny in order to meet their obligations is hardly surprising since family responsibilities conflict with most careers. Missing meetings to care for a sick child, reducing work hours, or refusing to travel or work evenings would be common occurrences without the presence of live-in caregivers.

Yet the LCP is problematic. Whether by design or default, the program results in a pool of foreign domestic workers willing to undertake caregiving and housekeeping services in Canadian homes. The LCP has been the subject of numerous studies and essays concerned with the exploitation of foreign domestics (Arat-Koç, 2001; Bakan & Stasiulis, 1997; Cohen, 2000; Hochschild, 2000; Langevin & Belleau, 2000; Macklin,
1994; Wrigley, 1999). It is also fraught with problems as a childcare policy. It is a policy that perpetuates classism and only benefits a select group of privileged families. While it has been estimated that this form of childcare is affordable to only three percent of the population, it is chosen by roughly 60 percent of female lawyers, physicians, and business executives (Withers, 1998). The LCP is an example of a private solution to a public problem and is a policy that solves some problems but has, as well, considerable limitations (Wrigley, 1999).

2.10 Provincial and Municipal Childcare Policy in Ontario

The regulation of direct childcare services falls under provincial/territorial jurisdiction and as a result, each of the country’s ten provinces and three territories has its own approach to childcare, which includes both ‘childcare’ and ‘education’ programs. In most Canadian provinces, public childcare support is limited and childcare coverage is patchy (OECD, 2005). The provinces/territories administer the following childcare services: regulated childcare programs (centre-based as well as home/family-based, nursery schools, preschools); fee subsidies for low-income parents; funding to childcare service operators (e.g. wage grants); public kindergartens; and before-/after-school care for school-age children (Friendly & Beach, 2007).

In Ontario, childcare policy is the responsibility of the Ministry of Children and Youth Services. From the perspective of the ministry, there are two basic kinds of childcare in Ontario: licensed (i.e. regulated) and unlicensed. One of the key roles of the ministry is to implement the Day Nurseries Act. The Act sets out the rules for licensed
centres and home-based childcare programs where there are more than five children. The ministry, however, has no jurisdiction in the large number of childcare settings where there are less than five children. In fulfilling its mandate, the ministry develops policy related to childcare, establishes internal directives, investigates complaints, and trains licensing support staff. It funds fee-subsidy programs (including a childcare voucher system for parents on social assistance), wage subsidies for childcare workers, and operating grants to childcare operators. It is also responsible for family resource centres, funding policies for school-age recreation programs, special needs resourcing, and data collection. As childcare programs are delivered at the municipal level; the province provides transfer payments to, and works closely with, 47 Ontario regions and municipalities. These regions and municipalities, thus, are important actors in Ontario’s childcare policy.

As noted in section 2.4 the focus of provincial childcare policy in Ontario in 2009 is the implementation of full-day kindergarten. An examination of this policy direction is beyond the scope of this research. However, based on U.S. experience, this approach may raise concerns about whether politicians should have the power to define what is best for the nation’s children and whether a homogeneous learning environment ignores the many cultures of children and their families (Liebovich, 2008).

**Childcare Fee Subsidies**

“Rather than a public entitlement for all children as it is in most of Europe, [childcare] is seen as a private responsibility where all but the poorest families — those
receiving subsidies like a welfare-style benefit — are forced to pay thousands of dollars a year in fees.” (Philp, 2004:A3)

In Ontario, daycare-fee subsidies help families pay for the cost of childcare. The program is cost-shared between the provincial and municipal governments as well as First Nations communities. The municipally delivered daycare-fee subsidies are vital to eligible low- and modest-income families. These subsidies are designed to address the high cost of daycare by assisting with the payment of fees. In Ontario, for example, childcare costs are substantial: the province has the highest monthly fees for full-time, centre-based care in Canada. Parents using a childcare centre typically pay annual fees of nearly $10,000 for an infant and $6,500 for a preschooler (Friendly & Beach, 2005). However, only 48 percent of Ontario children in regulated childcare centres receive fee subsidies (Friendly et al., 2007). While this translates to fee subsidies being available for approximately 110,000 Ontario families, there are thousands of other families on the waiting list for a subsidized childcare space. As of March 2009, Toronto had more than 14,000 families on its waiting list (Toronto Children’s Services, 2009). Fee subsidies are also available for unregulated care for parents who are on social assistance. This ‘voucher system’ of childcare fee assistance was provided to 9,420 social assistance clients in 2005-06 (Friendly et al., 2007).

The preceding section described the range of programs that constitute childcare policy in Ontario, Canada. Some of these programs involve direct payments to parents (e.g. maternity/parental leave, child tax benefits) while others are funded through transfer payments from one level of government to another. These include fee
subsidies and operating grants to childcare and other centres that provide early childhood education services. Other programs involve different levels of government acting as regulators (e.g. Live-in Caregiver Program, licensed childcare operators). This convoluted patchwork of programs is illustrated in Figure 2.

Figure 2: Childcare Policy in Ontario
As shown in Figure 2, the government of Canada provides transfer payments to the province and regulates the Live-in Caregiver Program. The federal government also provides payments directly to families through the Child Tax Benefit, the Universal Child Care Benefit, the Child Care Expense Deduction, and the Employment Insurance maternity/parental leave program. The province transfers payments to the municipalities and regulates licensed childcare providers. Municipal/regional governments provide fee subsidies to licensed childcare operators on behalf of eligible parents. As for parents, the financial cost of childcare includes fees paid to non-parental care providers (either licensed or unlicensed) or foregone income if parents provide childcare themselves.

Childcare policy in Ontario, Canada is addressed at the federal, provincial and municipal levels — but not very coherently or adequately. The province of Québec, however, has an approach to childcare policy that can serve as a model for the rest of the country.

2.11 Québec as a Policy Model

Compared to the rest of Canada, childcare policy in Québec is much more developed. Childcare programs in Québec have always been situated in a broader set of family policies (Jenson & Sineau, 2001). A significant set of reforms to Québec family policy was implemented in 1997 and these changes, along with the subsequent lessons learned, offer a childcare policy model for the rest of the country (Campbell, 2006; Jenson & Sineau, 2001; Jenson, 2009; Tremblay, 2009).
The 1997 reforms were part of a new family policy that contained three main components: a child allowance designed to replace the existing family allowance; enhanced maternal and parental leave provisions through a new parental insurance plan; and the development of early-childhood education and care services to provide universally accessible programs. Childcare spaces were made available for $5 per day (increased to $7 per day in 2003), with public funding covering more than 80 percent of the childcare costs (OECD, 2005). Not surprisingly, the Québec childcare policy has had a large impact on the labor supply of mothers with preschool children, with more mothers entering the workforce (Lefebvre & Merrigan, 2008).

Québec’s enhanced maternity/parental benefit plan offers options in terms of duration of leave as well as the income-replacement amount and is available to self-employed as well as salaried parents. Parents choose between two options — the basic plan or the special plan — and this determines the duration of their leave as well as their income-replacement rate (Service Canada, 2009). The Québec plan also offers a parental leave period designated for fathers only. The following table compares the features of the Québec program with the EI maternity/parental benefits available in the rest of Canada.
The 1997 reforms to the Québec system, however, did not escape criticism (Jenson, 2009; Jenson & Sineau, 2001). The system faced problems related to a shortage of spaces, long waiting lists, and regional disparities. Parents in higher income households seemed to have better access to subsidized spaces than those in lower income groups. An increasing number of parents were using family daycare and monitoring the quality of these childcare settings was difficult.

Parents with large families lost their generous baby bonuses in the 1997 reforms, and parents who used nannies, in-home babysitters, or unregulated care could no longer deduct expenses from their Québec taxes (although they could still claim the federal deduction). There were tax credits for parents without access to a subsidized space; however, for low- and medium-income families, these credits were often not worth as much as a subsidized childcare space (OECD, 2005). Another vocal group of
critics were commercial childcare operators, who were initially excluded from receiving public subsidies and had difficulty making a profit because they had limited access to grants.

The Québec system has been critiqued by those who claim it produces negative effects on child outcomes, parenting, and parent outcomes (Baker et al., 2005), and the ‘family’ movement, which would have preferred to see funds diverted to a universal family allowance (Jenson & Sineau, 2001). Further, as Angela Campbell (2006) argues, the assumptions on which Québec childcare policy is based — assumptions about the family and its social, cultural, and economic dynamics — fail to reflect the realities of many families. This results in some families being marginalized and denied benefits under the childcare system.

Jenson (2009) notes that there are indicators that Québec is backtracking on its progressive child care initiatives that began in 1997. As mentioned earlier, the $5/day childcare was increased to $7/day in 2003. Subsequently, legislation enacted in 2005 made for-profit operators full participants in the child care system, a new mechanism for overseeing family daycare providers was created, and more flexibility was introduced into the programming which would allow drop-in centres and for-profit centres to develop programming for part-day, evening, and weekend clients. Québec’s proposed childcare reforms in 2003 and 2005, however, generated large opposition.
The lessons learned from the Québec system provide an opportunity for the federal government to develop an equitable and inclusive childcare policy for the rest of the country. Lessons can also be gleaned from beyond Canada’s borders.

2.12 Beyond Canada: Childcare Approaches Elsewhere

“The reconciliation of work and family life directly involves two goals that are important both to individuals and societies: the ability to participate fully in the labour market, generating income but also seeking fulfillment in one of the most important social activities of modern life, and to provide the best for one’s own children, giving them the care and nurturing they need. These aspirations need not be mutually exclusive.” (OECD, 2005:3)

The OECD defines family-friendly policies as “those policies that facilitate the reconciliation of work and family life by ensuring the adequacy of family resources, enhance child development, facilitate parental choice about work and care, and promote gender equity in employment opportunities. They include improved access to affordable and quality childcare, financial support to children, arrangements that allow working parents to take leave to care for children, and flexible workplace practices that allow a better reconciliation of work and care commitments” (OECD, 2005:11).

Early childhood education and care has received a good deal of national and international policy attention over the past decade, not only in Canada but across OECD member companies, where policy makers have begun to recognize that access to quality early childhood education and care supports the social and economic needs of families (OECD, 2001b). As a result, global public investments in childcare have grown
substantially (Meyers & Gornick, 2003). In many countries, the care and education of young children is shifting from the private to the public domain. There is a range in the design and scope of childcare policies, and these diverse views have important implications for the organization of policy and the provision of services in different countries (OECD, 2001b).

A comprehensive childcare policy, however, refers to a wider group of policies than those relating to early childhood education. Since this policy area involves wide-ranging programs involving both non-parental and parental care, making international comparisons is difficult. While numerous comparative childcare studies have been conducted, each study focuses on a specific policy or category of policies, and compares a certain group of countries. Appendix A provides a sample of several comparative childcare studies, indicating the specific policies and countries examined in each review. Jenson & Sineau (2001), for example, examined a range of childcare policies, but their country focus was limited to Belgium, France, Italy, and Sweden. Bradshaw & Finch (2002), on the other hand, included 22 countries, but looked only at child allowances. Meyers & Gornick (2000) used Esping-Andersen’s welfare state regime types as their organizing framework, thus selecting 14 countries that represent the three regime types: Denmark, Finland, Norway, and Sweden (social democratic); Belgium, France, Germany, Italy, Luxembourg, and the Netherlands (conservative); and Australia, Canada, the U.K., and the U.S. (liberal). The policies in their study, however, are limited to the direct provision of publicly funded childcare programs. They do not include parental leaves, child allowances or tax deductions.
In their later work, Gornick & Meyers (2008) examine work-family reconciliation policies — paid family leave provisions, early childhood education and care, and working-time regulations — in six European countries considered to be policy exemplars, namely Denmark, Finland, Norway, Sweden, Belgium, and France.

**Policy in Anglophone Countries**

Public provision of childcare in English-speaking countries has been promoted primarily as a form of compensatory education for disadvantaged children or as a work incentive for low-skilled mothers (Meyers & Gornick, 2003). Anglophone countries have been criticized for not having widely available public childcare and other supports that would directly help mothers with balancing work and family life (Morgan, 2003). Comparing childcare policy in the U.K., U.S., and Australia, Morgan (2003) finds notable similarities: public provision of childcare is limited; a private market of services offered by either voluntary or commercial providers compensates for the lack of public provision; and expanded federal tax breaks are available for commercial childcare. Women are assumed to be free to determine their own course regarding paid work and childrearing, yet they receive minimal public assistance in their decisions.

The U.S., on the other hand, is the childcare policy laggard and studies point to a sharp contrast that separates the U.S. from other nations (Meyers & Gornick, 2000; Morgan, 2003; Waldfogel, 2001). The U.S. is nearly alone among western countries in the absence of a universal family allowance; maternal and parental leave laws are extremely weak; and government support for childcare is among the lowest in the
industrialized world. Although the U.S. ranks among the richest of countries, it spends a much smaller share of its GDP on social programs than do most other industrialized countries (Meyers & Gornick, 2000).

In the U.K., childcare was scarcely on the agenda until the late 1980s when children’s policy began to focus on tackling child poverty and enhancing child development. Recently, the U.K. has made progress in terms of child poverty. The government set a target to reduce child poverty by half by 2010 and eradicate it by 2020. It also set specific program targets, including an affordable childcare place for all children aged three to 14 by 2010 (NCW, 2007). The U.K. approach consists of supports targeting those who need it most (e.g. lone parents, ethnic minorities, and people with disabilities) — supports such as tax credits for families with children; work for those who can; improving educational opportunities for children; and delivering high-quality public services, including decent housing and health and social care. The proportion of children living in poverty has declined from 27 percent in 1997-98 to 22 percent in 2004-05, and almost one million children have been lifted out of poverty since 1999 (NCW, 2007).

The philosophical basis of childcare policy in Canada is based on a private-responsibility model, although to a lesser extent than in the U.S. and the U.K., where leave provisions and wage replacements for parents of young children are inadequate (O’Connor et al., 1999). In the U.S., there is a pervasive belief that childbearing is
fundamentally a private economic decision and having children is seen as a private good (Dingwall & Lewis, 1999).

*European Policy*

Canadian childcare policy is often compared to Western European policies rather than to the policies of the United States. In Europe, however, there is no common policy on reconciling work and family obligations, nor a single model of welfare for children. European countries differ widely in childcare strategies as well as the extent to which they rely on informal care services. As in Canada, national provisions have accumulated over the years and are often fragmented and highly diverse (Bettio & Plantenga, 2004).

There is variation within the established democracies of Western Europe as well as among the newer democracies of Eastern and Central Europe (Dingwall & Lewis, 1999). In their study of childcare policy in new European Union member countries, Szelewa & Polakowski (2008) grouped the countries under four policy models: *explicit familialism* (Czech Republic, Slovakia and Slovenia); *implicit familialism* (Poland); *female mobilizing* (Estonia and Latvia); and *comprehensive support* (Lithuania and Hungary). The authors consider parental leave provisions and daycare arrangements to be the two most important components of childcare policy (Szelewa & Polakowski, 2008).
The variations in Europe are related, in part, to differences in cultural and political history (Bettio & Plantenga, 2004; Morgan, 2002). Morgan (2002) argues that differences in contemporary childcare policy in European countries can be traced to 19th-century conflicts between religious and secular forces over education. Decisions made centuries ago have had lasting consequences on the nature and extensiveness of childcare services for preschool-aged children.

The Swedish and Finnish childcare systems are considered to be exemplary models although, as mentioned earlier, the policy approaches in Denmark, Norway, Belgium and France are also considered to be policy exemplars (Gornick & Meyers, 2008). There is, however, a financial cost associated with these systems and they are not ‘exportable’ to other countries unless these nations embrace similar high spending (OECD, 2005). Social policy objectives in Finland and Sweden are pursued through a universal welfare system, which supports citizens throughout the life course. In contrast, social policy in Canada and the U.K. has traditionally been targeted more towards low-income groups. These differences in approach are reflected in cross-country contrasts in public social spending which is highest at 29 percent of GDP in Sweden, 25 percent in Finland, 22 percent in the U.K., and 18 percent in Canada. The tax rate in these countries mirrors the level of social spending: it is highest in Sweden at 50 percent of GDP compared to 46 percent in Finland, and 38 percent in Canada and the United Kingdom (OECD, 2005).
Policies in the Scandinavian countries have been closely related to the promotion of equal opportunities for women to choose to participate in the labour market. The reduction of gender inequalities in both paid and unpaid work has been an explicit rationale for the expansion of public childcare services (Dingwall & Lewis, 1999; Meyers & Gornick, 2003). An in-depth OECD study compared childcare policies in Canada, the U.K., Sweden, and Finland. It found that both Finnish and Swedish policy models provide a continuum of support to parents with children. From childbirth through to primary school, policy in these countries supports parents on a continuous basis so that they may both participate in full-time work and spend time with their children. The model involves flexible use of paid parental leave entitlements, affordable high-quality childcare, extensive before-/after-school care, and entitlements to reduce working hours for parents with young children (OECD, 2005). In recent years, however, the Swedish model has been subject to criticism and is under some pressure to change direction (Jenson & Sineau, 2001; OECD, 2005).

Cultural views and political history play a part in the development of childcare policies and programs. Several continental European countries, such as France, have historically embraced pro-natalist family policies, and this is reflected in their approach to childcare (Meyers & Gornick, 2003). By sharing the economic and opportunity costs for children, the community as a whole creates an incentive for those who are able to bear children to do so. In these countries, the sharing of costs for children is considered both a social good and a resource from which those without children expect to obtain future benefits. As Morgan (2002) explains, intense clerical-anticlerical conflict in the
19th-century in France led to the incorporation of preschools in the national education system while no such incorporation took place in Sweden and Germany (Morgan, 2002).

In contrast, under state socialism in Eastern and Central Europe, the main agenda was the maximization of labour market participation. This led to investments in non-parental childcare services rather than transfer payments, reflecting a low-wage system with a high dependence on state-provided services. On the other hand, the British post-war welfare system was based on a breadwinner model of the family, where women were not expected to work. This led to the problems of lone parents and poverty, and ultimately the dominant concern in Britain became child poverty (Dingwall & Lewis, 1999). In recent years, child poverty and social exclusion have increasingly been identified as outcomes of concern not only in the U.K., but also in France and even in Sweden, despite their low rates in both categories by international standards (Kamerman et al., 2003).

Canadian cultural views regarding childcare are influenced by a range of factors: its historical ties with Europe, where countries differ widely in childcare strategies; its proximity to the U.S., with its inadequate policies; the progressive, family policy milieu of Québec; and the multicultural makeup of Canada’s population. While the specific measures vary from country to country, an important distinction between Europe and the U.S. is the extent to which the welfare of children is accepted as a legitimate object of government policy and state intervention. No European country has been without a
more-or-less explicit policy for children and, despite economic pressures and welfare reforms, the protection of social benefits for children has been maintained to a considerable extent (Dingwall & Lewis, 1999).

The Canadian tendency to view children as a private decision has resulted in ambivalence about the state’s role in helping women to balance work and caregiving and is reflected in its public policies (Freiler & Cerny, 1998). Among European countries, there is variation in their approaches to childcare and family policy. As described by O'Hara (1998), France’s strategy attempts to support choice for parents in their decisions about balancing work and family; the stated policy in the Netherlands is to help parents balance work and family; Germany’s strategy is to support a stay-at-home parent, while the strategy in Norway and Sweden is to seek gender equity at home and in the workplace. The strategy in Canada, the U.K., and the U.S. is to leave to parents both the choice of how to balance work and family, and the difficulties resulting from their choice (O’Hara, 1998).
Chapter 3: Theoretical Perspectives on Childcare Policy

3.1 Welfare State

The welfare state normally refers to interventions by the state, or state social provision, aimed at modifying social and market forces to achieve greater equality among citizens (Orloff, 1993). Substantial changes to Canada’s social programs during the 1990s led to much criticism about the dismantling of the welfare state, although welfare state ‘restructuring’ actually began with reductions in public expenditures during the 1970s (Gough, 1979). Welfare state theorizing has played a key role in understanding policy development. Feminist criticisms of Esping-Andersen’s (1990) renowned welfare state typologies have highlighted the effects of gender on citizenship and have deepened our understanding of the welfare state (Evans & Wekerle, 1997; Orloff, 1993; Sainsbury, 1994).

Research examining childcare and related family policies has found, however, that the policies affecting women’s employment, including the level of childcare provision, do not fit neatly into welfare state regimes (Bradshaw & Finch, 2002; Gornick et al., 1996; Meyers & Gornick, 2000 and 2003). Scholars have assumed that differences in childcare policies may be explained by applying the welfare state typologies; however, this assumption is not supported in the literature. Some studies examining childcare and related family policies have found that policies affecting women’s employment, including the level of childcare provision, bear little relationship to the expectations that would be inferred using Esping-Anderson’s regime types (Bradshaw
& Finch, 2002; Gornick et al., 1996). Others conclude that some features of childcare policy conform to the expectations that arise from Esping-Andersen’s model but that other measures are not fully consistent with his regime types (Meyers & Gornick, 2000 and 2003).

In their comparative study of child allowances, for example, Bradshaw & Finch (2002) ranked 22 countries based on the generosity of their child benefit packages. The authors found that Canada, along with the U.S., lag behind other countries in their spending. The top three leading countries are Austria, Luxembourg (both conservative regimes), and Finland (social democratic). Following, these are a number of countries — France, Sweden, Germany, the U.K., Belgium, Denmark, Norway, and Australia. Joining Canada and the U.S. near the back of the pack is the Netherlands. The social democratic welfare states (Denmark, Finland, Norway, and Sweden) rate in the top half of the ranking but, with the exception of Finland, are not among the top three. The liberal welfare states (Australia, Canada, the U.K., and the U.S.) are distributed throughout the rankings, with the U.K. and Australia providing more generous benefits than Canada and the U.S. The conservative countries tend to be found in the upper half of the ranking, with two nations standing out: the Netherlands for its spot at the bottom, and Austria, which achieved the top spot because it provides a considerably more generous child benefit package than any other country.

The public provision of childcare services is generally at the level expected in social democratic and liberal regimes (i.e. a high degree of public provision in social
democratic states and a low degree in liberal states). However, there is considerable diversity among the conservative welfare states — Austria, Belgium, France, Germany, Italy, and the Netherlands. While one would expect minimal public childcare and policies that encourage mothers to be full-time caregivers, several states (France, Belgium, and Italy) offer universal, or nearly universal, preschool for children aged three to six, which exceeds the generosity of Scandinavian welfare states (Meyers & Gornick, 2003). While there is no single European model of welfare for children, there is a fundamental agreement that the European approaches distinguished from the U.S. model by the extent to which the welfare of children is embraced as a legitimate object of government policy and state intervention.

3.2 In the Public Dialogue: A Focus on Child Development and Early Learning

“It is telling that one policy that all women’s groups have supported as essential to the autonomy of women is a viable national child care policy. Yet multiple campaigns by day care advocates have been met with what can only be described as stonewalling over the decades, as a patchwork of tax benefits and subsidies keeps reappearing under different names.” (Neysmith et al., 2009:104)

The question of childcare has been taken up in policy discourse as predominantly a child development/early learning issue as opposed to a gender equity issue, despite the efforts of childcare advocates, who have consistently presented childcare as a women’s equality issue (CCAAC, 2004). The policy discourse focus on child development/learning has largely been in response to concerns about prenatal/infant development and the effects of poverty at this stage of children’s lives.
These concerns, and the related research that has been conducted in the U.S., have had a strong influence on Canadian policy. For example, the 1997 National Children’s Agenda, a product of the Federal-Provincial-Territorial Council of Ministers on Social Policy Renewal, stated that the country aspires to have children who are healthy, physically and emotionally; safe and secure; successful at learning; socially engaged and responsible. The National Children’s Agenda was the vehicle for programs in early childhood development, many of which are geared specifically to helping families designated as being ‘at risk’ (McKeen, 2009).

Health Canada has become the leading federal department to provide a range of children’s services, including childcare, through programs such as the Community Action Program for Children (CAPC) and Aboriginal Head Start (AHS). CAPC provides funding to community coalitions to deliver programs that address the health and development of young children who are living in conditions of risk (e.g. family resources centres, parenting classes, home visiting, etc.). AHS funds early childhood development programs for aboriginal children and their families in urban and northern communities.

The renowned Ontario Early Years Study (McCain & Mustard, 1999) highlighted the importance of preschool years in terms of influencing brain development, subsequent learning, behaviour, and health. The report, which has been cited extensively, strongly recommended good early child development programs to improve child development outcomes.
The political impetus to develop a national childcare system resulted from this framing of the issue in terms of the cognitive and social development of children. The most crude of these concepts is the portrayal of children as ‘human capital’ (Lefebvre & Merrigan, 2003). The concept of improving early learning and ‘school-readiness’ in children is also the impetus behind policy changes at the Ontario provincial level (e.g. full-day learning at the kindergarten level).

Childcare policy clearly is strongly linked to early childhood education (Gagné, 2003; McCain & Mustard, 1999); hence it is commonly referred to as ‘early childhood education and care’ or ‘early learning and childcare’. While a sound understanding of research in child development and early childhood education is relevant to childcare policy, I have deliberately left this area of research outside the scope of this thesis because the literature is extensive, largely inconclusive, and subject to research-design constraints that are influenced by the researcher’s policy position. Having said that, a brief review of the literature is helpful in providing a sense of the extensive research in this area. The following is a summary of some of the key issues in the child development literature.

The child development/early childhood education debate focuses on identifying the best conditions for optimal developmental outcomes. There is clear evidence that preschool years constitute the most important stage of life in terms of influencing brain development, subsequent learning, behaviour, and health, and that good early child development programs involving parents or other caregivers greatly improves child
development outcomes (McCain & Mustard, 1999). A substantial body of knowledge has examined the effects of childcare and maternal employment on these outcomes. The research findings, however, are mixed. Child outcomes are typically measured using a holistic approach that examines cognitive and social skills, emotional well-being, and physical development (Cleveland & Hyatt, 1997; Lefebvre & Merrigan, 2002; McCain & Mustard, 1999; NICHD, 2001; Norris et al., 1999). Two of the most significant longitudinal studies on child development are the National Institute of Child Health and Human Development (NICHD) Study of Early Childcare in the United States, started in 1991, and Canada’s National Longitudinal Survey on Children and Youth (NLSCY), started in 1994. Analyses using these longitudinal data have so far resulted in mixed conclusions. Some findings, for example, suggest that maternal employment has a negative impact on child development; others find a positive influence; and still others conclude that family income, rather than maternal employment, has the greatest bearing on child development (Blau & Grossberg, 1992; Burchinal, 1999; Gagné, 2003; Hill & O’Neill, 1994; James-Burdumy, 1999; Lefebvre & Merrigan, 2002; Lipps & Yiptong-Avila, 1999; McCain & Mustard, 1999; NICHD, 2004; Ruhm, 2000; Seifert et al., 2001).

3.3 Gender Equity: The Adult Worker Model Doesn’t Work

“Motherhood (is) the worst economic decision a woman could make.” (Crittenden, quoted in Crosby et al., 2004:676)

“During the period 1993 to 2004, average hourly earnings of (Canadian) women with children were 12% below those of women without children.” (Zhang, 2009)
Although childcare has been taken up as an early childhood education issue in public discourse and policy-making, it is equally a gender equity issue. We know that raising children demands responsibilities as well as monetary costs. The financial implications of motherhood — the so-called maternal wage gap, family gap or child penalty — are that mothers have lower average earnings compared to the earnings of women without children (Zhang, 2009). Further, inherent to the childcare problem is a tension between what is best for the child and what is best for the mother. The 2005-06 policy attention to childcare has not surprisingly sparked the voices of advocates for the recognition of women’s unpaid childcare work (Kids First, 2005; Smith, 2006; Tennier, 2006) and added to the debate about the goals of gender equity and how to achieve them.3

While gender equity goals are necessary, they are not sufficient to address the needs and circumstances of women with children (Freiler et al., 2001). Gender equity goals need to be embedded in a social responsibility framework that articulates society’s collective responsibility for children. Eichler (1997) makes an important point: Equality between men and women will not likely be achieved in a society that tolerates other inequalities and injustices. She questions how far we can push family

3 Nancy Fraser (1997) differentiates between gender equity and equality, arguing that gender equity is associated with either equality or difference (where equality means treating women exactly like men, and difference means treating women differently insofar as they differ from men). Although the use of gender equality is prevalent in feminist literature and policy discourse, I refer to the concept of gender equity in this thesis because it focuses on fairness rather than equality.
policies that embrace gender equity in the absence of such equality in the rest of society (Eichler, 1997:117). Similarly, a child-centred policy focus that does not explicitly identify and address the gendered dimensions of responsibility and caring for children will not necessarily advance women’s equality.

It has been clear for some time that the male breadwinner or patriarchal model of the family has been replaced by an adult worker or individual responsibility model (Eichler, 1997; Lewis & Giullari, 2005). Eichler (1997) argues that although the individual responsibility model has definite advantages over the patriarchal model because it is based on the notion of gender equity rather than male dominance, it too is inadequate. It has led to the development of ‘gender-neutral’ policies which are problematic because they ignore women’s childcare and other responsibilities (Eichler, 1997; Evans, 1997). It also elevates paid work as the primary citizenship obligation, upon which citizenship claims may be made.

Nancy Fraser’s (1997) influential universal breadwinner, caregiver parity, and universal caregiver models are the most frequently cited frameworks dealing with gender equity. Fraser emphasizes that these models are presented in an idealized form because neither the universal breadwinner nor the caregiver parity approaches, even in
an idealized form, delivers full gender equity. The principles\textsuperscript{4} for evaluating these gender equity models indicate that neither the universal breadwinner nor the caregiver parity approach come close to achieving gender equity. While both models have the potential to address the anti-poverty and anti-exploitation principles, they perform less well or even poorly in addressing the other principles, such as income equity and leisure time equality.

\textit{Universal Breadwinner Model}

The universal breadwinner model aims to foster gender equity by promoting women’s employment. Based on the goal of ensuring labour market equality for women, the model is dependent on employment-enabling services such as daycare. The vision of most U.S. feminists and liberals, it calls for the breadwinner role to become universalized so women may earn a family wage to support themselves and their families. For many feminists, the ability to compete on an equal footing with men in the labour market is the primary route to equality and independence.

The universal breadwinner model offers an ambitious vision and requires significant work-related services and reforms, such as childcare/eldercare, employment equity, pay equity, and anti-harassment measures. It also requires new policies to help

\textsuperscript{4} Fraser’s (1997) seven principles for evaluating gender equity models are: anti-poverty, anti-exploitation, income equality, leisure time equality, equality of respect, anti-marginalization, and anti-androcentrism.
change socialization, re-orienting women’s aspirations from domesticity to employment and men’s expectations toward acceptance of women’s new role. The model depends on the creation of massive numbers of sufficiently paying jobs to support a family. This does not appear to be the direction of the current economy, with its increasingly unstable conditions of employment. If there were enough secure, well-paying jobs available to women together with the necessary work-related services, the universal breadwinner model would do well in preventing poverty and exploitation. However, the model performs poorly in ensuring equality of leisure time. It makes the unrealistic assumption that most work associated with childbearing, parenting, and other family responsibilities can be shifted to the market and/or the state. The universal breadwinner model also performs poorly in overcoming androcentrism.

The model provides the greatest benefits to childless women and to those women whose domestic responsibilities can easily be shifted to the private market. The dual demands of work and family, or paid and unpaid work, may be avoided by privileged groups of women who have the resources to buy assistance for their unpaid workload. Those in lower-income households, on the other hand, are less able to pay for help with housework.

Caregiver Parity Model

The caregiver parity approach, on the other hand, validates women’s caregiving responsibilities. Rather than emphasizing labour market equality, the approach supports the work of women in caring for children, parents, and other relatives in the
household. It is premised on the assumption that women’s lives will not and need not look exactly like men’s, and many women will alternate between spells of employment and spells of caregiving. This is the vision of most Western European feminists and social democrats.

Feminists have long argued in favour of women’s financial independence. However, the pursuit of gender equity depends on the extent to which policies address issues of caregiving work. The caregiver parity model, like the universal breadwinner approach, is ambitious. The model organizes caregiving work very differently from the universal breadwinner approach. Reaching the goal of caregiver parity requires a caregiver allowance to compensate childbearing, childraising, and other forms of domestic labour. The model assumes that women will alternate between caregiving work and market work, and that a continuous social-insurance system would provide benefits during years of caregiving. Disability and pension benefits would be designed to provide equivalent treatment for caregiving work and employment. Workplace reforms would also be needed to make it easier to combine caregiving work and part-time employment as well as programs that allow women to make transitions among different life stages.

The model would do a good job of preventing poverty and exploitation. It would help to keep families of single mothers out of poverty during periods of part-time employment or unemployment. It would also provide non-employed wives with a direct source of income, thus reducing their dependence on their husbands. The
The caregiver parity model performs quite poorly, however, on income equality because it institutes two tracks of employment: a ‘mommy track’ and a breadwinner track. Two-adult families will have an economic incentive to keep one partner on the breadwinner track rather than share periods of caregiving work between them; thus, the two tracks will carry traditional gender associations. The caregiver parity model does not perform well in preventing women’s marginalization and at combating androcentrism. Finally, the model requires extensive public spending to pay caregiver allowances, not to mention major tax reform and a fundamental change in political culture.

Although both the universal breadwinner and caregiver parity models have the potential to prevent poverty, neither offers everything that is needed to meet the dual challenges of supporting families and reducing gender inequalities (Freiler & Cerny, 1998). The universal breadwinner approach is better at achieving income equality between men and women, while the caregiver parity model is comparatively better at combating androcentrism because it accords value to caring for children (Fraser, 1997). Promoting increased female participation in the labour market as the one and only route to women’s equality could have a contradictory impact on the well-being of women and children. This strategy increases women’s capabilities and choices, yet it also contributes to the devaluing of parenting. At the same time, calls for revalorizing of parenting are viewed with suspicion and, even, alarm by many feminists. They worry that a policy that stresses women’s role as mothers over their role as workers will jeopardize women’s equality because “it celebrates the very aspects of women’s lives that are at the root of their subordination” (Evans, 1996:164).
Both the universal breadwinner and the caregiver parity models are utopian, yet neither is utopian enough (Fraser, 1997). The universal breadwinner model would enable women to compete with men for paid employment; however, the fulfillment of homemaker responsibilities would go undervalued, and women who would likely continue to bear these would lose out economically. The caregiver parity model would enable women who stay at home and perform caregiving/homemaking functions to qualify for support, but since this would still be seen as lesser work, women would still be left behind. Thus, Fraser proposes that the key to achieving gender equity is to make women’s current life-patterns the norm for everyone and proposes a universal caregiver vision.

This third model integrates breadwinning and caregiving. Using a universal caregiver model, both women and men would be assumed to balance breadwinning and caregiving. The employment sector would assume that all workers are caregivers too, and men would qualify for entitlements on the same basis as women. This would mean that jobs would have a shorter workweek than present full-time jobs, and all would have the support of employment-enabling services. Unlike the universal breadwinner model, employees would not be assumed to shift all caregiving work to social services; some informal caregiving work would be publicly supported, some would be performed in households by relatives and friends, and some would be located in civil society (Fraser, 1997). This integrated model would promote equal participation of women and men in both employment and in civil society. Meyers & Gornick (2008) present a
similar model in their dual earner/worker approach “that honors the importance of earning and caring, and that prioritizes both gender equality and parental care for children” (Meyers & Gornick, 2008:320-321).

While the universal caregiver model is based on a restructuring of the institution of gender, it is necessary to achieve gender equity (Fraser, 1997). Fraser’s universal caregiver model has great potential to resolve the economic, social, and cultural problems of gender. Like any framework, this model also carries potential drawbacks. Olson (2002) argues that it does not take adequate account of the broader cultural milieu within which welfare regimes are situated. People’s actions and choices often reproduce the gender norms of their own socialization. When ‘enculturation’ is patriarchal, men will tend to choose and act in masculine ways and women will choose and act in feminine ways. As a result, Olson explains, culture and choice will work together to foil a social policy’s progressive effects. Furthermore, the transition to parenthood could produce gender differences and inequalities and move heterosexual couples to a more conventional division of labour (Fox, 2001). Research by Fox (2001) suggests that while much has changed in women’s lives over the past three decades, some of the patterns that seem especially resistant to changes are those involving negotiations between men and women. The division of household work and responsibility has stubbornly resisted significant change, suggesting that gender divisions are deeply embedded in social structure.
In the absence of a universal caregiver model on which to base income security and caregiving policies, some have argued that existing policies should be designed to provide an income package. For example, Hartmann and Spalter-Roth (1996) group women’s income-security policies into three basic categories of the principal income sources available to women: income from men; income from the labour market; and income from government programs. The increased use of income packaging, or the enhanced availability of income from more than one source, would meet the goals of improving women’s economic well-being and decreasing women’s dependence on any single source of income.

Issues of childcare and motherhood have split the feminist community. Morgan (2003) argues that feminists offer rhetorical support for childcare but their actual involvement in campaigns for those programs has been limited (due, in part, to the prioritization of other women’s issues). While some strands of the feminist movement have embraced a perspective that celebrates motherhood, it has not produced a change in focus toward childcare; rather, the emphasis has been on protecting the role of mothers in childrearing (Morgan, 2003). Feminist perspectives in economics, however, can advance the debate.

### 3.4 Through the Lens of Economics

“Social needs are not the frosting on the cake, as suggested by some, but rather the raison d’être of economic processes. How can it be otherwise? One can anthropomorphize, as in talk of a healthy economy, but without healthy people what could this possibly mean?” (Nelson, 1998:44)
Economic theory plays a key role in family policy because most policies are based on a combination of economics and politics. The following section highlights some of the major economic research topics and debates regarding childcare policy.

Economic perspectives have examined various issues related to childcare policy, such as the impact of childcare costs and wage rates on the labour force participation decisions of mothers (Powell, 1997), child development as a production process (Cleveland & Hyatt, 1997), the costs and benefits of investing in childcare (Cleveland & Krashinsky, 1998), the effect of childcare arrangements on child outcomes (Lefebvre & Merrigan, 2002), work incentives of recent welfare reforms in Canada (Cleveland & Hyatt, 2003), and the relationship between family income and child outcomes (Phipps & Lethbridge, 2006). Lefebvre & Merrigan (2008) have also examined the impact of the Québec childcare model on the labour supply of mothers with preschool children.

Economists have also explored the tension between the two objectives of childcare: facilitating the employment of parents and enhancing the development and well-being of children. They have also looked at the extent to which paying for high-quality childcare is — or as the evidence suggests — not a high-priority item for many households (Blau, 2001).

On a different theme but still in the realm of economics, notable research has been conducted to attempt to attach monetary value to household work, including caregiving (Chandler, 1994; Ironmonger, 1996). A standard economic measure, such as Ironmonger’s (1996) proposed gross household product, has yet to be adopted. This
new economic measure would provide a way to recognize the value of unpaid work and the role of the household in comparison to existing measures, such as the gross domestic product (GDP). Using a variety of methods, the value of Canadian household work in 1992 has been estimated to be between $210.8 billion and $318.8 billion, representing between 30.6 percent and 46.3 percent of GDP (Chandler, 1994). These attempts to attach a monetary value to caregiving lead to the basic problem with current economic theory, which is the emphasis on the market and the exclusion of social reproduction.

Economists also explore the supply and demand of childcare — a topic of interest to government. One example is the 2007 report of the Ministerial Advisory Committee on the Government of Canada’s Child Care Spaces Initiative, entitled “Supporting Canadian Children & Families: Addressing the Gap Between the Supply and Demand for High Quality Child Care” (Canada, 2007). Some childcare polices fall on the supply side of economics while others are on the demand side. For example, a parental leave program reduces the demand for infant childcare, while wages and grants affect the supply of childcare services. The most direct form of government assistance for childcare is the provision of care in public centres or through publicly financed and regulated private providers. Care that is privately provided but largely publicly funded is often termed a supply-side subsidy, or direct, public provision. Demand-side subsidies, on the other hand, are provided to parents to purchase private care directly (Meyers & Gornick, 2003).
At a fundamental level, the problem with conventional economic perspectives is their emphasis on the market and the attendant devaluation of social and environmental concerns. Economic policies are derived from analyses that exclude the social sphere (Folbre, 2001; Nelson, 1998). Existing economic theories do not capture the value of relationships or social networks, such as grandparents providing childcare and related help to families or neighbours providing childcare services on an exchange basis. Furthermore, as Barker (2005) argues, masculinist values are deeply embedded in theoretical and empirical aspects of economics. Conventional economics rationalizes existing social hierarchies based on gender, race, and class. Feminist economics and gender analyses highlight these entrenched views (Barker, 2005).

Folbre (2001) and Nelson (2000) examine the connections between the traditional tasks that were performed by women in the realms of the family and social relationships, and those that were performed by men in the public worlds of markets and government. Some women’s tasks were largely instrumental (e.g. cooking and cleaning), while others contained more personalized and emotional components. As women increasingly moved into the realm of paid work, this social contract began to change and many of these traditional personal tasks are increasingly being performed in the market and involve the exchange of money. This mixing of the realms of ‘love’ and ‘money’ has consequences for economic analysis and public policy. The current intellectual conceptualization of these economic issues is inadequate and problematic (Folbre, 2001; Nelson, 2000).
3.5 Provisioning: Understanding Women’s Work

Childcare is a domain of women’s work that may be explored using the concept of ‘provisioning’ (Barker, 2005; Nelson, 1998 and 2000; Neysmith & Reitsma-Street, 2005; Neysmith et al., 2004; Power, 2004). Rooted in feminist economics, the concept is a useful approach to understanding the work done by women. Provisioning refers to the work of securing resources and providing the necessities of life to those for whom one has relationships of responsibility. It is a more nuanced and complex way to think about the work that women do.

Women’s work is typically considered in relation to family and the market. When it is carried out in the family, it is considered caring; when it is performed in the market, it is employment. Over the years, numerous approaches from different disciplines have tried to conceptualize this range of work. Caregiving has often been analysed by dichotomizing the concept between public and private, professional and non-professional, paid and unpaid care, and studying only one half of the dichotomy. However, the everyday reality of care tends to transcend these dichotomies (Sipilä & Kröger, 2004). Concepts such as paid employment, the underground or informal economy, household and domestic work, caring work, volunteer and community work, and the ‘third shift’ fail to capture the networks and strategies that women develop to meet the multiple demands of caring for other individuals (Neysmith & Reitsma-Street, 2005; Neysmith et al., 2004).
Previous research using provisioning as a key concept has identified various activities and strategies that women carry out for their children and others for whom they are responsible (WEDGE, 2008). Tables 4 and 5 illustrate the provisioning activities that I used in coding my interview data.

Table 4: Types of Provisioning Activities

<table>
<thead>
<tr>
<th>Visible Provisioning Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Engaging in formal and informal work in the labour market:</strong> Activities generally associated</td>
</tr>
<tr>
<td>with jobs or careers done under market norms; contingent, casual, part-time employment; unpaid</td>
</tr>
<tr>
<td>work in family business; work placements, e.g. fulfilling community hours as student/welfare</td>
</tr>
<tr>
<td>requirements; traditional education activities, such as going to school, upgrading skills,</td>
</tr>
<tr>
<td>community training programs.</td>
</tr>
<tr>
<td><strong>Providing caring labour in the domestic sphere:</strong> Activities centred on running the</td>
</tr>
<tr>
<td>household; domestic labour, caring for children and other relatives; non-market mental,</td>
</tr>
<tr>
<td>emotional, and physical caring labour for kin and non-kin.</td>
</tr>
<tr>
<td><strong>Undertaking commitments in the community sphere:</strong> Formal and informal volunteer activities</td>
</tr>
<tr>
<td>in community organizations (including places of worship); creating and maintaining networks,</td>
</tr>
<tr>
<td>visiting, and organizing social gatherings.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Invisible Provisioning Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sustaining health:</strong> Activities generally associated with relationships women had with</td>
</tr>
<tr>
<td>children and others who lived with disabilities, chronic conditions, or mental health issues,</td>
</tr>
<tr>
<td>administering medicines, preparing special diets; health management tasks like scheduling,</td>
</tr>
<tr>
<td>coordinating, and going to medical appointments.</td>
</tr>
<tr>
<td><strong>Making claims:</strong> Activities encompassing the work of advocating for oneself and others for</td>
</tr>
<tr>
<td>services and money; putting in the time learning where to look for financial assistance and</td>
</tr>
<tr>
<td>other resources; learning to present oneself, dress, talk, and act in different settings;</td>
</tr>
<tr>
<td>learning to make arguments with evidence and asserting one’s rights; convincing family,</td>
</tr>
<tr>
<td>friends, landlords, bureaucrats, professionals, and volunteers in medical, education, social</td>
</tr>
<tr>
<td>and community services that one is worthy and/or that claims are legitimate.</td>
</tr>
<tr>
<td><strong>Ensuring safety:</strong> Activities undertaken to bolster the safety of self and children, such as</td>
</tr>
<tr>
<td>finding safe housing and dealing with violence against themselves and others.</td>
</tr>
</tbody>
</table>

Table 5: Types of Provisioning Strategies

<table>
<thead>
<tr>
<th>Daily Practical Strategies</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Creating and managing resources:</strong> These are ways women deal</td>
<td>These are ways women deal with the exigencies of daily living, including approaches to managing and gathering resources needed to</td>
</tr>
<tr>
<td>with the exigencies of daily living, including approaches to</td>
<td>make ends meet, such as exchanges, saving, selling items, strategic budgeting, juggling bills and priorities, making sacrifices,</td>
</tr>
<tr>
<td>managing and gathering resources needed to make ends meet, such</td>
<td>going without luxuries, cutting back.</td>
</tr>
<tr>
<td>as exchanges, saving, selling items, strategic budgeting,</td>
<td></td>
</tr>
<tr>
<td>juggling bills and priorities, making sacrifices, going</td>
<td></td>
</tr>
<tr>
<td>without luxuries, cutting back.</td>
<td></td>
</tr>
<tr>
<td><strong>Engaging in risky behaviours:</strong> These are ways women</td>
<td>These are ways women anticipate and respond to uncertain futures with the resources at hand, often involving short-term/long-term</td>
</tr>
<tr>
<td>anticipate and respond to uncertain futures with the resources</td>
<td>trade-offs, and what appear to be risky behaviours, such as going without food, getting behind in the rent in order to pay other</td>
</tr>
<tr>
<td>at hand, often involving short-term/long-term trade-offs, and</td>
<td>bills, returning to violent relationships for economic reasons.</td>
</tr>
<tr>
<td>what appear to be risky behaviours, such as going without</td>
<td></td>
</tr>
<tr>
<td>food, getting behind in the rent in order to pay other bills,</td>
<td></td>
</tr>
<tr>
<td>returning to violent relationships for economic reasons.</td>
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</table>

<table>
<thead>
<tr>
<th>Transformative Strategies</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Re-creating identity:</strong> These are ways that women take</td>
<td>These are ways that women take time to care for themselves; to do activities they find meaningful, such as doing exercises,</td>
</tr>
<tr>
<td>time to care for themselves; to do activities they find</td>
<td>pursuing spiritual, leisure, social, and non-formal learning opportunities.</td>
</tr>
<tr>
<td>meaningful, such as doing exercises, pursuing spiritual,</td>
<td></td>
</tr>
<tr>
<td>leisure, social, and non-formal learning opportunities.</td>
<td></td>
</tr>
<tr>
<td><strong>Resisting stereotypes and stigma:</strong> These are ways that</td>
<td>These are ways that women re-claim status, re-define and take up administrative and ideological categories imposed upon them.</td>
</tr>
<tr>
<td>women re-claim status, re-define and take up administrative</td>
<td>At times they strategically claim identities (e.g. client) to access resources; at other times, they actively challenge stereotypes</td>
</tr>
<tr>
<td>and ideological categories imposed upon them. At times they</td>
<td>and assumptions that define them in ways that they do not identify with (e.g. as youth, being poor, etc.).</td>
</tr>
<tr>
<td>strategically claim identities (e.g. client) to access</td>
<td></td>
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<tr>
<td>resources; at other times, they actively challenge stereotypes</td>
<td></td>
</tr>
<tr>
<td>and assumptions that define them in ways that they do</td>
<td></td>
</tr>
<tr>
<td>not identify with (e.g. as youth, being poor, etc.).</td>
<td></td>
</tr>
<tr>
<td><strong>Envisioning a future:</strong> These are efforts to define and</td>
<td>These are efforts to define and envision how one might provision in the future, with activities ranging from making concrete</td>
</tr>
<tr>
<td>envision how one might provision in the future, with</td>
<td>timelines and outlining specific tasks, to more general articulations by participants of how they would like to experience their</td>
</tr>
<tr>
<td>activities ranging from making concrete timelines and</td>
<td>future lives. Included here are women’s descriptions of what is imagined, limits to imaginings, and how futures are imagined.</td>
</tr>
<tr>
<td>outlining specific tasks, to more general articulations by</td>
<td></td>
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<tr>
<td>participants of how they would like to experience their</td>
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<tr>
<td>future lives. Included here are women’s descriptions of what</td>
<td></td>
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<tr>
<td>is imagined, limits to imaginings, and how futures are</td>
<td></td>
</tr>
<tr>
<td>imagined.</td>
<td></td>
</tr>
<tr>
<td><strong>Negotiating boundaries of responsibilities:</strong> These are</td>
<td>These are ways women direct/take control of/strategically manipulate their relationships of responsibilities. They generally</td>
</tr>
<tr>
<td>ways women direct/take control of/strategically manipulate</td>
<td>negotiate these boundaries by distributing their work across market, home/domestic, and community lives; developing new or</td>
</tr>
<tr>
<td>their relationships of responsibilities. They generally</td>
<td>setting limits on existing relationships with friends, families, acquaintances, and networks that challenge existing boundaries</td>
</tr>
<tr>
<td>negotiate these boundaries by distributing their work across</td>
<td>around their work.</td>
</tr>
<tr>
<td>market, home/domestic, and community lives; developing new</td>
<td></td>
</tr>
<tr>
<td>or setting limits on existing relationships with friends,</td>
<td></td>
</tr>
<tr>
<td>families, acquaintances, and networks that challenge existing</td>
<td></td>
</tr>
<tr>
<td>boundaries around their work.</td>
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</tbody>
</table>

**Source:** WEDGE, 2008.

### 3.6 Connecting Childcare Policy and Low-income Women

There are numerous ways that women meet their caregiving needs with respect to childcare. These include turning to family members, relatives, friends, or ex-spouses; hiring a domestic worker; finding affordable services; reducing the amount of work outside the home; or taking a child to the workplace.
In order to effectively improve childcare policies, it is essential to gain a deeper understanding of how the political, economic, and social environments shape the childcare ‘choices’ of low-income women and how these women perceive ‘quality’. Using the concept of provisioning, my research looks at the strategies women adopt to provide for their children and how childcare policy impacts on these strategies.

The research tells us that income and class play key roles in the way childcare policy is experienced by women. The particular childcare arrangement selected by parents is based on socio-demographic factors such as family income, family structure and ethnicity (NICHD, 2004). There is also a clear relationship between family income and child outcomes. Higher family income is almost always associated with better child well-being (Phipps & Lethbridge, 2006). Understanding the relationship between childcare and income continues to be an important direction for future research.

Bushnik (2006) notes that low-income families have few, if any, childcare choices, and they must juggle numerous childcare arrangements, a stressful situation for both parents and children. Children from these families are more likely than those from high-income families to be in two care arrangements. Similarly, children who live with a single parent are more likely to be in two care arrangements compared to children in two-parent families (Bushnik, 2006).

The public attention to childcare has resurrected the debate around the extent to which children’s interests are congruent with their mothers’ interests, that is, whether that which is best for children is also best for their mothers, and whether daycare is
good for parents or good for children (Lasch-Quinn, 2000; Tennier, 2006). 

Furthermore, childcare has become an issue of interest to scholars, who seek to understand the gendered assumptions underpinning much social policy. They are gauging the extensiveness of publicly funded childcare and such programs as paid parental leaves on gender policies. The provision of extensive publicly funded childcare indicates support for women’s employment, while opposition to public daycare may signal a desire to maintain traditional family arrangements.

In the preceding chapters, I have defined childcare policy broadly as the range of programs which assists families in accommodating paid work and parenthood. These include childcare-fee subsidies, tax deductions, maternity/parental leaves, child benefits/allowances, and the foreign Live-in Caregiver Program. Unfortunately, this bucket of programs in Canada is full of holes. Making international comparisons on such a wide scope of programs is difficult, and the use of welfare state typologies has not proved to be a useful way to describe childcare policy. However, through a comparative review of the literature, a number of themes become evident. First, there is no common policy on reconciling work and family obligations, nor a single model of childcare. European countries differ widely in their provision of childcare strategies and the extent to which they rely on informal care services. Second, in English-speaking countries, public provision of childcare tends to be limited.

Political movement in Canadian childcare policy has resulted from framing the issue in terms of child development/early learning rather than gender equity. Inherent
to the childcare problem, however, is tension between what is best for the child versus what is best for the mother. The goal of gender equity has been subject to much feminist debate around the best way to achieve it, and Nancy Fraser’s (1997) universal breadwinner, caregiver parity, and universal caregiver models are the most often-quoted analyses of the gender equity debate. Recent perspectives from feminist economists, however, offer compelling frameworks for analysis, and the concept of provisioning is one such analytical tool.
Chapter 4: A Method for Deepening Our Understanding

4.1 Purpose and Objectives

The central research question of my study is: how does childcare policy assist and constrain low-income women’s strategies of provisioning for their children? The overall purpose of the research is to document the types of provisioning activities that low-income urban women carry out for their children and to examine how childcare policy helps and hinders these mothers with their responsibilities. The specific objectives were:

- to document the provisioning activities low-income women perform for their children;
- to describe the relationship between childcare policy and women of varying levels of income; and
- to examine the notion of choice in childcare.

My research addressed an unanswered question raised in childcare literature. Previous research has identified the need for more exploratory studies to address gaps in knowledge and the limitations of available data sets (Bushnik, 2006; Kohen et al., 2006). Both Bushnik (2006) and Kohen et al. (2006) indicated that further research could explore how parents make decisions around childcare arrangements and the reasons that they choose one type of childcare arrangement over another.

The research question for my study was developed in part from the aforementioned gap in the literature and also the WEDGE (Women at the Edges of the New Economy) research project: Women, Provisioning and Community. The WEDGE
research was conducted in six sites across Canada (see Appendix B) and was based on the concept of provisioning and examined the work that women do in their households, communities, and jobs. The three-year study, which included interviews with more than 100 women, has been published in numerous articles (Neysmith et al., 2004; Neysmith et al., 2009; and Neysmith & Reitsma-Street, 2005). My dissertation research is informed by the design and findings of the WEDGE project; however, it is not part of the actual study. The women interviewed as part of my doctoral research are separate from the 100 women in the previous WEDGE study.

A key contribution of my research is that it documents the activities that low-income women undertake to provision for their children, the constraints under which they provision, and the provisioning strategies that they employ. My research also contributes to our knowledge of childcare policy by providing a better understanding of its impact on low-income mothers and the factors that influence their childcare decisions.

4.2 Theoretical Paradigm

“All research is interpretive; it is guided by the researcher’s set of beliefs and feelings about the world and how it should be understood and studied.” (Denzin & Lincoln, 2008:31)

The constructivist-interpretive paradigm provides the theoretical milieu for this research. My ontological, epistemological, and methodological assumptions were consistent with an interpretive, or constructivist, approach to social science (Denzin & Lincoln, 2008; Guba & Lincoln, 1998; Lincoln & Guba, 2000a; Schwandt, 1998). The
ontological position of the interpretive/constructivist paradigm — based on an assumption of multiple social realities — is an important element of my research approach.

Aspects of critical and feminist theory also play a formative role in the research design. Critical theory analyzes competing power interests among groups and individuals within a society — identifying the winners and losers in particular social arrangements (Kincheloe & McLaren, 2000). My research looks at the winners and losers in the social arrangement called childcare policy.

With respect to feminist thought, the patriarchal influence on our family policies was a point of departure for my analysis. The influence of patriarchy is evident in Canadian family policies, which have not succeeded in accommodating parenthood and paid work (Evans, 1997; Eichler, 1997; Freiler et al., 2001). As a country, Canada remains ambivalent about the role of women in the labour market in the sense that so-called gender-neutral policies, based on the universal breadwinner model, have serious shortcomings. Questions about how we support those who care for children have never been resolved; thus, women are not adequately supported as either mothers or earners.

The theoretical paradigm for my research was influenced by my beliefs, my social location in the world, and my past experiences — both personal and professional. I am an upper middle-class white married mother of three children. I am also an immigrant (a refugee from communist Europe) who grew up in one of Toronto’s priority (i.e. low income, high needs) neighbourhoods. I have been a low-income single
mother. From a professional perspective, my experience includes working for the Canadian federal government as a program consultant with the Live-in Caregiver Program, and for the Ontario government as a policy analyst with the Ministry of Children and Youth Services. These personal and professional experiences shaped my beliefs, interest, and approach to the study.

4.3 Research Strategy

“Case studies are a common way to do qualitative inquiry.”
(Stake, 2008:119)

I used a qualitative case study approach in conducting this research. A case study research strategy is commonly used in the social sciences, including the two disciplines in which this research is situated: social work and political science (Stake, 2008; Yin, 2003); and it is an appropriate type of narration in the constructivist paradigm (Denzin & Lincoln, 2008). Yin (2003) defines the case study method as a “mode of empirical inquiry that examines contemporary phenomena in a real-life context and uses multiple sources of evidence” (Yin, 2003:13).

There is some debate regarding the definition of case study and whether it is a strategy/method (Gillam, 2000; Yin, 2003; Denzin & Lincoln, 1998) or a distinct research paradigm. Van Wynsberghe and Khan (2007), for example, argue that the definition of case study is problematic because it has been used as a catch-all category for a variety of research methods and designs. The authors define case study as “a transparadigmatic and transdisciplinary heuristic that involves the careful delineation
of the phenomena for which evidence is being collected” (Van Wynsberghe and Khan, 2007:80). They argue that a case study approach is neither a method, nor a research design, nor a methodology. Gillham (2000), on the other hand, describes a case study as being the main method within which different sub-methods (e.g. interviews, observations, etc.) are used.

Despite the somewhat divergent views on the definition of case study, there is general agreement that the case researcher is responsible for a series of major conceptual responsibilities. These are:

- determining the object of study or unit of analysis (i.e. bounding the case);
- selecting phenomena, themes, or issues (i.e. developing the research questions);
- triangulating key observations; and
- developing assertions of generalizations about the case.

**Object of Study/Unit of Analysis**

In case study research, the object or phenomenon of inquiry (i.e. the case, or unit of analysis) is sometimes thought to be a single object such as an individual person or an organization; however, this is rarely the situation. Yin (2003) points out that the case can be an event or entity that is less well-defined than an individual. The case can be a program, a collection, a population, or a responsibility (Stake, 2000). It can also be a concept, a process, an activity, or an event (Van Wynsberghe and Khan, 2007). In a study relating to economics, for example, the unit of analysis might be a country's economy, an industry in the world marketplace, or an economic policy (Yin, 2003). It is
essential that the case be bound by time and activity (Creswell, 2003). The more abstract the phenomenon under study, the more important it is to delineate the boundaries of the case. The object of study (i.e. the ‘case’) in my research was the provisioning activity of 20 low-income mothers who lived in a specific community in Toronto, Canada. The case study was also bound by time in that it examined these women’s lives and childcare policy as they were in 2007. Where possible, 2007 statistics are used; however, if they are not available for that year, then the closest year to 2007 is used.

**Research Question**

The case study method is well-suited to answering ‘how’ research questions (Yin, 2003) and for understanding how people behave ‘in context’ (Gillman, 2000). It is particularly useful when the boundaries between the phenomena and the context are not clearly evident (Rubin & Babbie, 2001; Yin, 2003). My research question — how does childcare policy assist and constrain low-income women’s strategies of providing care for their children—is appropriate in seeking to understand the context within which low-income mothers provision. A case study is often organized around a small number of research questions (Stake, 2000); thus, in order to tackle the central question, I structured the research around several sub-questions:

- What activities do low-income urban women undertake to provision for their children?
- What are the constraints under which they provision?
- What strategies do they employ in providing care for their children?
Which childcare programs/policies support low-income urban women and why?

Which programs/policies are not available to low-income women and benefit only high-income women, and why?

What is the relationship between childcare policies and programs on low-income women’s capacity to provision for their children?

**Triangulation**

“The principle of triangulation emphasizes the value of testing hypotheses with different methods that do not share the same methodological weaknesses. In this way, we build confidence in our assertions about the social world.”

(Singleton & Straits, 1999:409)

Data triangulation plays a key role in my research method because case studies rely on multiple sources of evidence, such as interviewing, observing, and document analysis (Creswell, 2003; Denzin & Lincoln, 1998; Yin, 2003). I use triangulation to gain a deeper understanding of childcare policy by combining data drawn from different sources. My sources of data include interviews with research participants, discussions with key informants, and analysis of available documents and statistics.

In reflecting on the use of triangulation in my research, I encountered one of many fiercely debated theoretical topics. The question of whether triangulation is considered a validation strategy (Flick, 2004) or an alternative to validation (Denzin & Lincoln, 2008) led to the deeply contested realm of whether validity and reliability are appropriate tests for qualitative research.

Denzin & Lincoln (2008) argue that the constructivist paradigm assumes a relativist ontology (there are multiple realities), a subjectivist epistemology (knower
and respondent co-create understandings), and a naturalistic (in the natural world) set of methodological procedures. Terms such as credibility, transferability, dependability, and confirmability replace the four conventional benchmarks of rigor associated with the positivist and post-positivist paradigms, those being internal and external validity, reliability, and objectivity. At the same time, renowned case study researchers such as Yin (2003) go to great lengths to explain how the case study method addresses the usual positivist criteria of validity, reliability, and objectivity.

Given that qualitative researchers apply these criteria in different ways, depending on their level of comfort or contempt for the positivist origins of research (Olesen, 2000), I addressed the research criteria as follows:

- **Credibility (internal validity)** through content analysis, member checking, and application of theory;
- **Transferability (external validity)** through application of theory and comparison of sample to demographic data;
- **Dependability (reliability)** through data triangulation and audit trails; and
- **Confirmability (objectivity)** through data triangulation and member checking.

During the data collection phase, I used triangulation, member checking, and audit trails to ensure dependability and reliability. Credibility and transferability were addressed through the use of content analysis (Ryan & Bernard, 2000) and the application of theory (Yin, 2003). These concepts are discussed in more detail later in Section 4.4 (Data Collection) and Section 4.6 (Data Management and Analysis).
Developing Assertions of Generalizations

Another contested area in case study research is the role of generalization (Hammersley & Gomm, 2000). Leading qualitative researchers Lincoln & Guba (2000b) point out that “the trouble with generalizations is that they don’t apply to particulars” (Lincoln & Guba, 2000b:27), and they argue that there are problems with the concept of generalizability and its appropriateness in social science. Stake’s (2000) position is that case studies facilitate learning on the part of those who use them and that this involves a different kind of generalization from that which is characteristic of science. Gomm et al. (2000) adopt a contrasting position, arguing that case studies research is appropriate for putting forward empirical generalizations. The focus of my research was on understanding the complexities of the case: to document women’s provisioning activities and to gain a deeper understanding of the relationship between childcare policy and low-income women.

4.4 Data Collection

“In one sense all research is case study: there is always some unit, or set of units, in relation to which data are collected and/or analysed.” (Hammersley & Gomm, 2000:2)

In keeping with the case study research method, I collected data through multiple sources including interviews with mothers and key informants, existing literature, and Statistics Canada data sources. I submitted a formal Access to Information request for federal government data that were not readily available. Key
informant interviews involved discussions with policy analysts who work on childcare policy in Ontario and in Toronto. My own observations, informal conversations with colleagues and acquaintances, and tacit knowledge (Stake, 2000) were a source of data, although these played a minor role. The single largest source of data came from the interviews with low-income mothers (i.e. the research participants). I conducted semi-structured individual interviews with 20 low-income women in 2007. The semi-structured interview format is an essential form of interviewing in case study research (Gillman, 2000). It is a source of data with a level of depth and richness that cannot be obtained through other data-collection methods.

4.5 Interviews with Low-income Mothers

The research participants lived in an urban community that had high proportions of low-income families. The community was one of Toronto’s ‘priority’ neighbourhoods. Priority areas are 13 Toronto communities that have a high concentration of poverty and that the City has identified as being at greater risk of negative outcomes than others (City of Toronto, 2006). Figure 3 highlights the 13 communities.
Priority neighbourhoods have persistently low incomes, a high proportion of new immigrants, and an unequal distribution of services and facilities. The area I selected for my research has much lower incomes, more children, and more single parents compared to the rest of Toronto (see Appendix C for details). Nearly one-third of the families in the community were headed by a lone parent and almost one-quarter of the families depended on government transfers such as welfare. Compared to the rest of the city, the community had a larger Black population and a larger proportion (more than 50 percent) of non-Canadian-born residents (Statistics Canada 2008). The majority of the population in this priority neighbourhood worked in blue-collar
occupations, and one-third of the adult population did not have a high school diploma. The community has experienced increasing levels of gun violence and criminal gang involvement. It had the highest homicide and violent crime rate in the city in 2007 (Statistics Canada, 2008; Toronto Police Services, 2007). Appendix C provides detailed characteristics of the community.

Each of the participants was either a recent immigrant and/or a member of a visible-minority group and/or a single mother. I chose to study urban low-income mothers because of the size of this segment of the population. In 2001, the vast majority of Canadians (79.6 percent) lived in urban locations, and Ontario had one of the highest concentrations of urban dwellers (CCSD, 2006). My research focuses on women because they continue to have higher poverty rates than men, due mainly to the prevalence of poverty among single-parent mothers and unattached women (NCW, 2006). The National Council of Welfare’s 2002-03 Poverty Profile found that although male lone-parent families were on the rise, there was a notable gap between the poverty rate of 48.9 percent for female lone-parent families and the rate of 20 percent for single-parent fathers (NCW, 2006). Because the majority of Canadian families live in two-parent households, with 70.4 percent being married and 13.8 percent living in common-law relationships (CCSD, 2006), my study included both two-parent and female lone-parent families.

My research involved women from visible-minority groups. In 2006, more than two million people in Ontario identified themselves as being visible minorities and
almost all lived in Toronto, where 43 percent of the city’s total population fell in the visible minority category (Statistics Canada, 2009). I knew from my previous research and volunteer experience in the community that the majority of the research participants would be women from visible-minority groups. My study also looked at recent immigrants, most from visible-minority groups. Of the 580,740 new immigrants who came to Ontario between 2001 and 2006, 77 percent (or 447,925) settled in Toronto (Statistics Canada, 2009). Issues of poverty, housing, and employment discrimination manifest themselves in the lives of recent immigrants from visible-minority groups and are particularly significant at the neighbourhood level (Hulchanski, 2006).

**Sampling and Recruitment**

Research participants were recruited through their membership at a community-based organization serving low-income families in the area. Riverview (pseudonym) had been providing services in the community for 25 years. It was chosen as a research site because of its concern about the socio-economic challenges of the community, its history of community responsiveness, and its success in organizing community programs/activities. There were very few agencies in this part of the city that served low-income mothers, and this was one of the reasons why the area was designated a priority neighbourhood by the City of Toronto. Unlike the other few agencies serving the community, Riverview focused solely on serving low-income families with young children. The other agencies serving the area served a broader
client segment, providing a range of services for individuals of various age groups.

Riverview’s Board of Directors gave permission for potential research participants to be informed about the study and to be invited to participate. Participants were recruited through recruitment flyers posted on bulletin boards throughout the organization (see Appendix E). Staff members of Riverview also announced the study at some of the organization’s programs.

The sample was representative of a significant marginalized population — that being low-income urban mothers of which a large proportion was lone-parent and/or visible minorities and/or recent immigrants. A sample size of 20 participants was selected because it was appropriate in terms of both feasibility and data saturation. I used purposive sampling to ensure variation in marital status, age, number of children, source of income, and citizenship/immigration status. The research participants were adult women who were mothers of children between the ages of 0 and 12 and who identified themselves as living on a low income. Several of the participants had older children or adult children, in addition to those who were under 12 years of age. One participant was a mother of five and had 11 grandchildren. Potential participants who expressed interest in the study were screened over the phone using two questions: Do you have children under the age of 12, and are you living on a low income? The children’s age category of between 0 and 12 years old was selected because families in the community were extremely concerned about both preschool childcare as well as the care of school-age children before and after school hours. I knew from my previous research and volunteer experience that mothers in the community were extremely
concerned about the shortage of recreational programs, the inability of children in the community to participate in programs that were available, and problems of drugs, guns and violence.

Verification of the respondents' level of income was not a condition of their participation. Riverview does not normally conduct individual means assessments for its program participants, with the exception of those programs that require such an assessment as a condition of the funding agreement. The demand for programs and services was so great in the community, and the prevalence of low income so evident, that it would have been considered unnecessarily bureaucratic and disrespectful to the participants if they had to complete a means-assessment form prior to attending Riverview's programs.

Given that most of the program participants at Riverview were visible minorities and/or recent immigrants (i.e. within the past 10 years), the sample included women from these categories. In terms of their housing status, the vast majority of participants were tenants. Only one (married) participant was a homeowner. Just over half of the research participants lived in subsidized housing.

The first 20 women who contacted me about participating in the research met the criteria of having children of the relevant age and low incomes. Only two additional women expressed interest but did not participate in the research: One indicated that she did not meet the low-income criterion, and the other did not attend for the interview. Appendix D provides descriptions of each of the women who were
interviewed. The anticipated and actual diversity breakdown is illustrated in Table 6, below.

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Number of Children</th>
<th>Source of Income</th>
<th>Immigration Status</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Anticipated</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5-10 married</td>
<td>0-5 one child</td>
<td>8-10 employment income</td>
<td>5-10 Canadian-born</td>
</tr>
<tr>
<td>3-5 common law</td>
<td>5-10 two children</td>
<td>5-10 government assistance (Ontario Works/ODSP/EI)</td>
<td>5-10 recent immigrants (&lt;5 years)</td>
</tr>
<tr>
<td>5-10 lone-parents</td>
<td>5-10 three or more children</td>
<td>0-3 other income</td>
<td>5-10 immigrants (&gt;5 years)</td>
</tr>
<tr>
<td>1-3 widowed</td>
<td></td>
<td></td>
<td>1-3 refugees</td>
</tr>
<tr>
<td><strong>Actual</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 married/common law</td>
<td>5 one child</td>
<td>6 husband’s employment income</td>
<td>3 Canadian-born</td>
</tr>
<tr>
<td>11 lone-parents</td>
<td>7 two children</td>
<td>2 own employment income</td>
<td>4 recent immigrants (&lt;5 years)</td>
</tr>
<tr>
<td>1 widowed</td>
<td>8 three or more children</td>
<td>12 government assistance</td>
<td>12 immigrants (&gt;5 years)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>1 refugee</td>
</tr>
</tbody>
</table>

As the researcher, I had no direct relationship to the participants. Although I had been a volunteer at the agency in the past, I was not in that role at the time of the research. The nature of the voluntary involvement had been such that I had contact only with agency staff and members of the Board of Directors. I did not have previous contact as a volunteer with the agency’s program participants or potential research participants.
Semi-structured Interviews

“Find out what others think and know, and avoid dominating your interviewees by imposing your world on theirs.” (Rubin & Rubin, 2005:5)

The interviews were conducted in a meeting room at Riverview and lasted between one and two hours each. Two hours per woman were designated, including between 60 and 90 minutes for the interview and 30 minutes for follow-up conversations if necessary. The interviews were held during elementary school hours. In the case of mothers who had children in half-day kindergarten, the interviews were scheduled at a time that allowed the women to drop off their children, attend the interview, and return to school in time for dismissal. For mothers who were employed or attending school, the interviews were held on their day off.

This was essentially a study of women’s experiences with childcare policy based on the question: how does childcare policy assist and constrain low-income urban women’s strategies of providing care for their children? The participants were asked about their experiences in providing care for their children. I did not explain the policy to the participants, nor were the participants asked to read policy segments and relate them to their experience.

I used a series of qualitative questions to guide the interviews (see Appendix F). The questions were based on those used in the WEDGE project and were organized under five general topics: the child/ren; the activities women undertake in caring for their children; childcare arrangements and related childcare programs/policies;
strategies around their time, expenditures, and resources; and future expectations. My interview questions were also informed by a large U.S. study about how low-wage working mothers manage childcare (Chaudry, 2004). Among other questions, the study asked: “What strategies do mothers employ and develop over time to arrange childcare and on which sources of assistance do mothers rely?” (Chaudry, 2004:26).

Most of the participants answered the questions without hesitation, with some interviewees offering more detailed responses than others, as would be expected. Half of the participants (10) had limited English language skills and at times I had to either request clarification or provide encouragement to those who felt their English skills were weak. Each of the participants — whether recent immigrant or not — provided meaningful and relevant responses to the questions.

Compensation

The study was conducted with women who lived on low incomes and with restricted options. As the researcher, it was important that I indicated an appreciation for participation and provided resources so that low-income women were not subsidizing the research with time or money that was in short supply. Food was provided at each interview and at the follow-up group session. If for some reason a participant were not able to complete the entire interview, she would still have received the full compensation; however, this did not happen in any of the interviews.

The participants each received an honorarium of $25 and were offered bus tickets as well as $20 reimbursement for childcare expenses. Six of the 20 participants
took bus tickets. Surprisingly, only two participants accepted the childcare expense reimbursement. Given that this was a study about childcare policy, I noted the types of childcare arrangements that the participants made in order to attend the interviews. Of the two participants who accepted the childcare reimbursement, one had arranged childcare from her sister and the other from a friend. Of the remaining 18 women who did not take the $20 childcare money, 12 had older children who were at school at the time of the interviews. Two women left their preschool-aged children with their husbands, and one mother was able to leave her children at the childcare respite program offered on-site at Riverview. Three women brought babies under the age of six months to the interview (two of which also had older children in school), and one brought both of her preschool-aged children to the interview.

**Benefits, Risks and Confidentiality**

The study requested the voluntary participation of adult women. The risks to participants were minimal and, primarily, emotional. The subjects were from a vulnerable population, and potentially it could be stressful to speak about the difficulties providing necessities for living when there are few resources and limits on what one can do individually or as a group. The decision on whether to interview women individually or in dyads/groups was a difficult one. My earlier research and experience in the community suggested that some women would feel more comfortable being interviewed in pairs; however, confidentiality/anonymity could not be guaranteed in these cases. Thus, the sample was limited to those respondents who felt
comfortable being interviewed individually. I was aware that some data would be excluded by limiting the sample in this way, but this was preferable to risking confidentiality when interviewing pairs.

The women participating in the individual interviews were asked questions about their provisioning responsibilities and their experiences with childcare policies. It was not anticipated that these questions would be perceived as intrusive or of a sensitive nature. Riverview provided referrals to a range of services on an ongoing basis. If any research participants indicated a desire for counseling services following their participation in the study, Riverview would provide a list of such services. One concern that could arise from the interview was if the women spoke of provisioning activities that were not known to social assistance authorities. It was therefore important to assure participants of complete confidentiality and safety. This assurance was achieved in the following way:

- Participants’ names were not requested. Written material was identified with a pseudonym and the date and time of the interview. Participants were asked to use first names only or an alias. Other household members were also referred to by first names only or an alias.

- I kept no real names or identifying information in the research notes, papers and presentations. Only pseudonyms were used.

- The interviews were conducted at the community office, which was a familiar place to the participants.

- Information from individual interviews was stored in a secure place by the researcher.

- A standard informed consent document was used for the interviews (see Appendix G).
Each participant was asked to read and sign the form. I provided each participant with a copy of the form, highlighting my contact information in case they had any questions or concerns after the interview.

The consent form made it clear that participation was completely voluntary (and therefore not connected to receiving government social assistance).

The consent form made it clear that participants’ names were not requested and that participants could use first names only or an alias.

The consent form included two separate signature lines: one line referred to being interviewed and the second consented to being audio taped.

The interviews were digitally recorded with the permission of the participants. Sixteen of the 20 participants agreed to be audio-recorded; four did not want to be taped but consented to being interviewed.

All tapes would be destroyed within 30 days of successful defence of the dissertation. All hard copy transcripts and consent forms would be destroyed six years after successful defence of the dissertation.

Participants in receipt of social assistance were assured that the honorarium would not put them over the amount of money they were allowed to receive while in receipt of assistance.

**Follow-up Session with the Participants**

Credibility, or trustworthiness, was also addressed through member checking. I invited the participants to a presentation and discussion of the preliminary research findings. Participants were provided with both an oral and written summary of the emerging codes and categories from the qualitative data analysis (see section 4.6). To ensure the sustained confidentiality of participants’ data during the presentation, the emerging codes and categories were represented only as aggregate data from participants’ individual interviews. Additionally, I ensured that participants’ names or identifying information were not linked in any way to the aggregated data presented.
This method of member checking provided the participants with the opportunity to confirm, clarify, and/or elaborate on the research findings.

I contacted the participants again in 2008 to invite them to a presentation and discussion of the preliminary findings. Of the 20 women who took part in the interviews, I was able to reach 13, of which 10 indicated that they would probably be able to attend the session. (Of the seven I was unable to reach, three phone numbers were no longer in service and four of the participants did not reply to my phone message.) The session was held between 1 p.m. and 3 p.m. on a Thursday afternoon at Riverview. Food and drinks were provided, as was childcare because I expected several of the mothers to bring their children. Each participant attending the session received $20 to cover her expenses. In the end, four participants attended the discussion and none brought children.5 While the size of the group was smaller than expected, it provided a more comfortable environment for the participants by allowing them to express themselves in a smaller and less-intimidating setting. The purpose of the presentation and discussion session was to establish the trustworthiness of the research, to provide feedback to the participants, and to give them an opportunity to contribute further and/or to provide clarification. Feedback from the participants

5 The fact that several participants indicated that they needed childcare but, in the end, either did not attend the session or did not bring their children was a reflection of one of the challenges in the childcare policy arena. The real lives and experiences of mothers and children are not always predictable. As the researcher, I paid the cost of childcare even though it was ultimately not used.
affirmed and clarified the preliminary findings, and they expressed appreciation for being invited to the session.

4.6 Data Management and Analysis

“For each hour spent interviewing, you end up with about 10,000 words to read and understand.”

(Rubin & Rubin, 2005:227)

The result of 30 hours of interview time was hundreds of pages of text. I managed the data by maintaining a research log (i.e. an audit trail) in which I summarized evidence (e.g. phone calls, meetings, interview notes) and kept personal research notes (e.g. questions, reminders, contact information, items to follow up). I kept a journal containing research notes that included summaries and observations from the interviews, as well as reminders and contact information. I also developed spreadsheets highlighting demographic and other key characteristics of the participants (e.g. number and ages of children, marital status, source of income, citizenship/immigration status, type of housing).

The data-analysis stage involved integrating the themes and concepts that surfaced from the interviews. Given that this was largely inductive research, the study was designed to allow the intellectual space for analysis to be informed by the findings. At the same time, the analysis built on earlier research and a previously developed conceptual framework. This was an important piece of the analytical process because it allowed me to build on a coding scheme that had been previously developed and tested.
There was an analytical interchange between the data I collected through the interviews, the WEDGE research study, and my own prior theoretical knowledge.

I analyzed the data using a combination of pattern-seeking (Stake, 2008), content analysis (Ryan and Bernard, 2000), and the use of theoretical propositions (Yin, 2003). The taped interviews were transcribed, and the transcripts were coded using NVivo, a qualitative data analysis program. This helped to organize a substantial amount of data. It was valuable in analyzing the differences and similarities between passages of text. I did not use NVivo to develop theories. During the coding process, I grouped the interviewees’ responses into categories that brought together similar concepts, ideas, or themes.

Interview data were analyzed using content analysis. Content analysis assumes that the codes of interest have already been discovered and described (Ryan & Bernard, 2000). At the same time, I also allowed the conceptual space to explore themes that came out of this research and were not previously identified. The advantage of coding and identifying themes through content analysis is that it allows large quantities of text to be organized into fewer content categories and relationships to be identified.

I used 35 categories in coding the interviews, some based on the WEDGE study and some selected specifically for this doctoral research (see Appendix H). The codes were divided into five main categories: provisioning activities, provisioning strategies, childcare policies/programs, participant characteristics, and other (i.e. choice in childcare, community agencies/programs, constraints, father’s role, and housing).
Chapter 5: Low-income Women and Their Provisioning

Chapter 5 is the first of three chapters that present the research findings based on interviews with 20 low-income mothers. This chapter delineates provisioning activities.

Women carry out a range of activities in provisioning for their children. Some of these are familiar and visible activities, such as providing domestic caring labour, engaging in the labour market, and undertaking volunteer work in the community. Others are less visible tasks, such as making claims/asserting their rights, and ensuring safety, and sustaining health. For the women in this study, providing caring labour in the domestic sphere was the activity that consumed the bulk of their time and energy. The reason for this was that most of the research participants had children of preschool age or younger. The following account of provisioning activities begins with an overview of the people with whom the research participants had relationships of responsibility.

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6 As mentioned earlier, half of the research participants were immigrants with English language skills of varying degrees of limitations. Some of these limited language skills are reflected in the direct quotes used throughout this dissertation and have not been corrected.
5.1 For Whom Women Provision: Children and Others

“My children are my world. If something hurts them, it hurts me and I want to go deal with it.” (Sandra)

“[My grandchildren] usually come to my house. It’s much better because they get to sleep on the proper bed, and they get to eat and eat. And they always want to come to grandma because they have food to eat. Don’t ask me where I get the food, but I always manage.” (Jocelyn)

“I always wish to do something for my sister and my nephews [back home]. ... I was always thinking if I got a chance, if I am in a position, I do something for them. Unfortunately, I didn’t got a good job. I’m looking for another job... I was just crying, that’s it. You can’t do anything for them, because we don’t have, here we don’t have money. We just living like a hardship life here.” (Marriba)

Women often have multiple relationships of responsibility. The research participants in my study had provisioning responsibilities for their own children, and many of these women also had relationships of responsibility for other individuals. One of the selection criteria to participate in this research was that each woman had at least one child under the age of twelve. I began the interviews by asking the participants about their children (i.e. number and ages of children) and whether there were others for whom they felt responsible. Most of the participants (12 out of 20) had either two or three children. A quarter of the participants had one child. Two of the women each had six children under the age of 12. Appendix I reviews the number and ages of the children. To respect the confidentiality of the participants, all of the names used in this dissertation are pseudonyms.
Several of the women identified having relationships of responsibility for other children such as nieces, nephews, stepchildren, or grandchildren. Others talked about having a sense of responsibility for their adult children, elderly parents, or youth living in the community. Some of the participants had extended family members living nearby, while others were alone in Canada with their extended family back home. Provisioning for extended family included grocery shopping for their elderly or disabled parents or making nursing home arrangements for them. It also included caring for nieces and nephews. Sara, a single mother of an 11-year-old daughter, felt a strong sense of responsibility for her niece and nephew:

“If I have to take care of them or not, they're in the back of my mind.”

Sara and her sister, who lived nearby, helped each other out by watching each other’s children or picking them up at school. Sara’s provisioning for her niece and nephew went beyond simply watching them:

“If I take care of them, I’ll take them out. We’ll go do something, like, I’ll take them swimming and burn them out so when my sister comes home, they'll be tired. I’ll just do activities like that with all of them. I was taking care of them two weeks ago. ... and I took them swimming and I brought them back, and then I try to make sure they do their chores at home too.”

In addition to two school-aged children, Jocelyn had 11 grandchildren. Her three adult daughters lived on their own, yet she was committed to providing support to them:

“And whatever I have, I’ll share with them. I have to. One of them runs out of meat, I’ve got to give them some meat too. Whatever they need, I still have to do my part. So the only
thing that would change if we win some money, because I tried getting a better job and making more money. And that didn’t work out because I met with an accident, so I’m back to square one again.”

Jocelyn wanted to help them out so that they will not have to struggle in the same way she did:

“I just want to do something else, you know, where I know I’m going to be making some money to help my kids out, because my daughters, like, I know they’re trying, but I don’t want them struggling like how I struggle. ... So I want to be able to like help them along the way.”

Bahati had no family in Canada except for a younger brother in university. While he did not live with her, Bahati felt a sense of responsibility for him and wished she had money to be able to help him out. She called him every few days to make sure he was all right:

“He has a loan from government for school to go to university. He’s working sometime. He doesn’t have enough money here. So I feel worse for him. I don’t have money now to help him but still I feel ... whatever I have at home ... I feel like mom and dad for him.”

Sathi described feeling responsible for her brother’s children until he said that he didn’t want her to look after them:

“Even my brother’s children, they were very good. I feel like it’s my own child. When I see them I hug them and everything, but my brother said, I only want you to look after your son and my mom. ... Maybe I’m — they don’t really need it. They have to take their own responsibility, and I take my own responsibility.”

Sending money back home to help out family members was a common priority for many of the immigrant participants. When they were unable to send money, they
expressed a desire to be able to do so. Noorzia had only been in Canada for one year and sent money home to her sister in Afghanistan whenever she could. Eshe, a refugee from Nigeria, hoped to send money to her cousins, nieces and nephews as soon as she was able to do so. She felt very close to them, saying that “they are part of me and I have to keep in touch with them.”

Some of the participants talked about a desire to provide support to children in developing countries. Maxine, a young mother of two-year-old twin boys, had sponsored a child living in Africa through a relief and development organization. Maribba wished she could help those beyond her immediate family, while Jocelyn wanted to help in her own neighbourhood:

“Last week I just saw the people [on television]. They are showing the kids from different countries, like South Africa, and different places. They push the people, call now, and adopt one of them. But I just wish, if I have the money, I’m going to support them.” (Marriba)

“I wish I had some money to give my people over there. ... I feel bad, you know. Because sometime, people have food in their house and they don’t really use it, and they could just give it to the food bank and have them just take what they want.” (Jocelyn)

Whether they provisioned for extended family or not, all of the research participants devoted vast amounts of time to providing caring labour in the domestic sphere.

5.2 Providing Caring Labour in the Domestic Sphere

“It’s a little hard because when the day’s up, I’m so tired.” (Marian)
“[My sons] get up at 7, and they go to bed between 8 and 8:30. ... I have to deal with my baby, and then that’s hard because when he’s eating every half hour, I got to stop in the middle of something. It seems like since I’ve had my [third] son, there’s not enough time in the day. If there was more time in the day, there still wouldn’t be enough time in the day.” (Courtney)

The domestic activities carried out by women include managing the household, caring for children, and doing general household labour. Aside from physical work, these domestic activities include the mental and emotional work that women do as part of their provisioning responsibilities.

The list of physical tasks fulfilled daily by mothers is extensive and time-consuming. It includes familiar tasks, such as preparing meals (multiple times daily), shopping, and doing laundry; grooming children, keeping them organized, and dressing them appropriately for the weather; and cleaning the house, and keeping it tidy and hazard-free when there are young children in the home.

Mothers of babies or toddlers are especially burdened with physical domestic labour. Maxine and Marian were full-time caregivers of preschool-age children. They described their typical days:

“If I am going upstairs, [my twin sons] would follow me upstairs. If I’m downstairs, they come downstairs. I don’t leave them. I won’t leave them upstairs by themselves or leave them downstairs by themselves.” (Maxine)

“Now [my daughter] is so active, and up and about, it’s so hard. Sometimes she wouldn’t stay still. She always keeps moving. I always have to watch her 24-7 because she always keeps putting things in her mouth.” (Marian)
This is particularly apparent in the less familiar responsibilities, such as bringing children to and from school. For low-income mothers without cars, this task is a significant part of their day, one that many of them perform three times daily. It is common for this activity to take one-and-a-half hours each day, just walking back and forth to school with the children. It is extremely difficult in the winter, when escorting their children to school involves pushing a stroller through snow, ice, and slush, often on very cold days. Most of the participants lived within 1.5 kilometres from the school and didn’t qualify for school bussing. The typical walking distance was one kilometre from the school and, since children walk much slower than adults, a 10- or 15-minute adult walk is, in reality, a 30-minute walk with children.

Domestic caring labour also includes taking children to the library and to the park several times a week — activities that almost all participants talked about doing on a regular basis. In is part of a long day. It is common for mothers to spend 15 hours each day on provisioning for their children — from 7 in the morning until 10 at night. Courtney, a young mother with two school-age sons and a baby, described the start of her day:

“I’ve got to make sure they pick out their clothes and brush their teeth and eat their breakfast. I get their lunch ready. And then once I drop off my other two, my job’s still not done because I have to go home, and clean up, and prepare lunch for my second son that comes home.”

Courtney also talked about her evenings:

“When [my sons] get home, I’ve got to make them dinner and help them with their homework. And then — I don’t like my
kids sitting in front of the TV — so they get to watch a half-hour of TV. That’s our down time, and then it’s finding activities to do like colouring or painting or printing or sometimes we play. Then it’s time for dinner and while they’re eating I usually get their bath ready. I’m still cleaning up while they’re eating. ... Usually a half-hour before they go to bed, they have a snack, like a sandwich or fruit ... and then we go upstairs, read a book, and they go to bed.”

Eshe talked about being too tired at the end of the day to read to her son:

“Sometimes when I’m not busy, I have time to read to him, but most of the time before night I’m really tired, oh my God, so I cannot read. I just go to bed.”

It is common for physical labour to become entangled with mental and emotional work. For example, most of the women in my research have to take their children along with them everywhere they go because they do not have anyone else to care for them. The trip to the grocery store — several times each week — becomes a challenge physically, mentally, and emotionally. Without a car, women resort to walking with shopping buggies or taking the bus. For mothers with young children who are in strollers, it is too cumbersome to take a buggy and a stroller so they are limited to the items they can bring home on any given trip. While it is difficult physically, the mental process of trying to decide what one can afford to buy on a low income adds to the challenge. On top of that, children’s requests for items that mothers cannot afford make the task emotionally draining. Bahati describes how she feels when she takes her son shopping:

“We go store — he’ll go with me. He drives me crazy, but I took him with me. He say buy this, buy this, buy this.”
The emotional, mental, and physical work of provisioning often blends together, as illustrated in Bahati’s description of her usual evening routine:

“I give [my sons] the rules and one of them, he asks me a question to answer. ... I clean the whole kitchen. Organize everything. The bath, the books, they throw everything, and I organize everything. I teach them: don’t forget this, do this, do this — but you know kids, they don’t listen to me sometimes. I make sure everything is in their schoolbag. And then I clean the house. When I finish everything I go upstairs again. I take a shower, I sleep, or I like to read something, when I have something [to read].”

Mental and emotional concerns expressed by many of the research participants related to their children’s academic development. Mothers regularly tried to assist with their children’s homework assignments:

“Sometimes [my daughter] has two [homework] sheets and she is slow. What can I say, I don’t want to say I’m a strict mother but I want she do the homework neatly and, you know, nice.” (Magdalena)

“So I have to give more support on my own. I cannot expect the school. I have to be, like, if it’s 100 percent they are expecting, I have to do the 120 percent at home by myself. Then he’s going to be okay even when he’s growing up and everything.” (Sathi)

Many of the research participants came to Canada as adults and had limited English language skills. Difficulty navigating the school system and helping their children with homework caused them tremendous concern. Sathi expressed her worry:

“[My son] write very good but [his teacher] said you have to teach him to writing skills and everything, but I didn’t know how. I didn’t know what their expectations — what would I do — it was hard for me.”
The mothers also expressed concerns about their children’s social or personal development. This was, in part, related to the multi-cultural composition of the community where families from a variety of ethnic backgrounds live in close proximity to one another. Some mothers worried about their children picking up mannerisms from children of other cultures — mannerisms that would seem inappropriate from the perspective of their own ethnic background. Sathi, who had recently separated from her husband, was worried about her son’s use of language:

“I don’t want my son speak like that [boy from a different culture]. Nobody will talk to me. Already I am, it’s like that because I was separated, already I was isolated. But if my son is like that nobody will — people will isolate me.”

Sara hoped that she had prepared her daughter with all the necessary life skills:

“I could only hope that everything that I have taught her up until now, or as I continue teaching her, that she will take most of the skills and the things that I have taught her and incorporate them as she gets older after she goes through the rebellion stage to be a better person, and find her way in life. You can tell your kids all the things in the world, like I want you to be this, and in the end it’s up to them what they decide to do with their life.”

Marriba also hoped that her daughter would be equipped with life skills, although in her case these were dictated by Marriba’s own cultural expectations:

“I say to her say your prayers ... clean your room, and clean everything, because you are a girl, and it’s your responsibility to clean and keep things in their proper place.”

Teaching discipline is an important aspect of mental and emotional caring labour. Jocelyn stated:
“[Discipline] is a must. If you forget about discipline, you can forget about everything else.”

Sara also talked about discipline:

“I am good like that because I don’t spoil her either way, even though I don’t have a lot of money to work with. But when she wants something, I’m not going to say yes to everything either because she has to learn that if you want something, you have to work for it as well. Or you have to do chores and whatever, so she knows that not everything she’s going to want, I’m going to give her; but if it’s the basic necessities like, okay, you need new shoes, I’ll buy that, no problem.”

The research participants provided many other examples of emotional caring labour. They talked about feelings of regret that they could not provide their children with recreational activities, such as soccer or basketball. They also expressed deep concerns for their children’s emotional and physical safety. Magdalena was worried about her daughter’s level of anxiety:

“... And she’s biting the clothes, and she ripping. She gets nervous [and] anxious. I’m very concerned about her. There’s nothing I can do, you know, the mind — what can I do.”

Jocelyn devoted countless hours to her teenage son, trying to keep him away from the criminal activity that was so prevalent in their neighbourhood:

“And [my son] says: ‘Mom, you know how many people — everybody — has a record.’ And then I said: ‘Aren’t you proud you don’t have one?’ And he says: ‘Oh gosh, yes, I am. I am so proud I don’t have one. Everybody got one.’ And what are they doing? They’re doing something they’re not supposed to. But when I see them and I talk to them ... they don’t have someone to encourage them every day. They said if they had a parent like me ... like you could find
something for these boys to do at home. I’m sorry, but my son has to stay indoors after school. I tell him he’s going to work next year though. He’s turning 16.”

In terms of emotional caring labour, mothers also expressed pride and joy with their children’s achievements. Marriba was proud that her daughter had strong debating skills at school and was proficient with a computer. Daiyu took great delight in watching her preschool-age daughter acquire new skills and her son excel academically. Sandra summed up the feeling of most of the research participants:

“I just like to see kids happy. I don’t like to see them sad and hurt. I like to see them happy.”

Providing caring labour in the domestic sphere consumes a vast amount of physical, mental, and emotional energy on the part of mothers. The research participants had countless examples of these types of provisioning activities. While most of the women did not engage in the paid labour market at the time of the interviews, this provisioning activity was unquestionably at the forefront of their minds.

5.3 Engaging in Formal and Informal Work in the Labour Market

“I’ll work three, four jobs just to take care of my kids. People do not understand. They say why do you need two, three jobs? I said because one pays for the babysitter, one pays the rent, and the other one buys some food and stuff for me and the kids to eat.” (Jocelyn)

Participating in the labour market consists of activities generally associated with employment, including casual, part-time, or contingent work. It also involves attending school, training, or skill-upgrading programs, and work placements required of
students or welfare recipients. The need or desire to engage in the labour market was a major concern of the research participants. The women’s relationship to the labour market is illustrated in Table 7. Of the 20 mothers, only one worked full-time hours (although categorized by her employer as part-time) and four were attending school or a training program (one of these four also worked part-time). Three of the participants had school-age children and were engaged in community volunteering activities at the time of the interviews. The remaining 12 mothers were full-time caregivers, and most of them were caring for babies or preschool-age children. Each of the full-time caregivers — whether they were on social assistance or had employment income from their husbands — talked about a desire to upgrade their education and get a job once their children were in school.

<table>
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<th>Table 7: Research Participants’ Relationship with the Labour Market</th>
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<td>Employed full-time hours</td>
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<td>Attending school, training and/or employed part-time</td>
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<tr>
<td>Caring for babies, preschool-age children, or combination of preschool- and school-age</td>
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<tr>
<td>Community volunteering; caring for school-age children</td>
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The degree to which mothers engage in the labour market is, to a great extent, related to the availability of childcare options. The perpetual dilemma of caring for
children versus engaging in employment is central to this thesis and is discussed in the next two chapters. Aside from childcare, several themes related to the labour market emerged from the interviews: the fluidity of mothers' lives as they move in and out of the labour market; the costs and benefits of full-time employment; the yearning to get off welfare; the challenges facing immigrant women; and the prevalence of working as personal support workers.

In and Out of the Labour Market

The majority of the participants had previously been in the labour market, most earning minimum wage, and intended to return to employment as soon as their children were older. Marian worked in a candle factory prior to having her two children, Noorzia worked in a bakery, and Tazmeen worked in a restaurant as a manager. Sandra was working in a warehouse when she was pregnant with twins:

“The doctor gave me a letter to leave work early because I was huge. I can’t work in a warehouse being like this big, so I got an early leave.”

Jocelyn, who was one of the oldest participants, exemplified the fluidity of mothers' lives as they move in and out of different roles, fluctuating between employment and full-time child rearing. She was employed just before her son was born, then stayed home until he was six, and then returned to the labour market. When her daughter was born, Jocelyn stayed home for three years, and then returned to employment again. She described her situation:
“I never left him alone. And then I had my daughter, and then I decided I am going back to work. I do not care, and I got my job ... and then from there, I got babysitters. Can you believe every cent I worked, I had to pay babysitter with it?”

Marriba and her husband were on social assistance at the time of the interview, although she had previously been employed and had been supporting the family:

“Two years before, I was working 58 hours in a week ... because I’m paying $1,162 a month [in rent] and my husband, he don’t have a job. He was studying in a school, taking accounting courses, so I’m just alone person doing job, and we are not getting the assistance. So I did a lot of work, I’m so tired when I come back home”.

The Costs and Benefits of Full-time Employment

“I have to work. I can’t stay home because it’s the only money I earn. I start 8 but I leave home it’s 6 in the morning because I can’t afford $25 a cab to bring me here.” (Magdalena)

Magdalena was the only research participant who worked full-time hours and whose source of income was her own wages. Five mornings each week, Magdalena would leave home at about 6:30 a.m. with her daughter and walk several blocks to the before-school childcare program. She needed to arrive there by 7 in order to catch the two buses that would get her to work by 8. At the end of the day, Magdalena picked up her daughter at 5:30 from the after-school childcare program and began her evening routine:

“First of all, when she comes home, I have to prepare a snack ... and after we do the homework, it takes at least two hours to do the homework. And prepare dinner, and prepare everything for the next day.”
Magdalena enjoyed her job working at a grocery store, although back home she had worked in an architect’s office:

“I cut cold cuts. I enjoy customer service, if you can call it customer service. I can see the different cultures in this country and different people … [but] … it’s very difficult in Canada to get the same position as there. My English was very poor and to get a position in an office is very difficult. That is why I gained some experience in [community agency], three years I worked in the reception. And after I decided to start to work because I need money to help my husband — my ex-husband — and that’s why I started to work part-time.”

Some days at work were better than others, but Magdalena didn’t want to take time off, even when she was going through a difficult time:

“Customers — it’s not easy to deal with people … and if you don’t feel … you are not in your proper mind … I am telling you, I was crying in my work. I was serving people and I was crying. The tears came out because I couldn’t control myself. I can’t take time off because I need the money to survive. It’s not easy.”

The benefits that her job provided were very important to Magdalena. She had been asking her employer to enroll her in the benefit package for some time:

“… Medication for my child, so many times I spend $80 … the antibiotics and she’s using glasses and dentist is expensive. … Suddenly last month he told me okay, you got the package here. I say thank you so much because for me it’s very, very important especially I spend for my child $200 for glasses.”

**Yearning to Get Off Welfare**

“I don’t want to be receiving welfare. It’s not me. It’s making me real depressed to stay home and I have a child, you know.
I don’t like to be waiting on a cheque to come to me, and I didn’t work for it.” (Jocelyn)

“I want to go off the welfare, I don’t like the welfare.” (Camila)

“To be honest with you, with the help that I get from child tax and welfare it’s, it’s really like not enough to live on. So to go to work, like, even now I have a three-month-old son and I’m like (inaudible) hard. I want to stop breastfeeding so I can go to work.” (Courtney)

Most of the research participants who were on social assistance volunteered each week in community programs. Occasionally, women were able to get limited paid work; however, these opportunities were largely dependent on project funding received by the community agencies. Bahati worked one-day-per-week on an eight-week government-funded project. She received $40 for each day she worked but when the project ended, so did her pay. Earning extra money was, at times, frustrating. Courtney talked about getting her social assistance cheque, and it being “gone in two days. And then if I want to go to work to make extra money, they take it off my cheque, and I’m barely getting anything as it is.” Maxine, a mother of twins who was on social assistance, attended a leadership program offered through a collaboration between a local college and a community agency. She enjoyed the program and looked forward to doing a placement. She would occasionally earn a bit of extra cash braiding hair, but hoped to work in an office one day.

Sara recently went on social assistance but did not want to stay on it long:

“I’m used to working, and I’m not used to staying at home. Like for me, the time limit, it’s like six months or a year —
but I don’t like staying at home because that’s not me. I like working and doing something.”

Sara was trying to find the right job for her interest and skills:

“I’m still trying to figure myself out, like it’s hard when you have a broad range like that because then to focus on just one, and be, like, okay this is what I’m going to do and just take it. That’s what I need to do now because, you know, I’m getting older too and I want to be more stable and, yeah, that’d be better.”

The participants who were receiving social assistance expressed a strong desire to get off welfare. The sense of being self-sufficient was desirable even though it was simply a trade-off from being dependent on welfare to being dependent on the labour market. Still, there was a desire to be financially independent. Farisa, a married mother of six, was a full-time caregiver. She wanted to apply for a childcare subsidy so she could take a childcare course and provide childcare in her home. Tuyen, a single mother, also had six children. She had been at home full-time until the year prior when she put her youngest two into daycare and enrolled in an adult-education program. Both Farisa and Tuyen were on social assistance. Tuyen described the pressure that she felt from social workers at the welfare office:

“They push me like go work, work. I want to work, but it’s very hard for me. But now I, well, maybe I will wait for a few years, but I don’t want to get money from welfare for sure.”

Sandra wanted to start a business, which didn’t work out, but then she faced difficulties when applying for social assistance. In the end, she refused to take social assistance.
“I had everything ready to go and start to work. All I needed was the money to help me buy my supplies. They said no, you have to do this six-week or six-month course. I knew if it was six weeks I would have been able to handle it. But if it’s six months I can’t do that. I don’t have any money. I don’t have a job. I need to start something. I’ve got the business registered. It’s got a GST number, everything, a bank account. All I need is the help to start — can’t do that. You could do the course so we can give you the money. I said well I can’t do that, so I just left it.

“So they came at me asking for proof that I’d closed the account that I closed. I would give them the bank account information, but they are still telling me after that I need to go and get proof from the government to show that my business is closed.

“I’ve got three kids. I’ve got to drag them with me down to a government office. Just click the button and you’ll see everything that comes up on it. But they don’t want to do that. The worker — that’s why I don’t like social workers — unless you get one like my last one that I had was really nice. But then when I started asking about disability they passed me onto another worker [and] she made it really, really hard on me, giving me attitude and everything. And then I just said, fine, keep your money.”

An Accountant Back Home: Learning English, Returning to High School

“I adapt even if I got a job in a factory, it’s a job. I don’t care. I do the job because I need money, that’s it.” (Marriba)

Adapting to life in Canada was enormously challenging for the participants who were recent immigrants. Many of them were attending adult education to complete their Ontario high school diploma, although most had completed post-secondary education in their countries of origin. Daiyu, a foreign-trained accountant from China, was preparing for her chartered financial accountant professional designation. She had taught accounting at a university in China and had worked in an administrative capacity.
at a local college in Canada prior to giving birth to her youngest child. Daiyu was planning to work as an accountant when her daughter turned three. At the same time, Daiyu was enjoying the time with her daughter:

“I feel like taking care of my baby, it’s not like a totally off from my career, as I mentioned to you. I still pursue my professional designation. … I have this feeling if I’m not pursuing my professional designation while in the meantime taking care of my baby, I might not have had the good feeling of myself.”

Marriba also had a background in accounting prior to coming to Canada, but her prospects for getting a related job were not as promising as Daiyu’s. Marriba described her situation:

“I was an accountant over there. I wish I could become an accountant here, but unfortunately $5,000 I need to do some kind of courses in college, and after this maybe I got a job because according to age, according to our accent, maybe they don’t be accepted. Because they need the new people ... because, you know, I’m 40 years old, and gradually I’m losing my health, and my age, so they ask why don’t they spend lots of money and lots of time on me? They prefer the new ones. ... So I wish I could become accountant but, in the meanwhile, I’m trying to do something in the community ... so maybe I get a job.”

Oftentimes, educated immigrant women are channeled into working as personal support workers.

*From Teacher to Personal Support Worker*

“I want to go in for PSW. That’s the only thing the government wants to pay. I wanted to go in for nursing. At first they said I can’t go for nursing. I said okay, what about public work, public services? They said it’s only PSW they
pay for or I could go back to — go back to high school. I told them high school? I don’t think I want to go back to high school, but maybe I will think about public health and the PSW thing. But I wish I could get into the teaching system that I can always upgrade myself. At least I would have time to take care of my baby when I am back from school.” (Eshe)

A common occupation for immigrant women was personal support worker (PSW). Eshe, a refugee from Nigeria and mother of a six-month-old baby, was educated as a teacher and was hoping to work in the field, although she would first have to deal with barriers related to immigration and foreign-credential recognition. She did not know whether she was eligible to work in the province:

“Last week, I called the teachers’ board … and they ask me am I eligible to work in Ontario. I told them I don’t know anything about the eligibility to work in Ontario.”

Like many other mothers on social assistance, Eshe was being encouraged by her social assistance worker to become a personal support worker (PSW). Ironically, this type of job often involves shift work, making childcare arrangements even more difficult. Camila, who had been in Canada only three years, was completing her PSW training and had been offered a position at a nursing home. Her shift would be from 6 a.m. to 2 p.m., three or four days per week. She wanted full-time employment and planned to get extra hours of work through an agency that hires PSWs to work in private homes. Camila explained:

“I finish [work] at 2. ... I go to the agency one or two hours because I want to go off the welfare, I don't like the welfare."
Sathi also worked at a nursing home and was trying to finish her high school literacy course so that she could get her diploma. She found that she was very busy with her job, her school work, and taking care of her son: "I don’t have the time to even cook. I don’t have the time so I keep buying food at McDonald’s for him." She often had weekend shifts and brought her son to her sister’s house across town for the weekend while she worked. Sathi lived in subsidized housing and maximized her income by balancing her hours of work with her rent, which is geared to her income. She also rearranged her work schedule so that she could go to school during the week and work at the nursing home on the weekends:

“I used to work five days, four days a week all the time, but it’s only time I am cutting because my rent was increased. So I should do something to lower down it. ... I cut down the work in the weekdays. ... I go one day per week or two days per week sometimes, because if I go high, my rent will be high.”

5.4 Undertaking Commitments in the Community

“When I take care of my community, I think I’m taking care of myself, too. It helps me.” (Jocelyn)

Provisioning takes into account formal and informal volunteer activities in the community. This includes volunteering in organizations as well as providing informal help in the community or neighbourhood. It involves creating and maintaining networks, visiting, and organizing social gatherings. Many of the women in my study devoted between two and 10 hours, or more, each week undertaking commitments in
the community. Jocelyn expressed the rewarding feeling that she got through volunteering:

“I know I use my time and my brain but I don’t mind. I feel good. I feel so rewarded that I helped somebody ... I love doing that. I say give me a project to do and I complete it. I'm unbelievable. I am not stopping. ... I need to just see what else I could do and see where else I could go with that.”

Sara volunteered at a local public school and in a youth program:

“I helped out with my sister’s kids’ school. ... We did landscaping and we put out all the bushes and we put a nice garden together. ... I’ve done quite a few volunteer stuff ... I even volunteered with kids to do murals and to do art. It’s an employment place for youth, so I ended up volunteering there just to put my daughter in the program ... and then they did art and murals and we also did paper Mache masks, which was fun.”

Women on social assistance were generally required to volunteer at community organizations so that they would have an opportunity to develop labour market skills. They could receive an additional $100 each month for travel expenses. Ayana, Bahati, Camila, and Tuyen were on social assistance and volunteered at the front desk of a community agency. Camila stated that volunteering helped her to practice her English; Tuyen, on the other hand, expressed her anxiety with volunteering at the reception desk of a local agency because her English language skills were limited. Marriba hoped that volunteering would help her to find a job:

“I wish I could become accountant but, in the meanwhile, I'm trying to do something in the community. Maybe I do my contributions on the community work so maybe I got a
job. I’m not able to do job in the factory, because I’ve got arthritis and I don’t want to be, lose my health right now.”

Sara volunteered twice a week at a community agency to try to expand her job-related skills:

“I did so many different things, like retail, and supervising, so I thought let’s try receptionist and even if it’s volunteer, I think it’s something that I might want to get into.”

Courtney was proud to have been able to help out on the advisory committee of a local program for young mothers:

“It just started out as just an idea on a piece of paper and now it’s actually on its way … young women who are on the system and want to get off and work and don’t know how to help. And we actually created it. It’s amazing.”

Aside from the requirement to volunteer, women help out in their community for other reasons. Jocelyn and Courtney both lived in public housing and expressed feelings of concern and affection for teens and young adults living in their neighbourhood. Jocelyn expressed her concern, especially for the boys:

“I’ll go up to them and say: Did you go to school today? What’s happening? Aren’t you going to school? What’s wrong? You know? I’m more curious with the male because, like, I don’t like to see them hanging around because I don’t want them getting into trouble. So even if somebody says that kid is so bad and he has no manners or respect, I could go and speak to that child.”

In a similar vein, Courtney, a young mother of three who had her first child at age 18 and also lives in public housing, cared especially about the girls in her neighbourhood:
“If they’re into trouble, they’ll come and they’ll talk to me ... especially the young girls in my neighbourhood. ... Some parents, when their kids are in trouble ... they’ll be coming to me ... to just talk to them. ... I guess it’s because, you know, I was kind of a troubled child you know so they want me to tell them, and there’s so many young girls out there having babies now so they want me to say, like you know, they see that I have three kids. Some girls have, like children in my neighbourhood that are younger, and they come to me for advice, you know. So I guess their parents looked at me, like you know, you’ve been there, you’ve done that, can you like show them and try to scare them into not, not having any kids right now.”

Jocelyn expressed particular concern for a 21-year-old mother living in her neighbourhood who seemed to be providing money to her partner at the expense of caring for her own children:

“Why would I take of my money that I get from the government and give to this man — so he can drive around in his fancy car, and I’m hungry and I’m pregnant. This is my second baby that’s going to be born small because I’m under-nourished. That gets to me. ... I feel responsible for her babies because when her son comes to my door, he says I’m hungry. I feel like crying. And then she comes over and she’s, like, what do you have to eat. And I want to say to her get out of my house — but I give her food. And then I cuss, I kind of make her know it’s not right, it’s not fair. I am not working. My daughters are not dependent on me for food right now because they know I haven’t got anything. And you get money every month; give it away to starve the current baby.”

Marriba volunteered more formally in her community:

“I’m also involved in the different community work, like the community rec centre, and I do work for my own [Muslim] community. They have lots of work, mostly to look after the kids [and] take care of sick people, and some kitchen work.... Every day we spend lots of time, lots of volunteer work for our own community. ... Every year we have big
conventions. We provide the plans, the registration, fundraising, everything. It’s a big community.”

Marriba also helped out with a provincial election held during Ramadan:

“Last night, I went to the election, I just came back 3 in the night, so I’m so tired. I just say my prayers in the morning because I keep fast. I wake up 4 a.m. I prepare breakfast for my husband and for me. So I just go and say my prayer and go to the bed.”

Whether volunteering on a formal or informal basis, some women did more and others did less — depending on the ages and needs of their children. For women with preschool-aged children at home, volunteering was only possible if they were able to arrange for childcare during their volunteer hours, and this was usually not possible.

5.5 Making Claims

One of the less visible provisioning activities that women perform involves advocating for themselves and their children for services, money, and support. This includes learning where to look for financial assistance and other resources, making arguments with evidence, and asserting one’s rights. It also includes convincing family, friends, landlords, bureaucrats, professionals, and volunteers in medical, education, social, and community services that one is worthy and/or that service claims are legitimate.

Low-income mothers are faced with making a variety of claims on a regular basis and they have to deal with multiple government offices. The research participants dealt with the following organizations or sectors:
• social assistance/welfare;
• public housing;
• legal aid and the court system;
• the education sector;
• the health sector;
• Ontario’s Family Responsibility Office (FRO)⁷;
• the immigration department;
• child protection agencies;
• early childhood intervention;
• the mental health system;
• crisis intervention services; and
• food banks and other community services.

They had to advocate for:

• services, such as social assistance, subsidized housing, and daycare fee subsidies;
• child support payments, by making claims to their ex-partners, the FRO, and to Legal Aid;
• services or support for their children at school, such as extra help when their children were struggling academically or bus service when their children were ineligible;
• the opportunity to volunteer at community organizations;

⁷ Ontario’s Family Responsibility Office (FRO) is a division of the Ministry of Community and Social Services responsible for enforcing court orders for child and spousal support payments. The FRO has the legal authority to take enforcement action against those who do not meet their support obligations. The FRO also enforces private written agreements such as separation agreements.
• additional money from social assistance (e.g. for special diets);
• legal action against violent ex-partners (e.g. restraining orders); and
• payments schedules for overdue bills (e.g. hydro).

Learning where to look for information before they can even begin to advocate for themselves is a separate and often difficult task in itself, especially for women who have limited English language skills. It was not easy for Tuyen to get the information she needed in order to apply for a daycare fee subsidy, but she was extremely relieved when her subsidy came through:

“Tuyen, you see, the money is not enough. I don’t know English much so I ask someone help me, but I try, you know, I try and try. So I go to daycare, I ask them and they told me like this you have to do. I try by myself and I got them, my God, I was so happy.”

Courtney tried in vain to get information about whether her needed dental work would be covered under social assistance:

“I’m still trying to find out — I have a problem with my teeth since I’ve had my kids. I can’t pay $100 and it’s like $180 just for a checkup. Welfare pays for children, but emergencies for us — I don’t know what an emergency is and nobody will tell me what stands for an emergency. So I pretty much got to suffer now because I don’t have the money for it.”

When Sara needed information regarding a daycare fee subsidy, she had the acuity to ask what she could do to speed up the process:

“I asked them — because I needed daycare right away — and I said what am I on the waiting list? And they told me. And I go, okay, how would I go about to get it a little bit faster? So the person I was talking to told me if you go check out the daycares and see if they have a spot available,
then we could give it to you a little bit faster. So that's what I ended up doing and I got it faster that way.”

The degree to which women feel confident in making claims is, to a certain extent, influenced by their personal characteristics. Magdalena was a single mother with one child and a job, who was proud of the fact that she had never been on social assistance. She made a variety of claims, often on a repeated basis. These included advocating for:

- a subsidied apartment: “I was really lucky because [it took] one year. I asked for an apartment. I don't like a house. I not feel safe in a house. I feel scared.”;

- benefits at her workplace: “[My boss] say I have to see ... and after I say I'm not going to ask any more. ... Suddenly last month he told me okay, you got the package here. I say thank you so much because for me it's very, very important especially I spend for my child $200 for glasses.”; and

- legal aid to pursue child support payments: “I got the answer from the lawyer. She has to wait how many hours they're going to pay for her. And this is already past two weeks and I think it's too long — they have to force him to pay the child support. Even I don't know where he works. I don't know where he lives. I don't understand.”

Sandra also had to make claims on a regular basis, to multiple organizations:

- for her daughter with special needs: “I can't send [my daughter] to any regular program because they're going to complain that she's not listening ... and I never know when she's going to have an outburst. ... It's hard, but I finally found somebody that says that there's a program for kids like her. ... I saw that she probably had a problem. I looked into it and I dealt with it. I got her the programs that she needs. ... Now I have CAS, and CAS has introduced me to CAMH, the Centre for Addiction and Mental Health”; and

- for child support: “... And go to the courts, get it all adjusted, and then they'll send it to Family Responsibility. ... For one, I don't have time to sit in a courthouse, because first of all, you've got to go down, fill out your papers, see duty counsel, then come back and then wait for your court case. All for what — an extra $100! I don't have it in me ... I don't have the time. I don't have the money. We will cancel Family Responsibility.”
Making claims for social assistance is difficult emotionally and leaves women feeling conflicted. As discussed earlier, each of the research participants who were receiving social assistance talked about the desire to get off welfare.

“It’s like they act like it’s money out of their own pocket that they’re giving you. For the longest time, even now, I still don’t know exactly what I’m eligible for. For instance, I need eye glasses. I didn’t know that they paid for eye glasses until I spoke with another worker who said you don’t know we pay for it? They reimburse you. You have to pay for it, but they’ll give you back the money for it. So I was sitting here for a good two years, suffering from migraines because I need glasses, and I couldn’t afford it.” (Courtney)

The process of making claims is not straightforward and at times involves the need to provide updates and/or appeals. For example, when women experience a change in their marital status, they have to send letters to government offices in order to be eligible for additional services or support. Writing letters to appeal decisions or to be moved up in priority on waiting lists for services, such as daycare fee subsidies, is difficult and burdensome. Maxine was on a waiting list for subsidized childcare but the thought of writing an appeal letter added to her stress level:

“They still haven’t gotten back to me. They said I should write a letter appealing that I be moved to the top of the priority list. I said, you know what, I have enough stress of my own.”

The need to make claims for child support affects most single mothers and is a particularly onerous process. Some of the mothers dealt directly with the fathers; others dealt with Ontario’s FRO. The FRO had been subject to a great deal of public criticism and had been highlighted in reports from the Ontario Ombudsman, the
provincial watchdog. Hundreds of complaints are made against the organization each year. In 2007-08, over 700 complaints about the FRO were received by the Ontario Ombudsman’s office. This put the organization second on the list of top twenty provincial organizations against which complaints were made, well ahead of organizations such as the Ontario Health Insurance Plan which received 150 complaints. Despite the notoriety of the FRO, most of the single mothers in my study had to deal with the FRO as a condition of being on social assistance. Sara advocated for child support payments:

“I took him to court and then he was paying. It wasn’t much that he was paying but it was going to be something, and then for a while he was dodging the bullet and he didn’t want to give me his information. I’m like, what are you doing ... give me a break. This is our kid ... this is for our daughter.”

Applying to the FRO can be detrimental to women who are on social assistance because they have the amount of their child support payments deducted from their assistance cheques, regardless of whether they are, in fact, receiving the child support payments. Bahati, a single mother on social assistance with three children, began to cry when she described her situation. Her social assistance payments were reduced even though she did not receive regular child support payments. She was uncomfortable and felt shy about pursuing this discrepancy with her welfare worker. Bahati wished she could get a job so she wouldn’t have to rely on assistance:

“Child support he start, he give me every month $200 and now — three months, four months — he still don’t give money. The social, they don’t give me because they think he’s going to give me. ... We went to the court. He started to
give me, again he stopped to me. ... Sometimes I embarrass
to ask them ... to ask $200. I wish my kids they go the whole
day [to school], I go to work, cleaning, everything, I can
make money. I don’t care, I can work anything, so ask
money, make me shy.”

Sandra and Sara described other problems with their efforts to make claims for child support:

“They garnish his wages, so they automatically take it from
him and give it to me. Now, he just bought a house and a car
and all of this, making way more money, but I’m still getting
the same that I was getting back in ’03. So they said the only
way I could do that is take him back to court.” (Sandra)

“After we separated I had to go and file for child support
because he wasn’t paying for anything. He wasn’t helping
me out whatsoever. Even like now, he’s paying them now,
but [the FRO] is not giving you the money anyways. ...He
might have paid a whole bunch of money but they’re not
going to go give it to me right away either. And if they do,
it’s like probably six months, oh, here you go, you get a little
bit and then that’s it. And then you won’t get it for probably
a long while. It just keeps fluctuating. They’re never
consistent in how they do it.” (Sara)

In addition to the multitude of tasks related to making claims, the research participants actively engaged in ensuring safety for their children and for themselves.

5.6 Ensuring Safety

“So I just changed my phone number, closed my door, and
pick and choose who I’m going to let my children go with,
and where I let them go.” (Sandra)

The community in which the research participants lived faced three predominant challenges: the pervasiveness of low incomes, the magnitude of ethnic
diversity, and the high rate of violence and criminal activity. Even fundamental problems like low income and poor-quality housing were overshadowed by the daily challenges of living in a highly diverse and dangerous community. The research participants raised numerous concerns and problems related to safety, such as:

- being separated from very young children, especially when they enter a childcare arrangement with a non-parental caregiver;
- a shortage of safe, licensed childcare arrangements;
- a lack of affordable, extracurricular, recreational programs;
- peer pressure at school and in the community;
- unsupervised computer use; and
- gun violence, illegal drugs, and related criminal activity in their community.

Ensuring their own safety and that of their children was an important aspect of the women’s provisioning activities. Mothers addressed these concerns by:

- caring for their very young children on a full-time basis and being reluctant to have anyone else care for their children;
- forbidding their children to play outside without supervision;
- searching out safe daycare arrangements and getting to know the childcare provider on a personal basis;
- encouraging their children to be independent thinkers and to make appropriate decisions;
- reminding their children not to put anything into their mouths at school, due to the prevalence of illegal drugs;
- avoiding the laundry rooms in their buildings;
- inviting their children's friends to their homes rather than having them hanging around outside;
• placing restraining orders on their former partners or fathers of their children; or

• moving to a different neighbourhood.

Safety concerns for young children are of a different nature than those faced by mothers of adolescents and teens. Mothers of young children ensure their safety both inside and outside of the home through a variety of measures, from keeping the home tidy and free of small objects to holding their hands when outside.

Sandra kept her twins in her own care at all times:

“... And the twins, I just don’t part with them. They’re just too small.”

She also did not allow her children to walk behind her:

“And my kids can’t walk behind me, no matter how much I know it’s just a thing with children, they follow without looking. So as long as they know you’re in front of them, they’re going to stay behind you. They’re not going to wander off. But that’s not the reason why I want you in front of me, it’s because somebody from behind me might take you. And so they walk in front of me.”

Leena would not leave her children in anyone else’s care:

“I never trust. Actually, there’s a lot of people from my country. Good people. But I never trust to leave her.”

Bahati, who lived in a townhouse, would have her tea beside the window and watch her children playing outside in their yard. She did not allow them to go to the nearby park alone. For the many women, such as Camila and Amisi, who lived in high-rise apartment buildings, the option to watch their children through a window did not
exist. Camila would not let her eight-year-old son play outside alone. She would go with him to the park and watch while he rode his bike. Likewise, Amisi did not allow her youngest son, aged nine, to play outside alone. She wished she could enrol him in an after-school basketball program; however, the cost was too high, and the subsidized program was full. Amisi did not allow him to play basketball outside in the community courts because it was too dangerous due to high levels of crime and violence in the neighbourhood.

Mothers try to find extracurricular activities for their children to keep them safe and provide healthy activities:

“If they come home and have dinner, and then go and, you know, they wouldn’t be hanging out with their friends or causing trouble, especially I find when they, they’re at this transition period when they’re in middle school or in high school. They need a lot more community centres to be offering more programs.” (Sara)

Sandra kept an eye on her children in the house and established rules when her older daughter went outside:

“If you get too quiet, I come and check on you. When you get too quiet, I don’t know where you are. And I make sure I tell [my daughter]: Where are you going. ... You see that line right there, you don’t pass that line. I don’t care if [your friends are] going. You do not go.”

Each morning when she walked her daughter to school, with her younger twins in tow, Sandra would wait with her until the school bell rang:

“Every morning we’ve got to wait until she goes in class, whereas the other kids— there’s hardly any parents
standing around waiting because they drop their kids off and they leave. I don’t want to leave. I want to make sure I watch her go in that door and then I feel safe to leave.”

As children get older and become more independent, the concerns for their safety change. Although there is some degree of variation based on cultural expectations, all research participants expressed similar concerns. Marriba was a Muslim mother of an 11-year-old daughter who did not want to leave her alone until she was in her late teens; she worried about her daughter’s use of the computer:

“Just I wish all the time I’m in front of her, I don’t want to be leaving her alone. Sometimes the computer is a very useful thing, but sometimes it’s bad. So I don’t want to leave her alone. So that’s why I’m worried about her all the time, and I talk to people and my friends who look after her when I’m not at home, I say take care of her. And my husband, he’s always thinking like that.”

The concern for their children’s safety was especially grave for mothers of older children who were no longer supervised at all times. Although at this stage mothers were no longer needed to provide full-time care of their children, they often felt that it was important that they be available at home after school and throughout the night. Jocelyn talked about her son, who had experienced violence in the community basketball courts, and the need for her to be there for him.

“[My son] used to play basketball and he stopped because he’d get into fights because of basketball. And he says he doesn’t want to get into a fight, so he stopped playing basketball. ... He got robbed already by gun point ... in the middle of the basketball court. So I have to make sure I am home. Don’t give them no reason to be outside because my son, if I go to work, when I used to go to work, he used to stay up until 12 until I come home. He wouldn’t sleep. And
he would have to talk to me every night about everything that happened during the day.”

Jocelyn did not allow her son to go out after school:

“He almost got killed twice, mistaken, because he’s so tall they think he’s an adult. Now the year of the gun has gone somewhat down, so we think, but I still don’t trust these people. I won’t let him out. He’s from school to home. If he’s not in the basement, he’s in my bedroom on the computer.”

Despite her concern, Jocelyn joked with him about the dangers of becoming involved in gang activity:

“You’d been dead, and you know what I would be doing to you? Beating the crap out of you, and he was like, but I’d be dead mom. I said yeah, but I would beat the crap out of you anyway because you know better. You know when school is over, come straight home.”

Instead of allowing her son to go out after school, Jocelyn would invite his neighbourhood friends to come to her house. She explains:

“They could come to my house. I tell them instead of hanging around outside, you could come to my house. My son is in the basement playing his games so. He’s not allowed outside so if you want to play with my son, you have to come.”

When one of Jocelyn’s stepsons became too heavily involved in the drugs and gun culture, she had to make the difficult decision to tell him to move out of the house so that he wouldn’t influence her son:

“My son would have been a hoodlum. He would not be listening to me. They call him a momma’s boy now, but they wouldn’t be calling him that. You know I keep telling him
your father’s side of the family’s calling you momma’s boy because they’re bad, but I like you like this.”

Sometimes mothers had to take action to protect their children against fathers who were involved in criminal activity or were violent:

“... Especially my second son’s father — I actually went to court for him, and I put a restraining order on him.” (Courtney)

If women have the opportunity — and many of them do not — they move to a safer community. Magdalena moved out of her neighbourhood to a safer public housing apartment building:

“I used to live in around [name of city intersection] — and it’s very dangerous there. ... I’m not complaining about the school. I’m not complaining about the daycare. My concern is about the area.”

Despite the distance between her new apartment and the location of her job, Magdalena felt safer:

“It’s a good area. It’s very safe. ... I know it’s a big, big sacrifice for myself everyday because since I get up 6 in the morning, prepare my child for the daycare, prepare the snack to bring for the lunch. And we leave home 6:35 to reach 5 minutes before 7 to the daycare. Now it’s going to be a little difficult because winter is coming but it’s the only way I know she is safe — to come to this area.”

Ironically, many of the research participants were newcomers from war torn countries who found themselves living in one of the most dangerous parts of Canada. Still, some women talked about feeling safe in this country. Camila, who had family in the Southern U.S., preferred to live in Canada:
“Florida is too much violence. And the young people have the guns, and I don’t like to have the children there. Because I have three children.”

5.7 Sustaining Health

“I can’t pay a psychologist $50 an hour.” (Magdalena)

Health-related work carried out by the participants was generally connected with caring for children with special needs, disabilities, or chronic conditions. It included tasks like scheduling, coordinating, and going to medical appointments as well as administering medicines or special diets. Several of the participants had their own health problems — some more severe than others — but they could not always attend to their own health care needs due to a lack of resources or other obligations. The mothers’ primary concerns were related to the health of their children.

Children’s Health

Some of the children had significant health problems that had a profound impact on the participants’ lives, while other conditions were less serious. Women talked about dealing with a range of conditions, including visual impairment, asthma, attention deficit hyperactivity disorder (ADHD), depression, and anxiety. Many of the participants were newcomers to Canada; thus, their children had, in a sense, a special need because they faced social and language barriers.

Two of the participants had twins who were born premature. Maxine took her two-year-old twin sons for speech and language therapy and for hearing tests. They
also underwent regular vision check-ups because they both had eye surgery as babies.

Likewise, Sandra’s twins, a girl and a boy, had a variety of health problems. Her daughter’s visual impairment was significant enough to qualify Sandra for Ontario’s Assistance for Children with Severe Disabilities (ACSD) program. She described her daughter’s medical problems:

“If she’s looking at something, she’s got to have it right here to see it. She had a heart catheter put in because, due to the prematurity, it left an open valve in her heart that didn’t close. And so she had a catheter so that was a big scare. Everything had to be immaculate — you couldn’t leave nothing around because if she tripped and fell on it, we had to get her to a hospital in a matter of seconds because blood running into the wound could go into the heart. … [The twins] probably will be a bit behind because of prematurity. I was 6 ½ months pregnant when I delivered them.”

Sandra went on to describe her son’s health issues:

“[He had] two hernia surgeries done because his testicles never dropped. So now I see that he’s still looking different so we’re waiting on our ultrasound results. So I don’t know if we’ll have to go back to the hospital. We’ve been in the hospital for pneumonia. He was in there for five days. What else does he have? For the psychological assessment for ACSD, really, they told me, they can see that he has a delay. They can maybe offer him a benefit so at least that way if they need medication, I’m covered. That’s my main thing.”

In addition to her twins’ health troubles, Sandra’s eldest daughter, aged nine, had ADHD and, as a result, attended a special school program.

Magdalena was one of several mothers who expressed concern about their children’s psychological health. Her daughter, who seemed to be experiencing
emotional difficulties since her parents’ separation, was referred to a psychologist along with Magdalena:

“My daughter, she’s in therapy, I’m in therapy, psychology therapy. She has anxiety ... she bites her clothes. She no accept the separation. ... The separation was hard.”

Magdalena took her daughter to see the psychologist once a month. Although she felt that a monthly visit was insufficient, she could not afford to pay for additional sessions:

“For me, I can say now I’m alright, I feel better, but for my child, it’s very difficult because I know she needs more attention than that.”

Sathi also needed psychological services for her son. She took him for a psychological assessment to determine “if he has any sickness. The doctor said no. It’s not a medical, it’s like a — me and him need counselling.”

The dental health of their children was a concern for many of the participants. Marian’s three-year-old son required dental work that was estimated to cost more than $3,000 — an amount far out of reach for Marian and her husband. She had heard that there were some dental clinics for low-income families but did not know where to find such a clinic.

Mother’s Health

The participants had a variety of health problems and, like those of their children, some were more serious than others. Marian had diabetes so she had to watch her diet, and Tazmeen tried to maintain her health by going to a dietician when she was
pregnant and during breastfeeding. Courtney and her family try to sustain their health by keeping to a special diet:

“We all have a special diet, so they give you forms that the doctor has to fill out. And I don’t know how much extra money it is but [the social worker] said that there’s some extra money that can be put on your cheque.”

Bahati had a serious vision problem for which she had frequent medical appointments and reluctantly took a strong medication. She often had to take her youngest son along with her to medical appointments:

“They said we don’t have a choice, we have to give you that. So they gave me now and still I’m taking the medication every two weeks, three weeks, crossing the street downtown, every two, three weeks to go there. I took the little one with me because to go there and come back it takes time. So he’s absent in the class.”

Jocelyn went on social assistance following a workplace accident. She couldn't bend or lift due to her accident and so her children had to take responsibility for some of the tasks previously done by her, although she often felt compelled to do the household tasks herself:

“I still try though; at home I still try even though I have some awful pain after, I try because I’m not going to let it sit there until [the children] come home from school. I am doing my best.”

Marriba, who frequently experienced dizzy spells, kept herself busy and felt that this prevented her from becoming sick:
“I don’t want to sit at home. If I sit at home, I believe I will come sick. I always busy myself because I don’t want to be sick.”

Her arthritis prevented her from working in a factory but she wanted to keep busy and hoped that her volunteer work would eventually assist her with getting a job:

“In the meanwhile, I’m trying to do something in the community. Maybe I do my contributions on the community work so maybe I got a job, because it’s busy. I’m not able to do job in the factory, because I’ve got arthritis, and I don’t want to be, lose my health right now.”

Courtney made health-related claims to social assistance but found that “with welfare, sometimes some [the social workers] are just not helpful at all. It’s like they act like it’s money out of their own pocket that they’re giving you.” She goes on to explain:

“For the longest time — even now — I still don’t know exactly what I’m eligible for. For instance, I need eyeglasses. I didn’t know that they paid for eyeglasses until I spoke with another worker who said you don’t know we pay for it? They reimburse you. You have to pay for it, but they’ll give you back the money. So I was sitting here for like a good two years, suffering from migraines because I need glasses, and I couldn’t afford it.”

Magdalena had been experiencing anxiety and was on medication. She was glad that the psychologist she saw spoke her native language because otherwise it would be difficult to express herself— to have to think and translate into English.

Sandra had anxiety but was reluctant to take medication. She was trying to find someone, aside from a psychiatrist, who could help her without the need for medication. Sandra’s social workers reminded her to focus on helping herself:
“... And they say, the job that I'm doing with my kids is good. Keep it up — I'm doing a good job with my kids. I'm the best parent that they've seen, is what they tell me every time. I need to help myself. I need to deal with myself right now, so that's what they're helping me with.”

The ability to maintain their own health was a challenge for many of the participants. Mothers often focused on their children's health while their own health suffered.
Chapter 6: Barriers to Provisioning and Women’s Strategies

Low-income mothers living in an urban setting provision under a multitude of barriers and constraints. The greater the number of barriers and constraints facing women, the fewer options are available to them. The mothers in this study had limited choices and used a variety of strategies to counter these barriers — except that the strategies cost them in terms of time and health, as well as physical, mental and emotional energy. The following chapter discusses the barriers to low-income women’s provisioning and the strategies that they use in meeting their own needs and those of their children.

6.1 Barriers and Constraints

“I get nine steps ahead, I get thrown 10 steps behind. So then I have to build up that extra step before I can make it up to the next 10 steps, to get thrown back again another nine steps. That’s just my life.” (Sandra)

A continuous shortage of money and childcare issues are at the core of low-income mothers’ constraints. Women are also constrained by a limited availability of social and community services, lack of transportation, a high level of violence/criminal activity in their neighbourhoods, low-quality housing, and a shortage of affordable recreational opportunities. Single parenthood and isolation resulting from having no family or friends to call on for support further constrain women’s lives, as does the need to deal with multiple social service organizations. Many women are burdened with poor health and an inadequate diet; limited English language skills and the struggles of adapting to a new country; or the need to care for children with special needs. Some of
above barriers were common to all of the research participants; others affected only some of the mothers in this study.

The next section looks at these barriers and constraints. The significant barrier of childcare-related matters is multi-faceted and these matters are discussed in detail in the Chapter 7.

Money

“It doesn't cost pennies and nickels and dimes to raise kids.”
(Courtney)

By far the biggest limitation every one of the mothers in my study faced was a constant shortage of money. Each of the participants talked about the significant impact that their low income had on their lives. It was difficult to make ends meet and to provide basic necessities:

“I didn't buy no milk this week — didn’t have the money for it.” (Jocelyn)

Eshe's monthly budget, after paying rent, was less than $500:

“Sometimes before the month runs out, $470's already finished, so I just manage and wait for the other month.”

Beyond basic necessities, living on low incomes rarely allows for extras. Leena and Bahati cried as they expressed the anguish they felt at being unable to allow their children to purchase books that were promoted at the school or to participate in recreational activities:
“I like to buy the books but it’s expensive. ... Last week, my son brought the brochure from school, so it was about the Spiderman books and puzzles. It was $9.99 dollars. He picked out two books, so I told him no sorry my son, I don’t have too much money. ... I can’t afford to buy two. Just I borrow from the library.” (Leena)

“They need more to go to sports, but we cannot afford it. Sports is too expensive.” (Bahati)

The stress of low income prevails regardless of whether mothers are employed or not. Sandra didn’t have a job:

“For me, funds aren’t in my book. I’m not working. I don’t get government assistance so I live off of the child tax benefit. I get a reasonable amount of money for child support from her father, which I’m trying to get more. It’s a big process. Like I said, it goes back to not having money to be able to go and do things.”

Sara described the reality of her life when she was employed:

“If you’re paying monthly rent and you’re working full-time, and then you have a mouth to feed, or you have kids, all your money’s going to go to rent and just feeding your kids. Then you don’t have a whole bunch of money to do anything with after.”

Housing in the Community

“If I had money, I would move from this area as soon as possible.” (Leena)

Constraints related to housing also affected most of the participants. Nineteen of the 20 research participants were tenants, most living in neglected buildings in dangerous neighbourhoods. For those who were in private rental apartments, rent was extremely high in relation to their incomes. The average monthly rent in the
community was $840 (Statistics Canada, 2008), which meant that many low-income families spent half their monthly income on rent alone. More than half of the research participants lived in government-subsidized housing and while this was a relief financially, it often meant living in unhealthy and dangerous communities. When I took a stroll through the local mall, I saw how the types of shops and items on display reveal the community. Judging by the numbers of shopping booths that sold pest-control products, it was clear the many residents in the community were battling cockroaches. Sandra, a mother of a visually impaired daughter, was reluctant to move out of her current unit and explained why she had to keep her lights on throughout the night:

“I don’t want to leave the unit I’m in right now because, knock on wood, I don’t have roaches. I don’t know what my neighbours have but, in my unit, I don’t have roaches. My floors — you can eat off of them — and they have to be like that, because if [my daughter] drops something and, say there’s two dark things sitting on the floor, kids automatically pick up things and put them in their mouth. ... But now if one piece is a roach and one piece is her chocolate chip cookie, what is she going to pick up? So I need lights and it’s hitting the pocket.”
Violence and Crime

The community was also subject to high levels of gang violence and criminal activity. My study took place two years after the so-called 'year of the gun'\(^8\); however, the city’s gun-related homicide rate continued to soar in 2007. Crime statistics showed a grim picture in the community: the rates of homicide, gun shootings, and young victims were all higher than in the rest of the city (see Appendix C). The drug trade was a key part of the local informal economy, with a marijuana grow-op rate three times as high as the rest of the city (Statistics Canada, 2008). The fear of many of the research participants that their children would become victims of crime or violence was clear. Mothers of younger children worried that older students would give them illicit drugs at school, and mothers of youth were nervous about the prospect that their children would consider gang membership to be their only route to survival.

Transportation

"Transportation is the main problem. ... It forces you to be isolated in a way because you can’t get anywhere." (Magdalena)

The obstacle of having to rely solely on public transportation had a significant impact on the lives of low-income mothers. Magdalena talked about her desire to

\(^8\)In 2005, Toronto media coined the term 'Year of the Gun' to describe a spike in the number of gun-related homicides in the city.
attend a church gathering on Friday nights, but she was too tired after work to make another lengthy trip using public transit:

“I can go … I can reach the place but by the time I get home, I’m tired, very tired, especially mental tired and physical tired. ... It’s too much for me. I don’t know, I don’t got the power to get out again and dress up. It’s very hard.

“I leave [my daughter] five minutes to seven at the daycare, and I have to walk a long way, three blocks, to get my first bus, and after I need to get another bus.” (Magdalena)

Bahati occasionally borrowed her ex-husband’s car:

“He give me sometimes the car to go to shop. Or my son had a hernia operation, he can’t walk. I took the car from him. I can’t pay the insurance, I don’t have the car — [it] costs too much. It’s too much bills. So I borrow sometimes from him, I say give me for your kids. I use it sometimes but it’s not enough.”

_Dealing with Multiple Social Service Organizations_

The intricacies of dealing with government agencies and social service organizations are convoluted for the general public. For low-income women, this is even more so because of the other constraints and barriers in their lives, such as limited language and literacy skills or lack of transportation. Women frequently have to deal with multiple government ministries, departments, and agencies, each with its own requirements.

The research participants who were on social assistance talked about the problems of being on welfare. In some respects, the guidelines appeared to be implemented inconsistently or women simply weren’t properly informed. Some
women talked about having dental benefits through welfare, others said that welfare did not provide such benefits. The same situation was expressed regarding eyeglasses, with some women understanding that these costs were covered, while others understood that they were not covered.

Jocelyn and Maxine described some of their experiences:

“This is what happened to me. I was working and I took one or two, too many jobs, and I did not remember that I did not tell these people. And they said I fraud them, so they put it on my record that I fraud them. ... I was, like, this is ridiculous. What did I fraud you with? I work my butt off to take care of my kids, and I said to the woman, I'll do it again. And she said if you do it again, we're going to charge you again for fraud. I said you didn't charge me for fraud, you just put on my paper.” (Jocelyn)

“So anyway, they still haven’t gotten back to me. Oh, they said I should write a letter appealing that I be moved to the top of the priority list. I said, you know what, I have enough. I have enough stress of my own, yeah.” (Maxine)

**Child Support**

The lack of an effective system of ensuring that mothers receive child support payments was a considerable obstacle to women’s financial security. Further, research participants spoke of the problem of support payments being deducted from their welfare cheques regardless of whether the mothers in fact received the child support payments. Sara was one of several participants who were critical of the FRO and the policy to deduct child support payments from social assistance amounts.

“[The FRO] was paying me directly, but since I just came on assistance now, they're going through them. From what I
signed, if they do send me anything I have to report it anyway. So then social assistance takes it out and then I’m still in the same boat so it doesn’t matter.”

Sara also described the problems with the way the social assistance and the FRO offices worked together and the delay she experienced when her ex-partner made child support payments to her through the FRO:

“He’s paying them now, but it’s like when FRO goes through, they’re not giving you the money anyways. They don’t give it to you. He might have paid a whole bunch of money or whatever but they’re not going to go give it to me right away either. And if they do, it’s like probably six months, you get a little bit and then that’s it. And then you won’t get it for probably a long while. I don’t know. It just keeps fluctuating. They’re never consistent in how they do it.”

Jocelyn had harsher words to describe the FRO. She was particularly concerned that her ex-partner, who was a truck driver, would have his driver’s license suspended if he was late with his child support payments:

“I don’t like these people [FRO]. They’re disgusting. What if he’s late? They’re going to take his license off. What if he can’t afford to give me for three months or so, he won’t be able to drive. ... And they say — you know what they say to me: Oh you sound like you’re feeling sorry for him all the time. It’s not a matter of being sorry for him. He’s a human being and, you know, people have problems and bills and stuff ... and he’s usually late, yeah, but what am I going to do.” (Jocelyn)

Community Resources and Children’s Programs

“If you go to activity, you have to pay the money but they have a lot of activity that you have to pay the money so that’s one can’t have for me. I feel sorry sometimes for them because, you know, you have three kids — it was my dream like good, good, good, you know, activity day, homework day,
church day, or something, very programming but my life’s straight in the middle.” (Bahati)

The neighbourhood in which the research participants lived had a severe shortage of community services and affordable recreational opportunities. Of the 200-plus United Way Toronto member agencies, only 20 were located in the city’s 13 priority neighbourhoods and, of those, only three were in this research community (United Way Toronto, 2008). The majority of the mothers could not even entertain the notion of paying fees for activities such as basketball, soccer, swimming, or dance lessons. Even when these programs were offered through the City’s community centres at a lower rate than through other community groups, it was not affordable for families living on a low income.

*Single Mothers, Young Mothers*

Single parenthood limits the provisioning work of mothers. Women who did not have partners with whom they could share the daily tasks of provisioning for their children faced an additional barrier because they did not have someone who could help by generating an income, caring for the children, and providing some respite for the mother. Ayana’s husband had two jobs — on the weekends he delivered newspapers and on weekdays he worked in a small warehouse. While Ayana and her husband — like many of the married research participants — each had traditional roles in the family, this arrangement provided them with an income, albeit inadequate, and gave Ayana the opportunity to care for her young children. Although some of the mothers who were separated talked about receiving some financial or childcare support from
their ex-husbands, this was not the case for most of the women who were single or separated.

In addition to the challenges of single parenthood, being a young single mother was extremely difficult. Courtney, a young mother of three boys, was 18 when she had her first child. She talked about the difficulty of motherhood:

“A lot of kids think it’s fun and games but it’s not, it’s a really serious thing. You have to put your whole life into your kids. Like, I don’t have free time. I don’t have a social life at all. Unless you have kids too then I don’t want to talk to you (laughs). You can’t be calling me up and saying you want to go out tonight. You got a babysitter for me?”

Courtney went on to say:

“My first two are actually only 10 months apart so it was really hard for me. There were some times where I’d be sitting there and crying and ripping out my hair and not knowing what to do because I was so young.”

Several of the research participants who were lone parents had children with different fathers. This often added another layer of problems to an already constrained situation, especially when seeking child support payments. Courtney described her situation:

“With my first son’s father, we don’t know where he is. The last time I heard he was living in Jamaica. ... And my second son’s father, they waived child support because there was a restraining order put on him for violence ... [and for my third son] they waived support because he’s on assistance, so he can’t really afford to take care of him.”
Another obstacle for many of the research participants was having no family or friends to help them with their provisioning. Bahati, who had three children, and Tuyen, who had six, were both lone mothers with no family members or friends that they could turn to for occasional support or respite:

“I don’t have any family. ... My phone sometimes doesn’t ring the whole week.” (Bahati)

“Only me, and I have to take care [of] six children. Sometime I cannot focus to study. That’s why I take more time. Only me, oh my God. But I can't do my homework at home. When they sleep, I am tired, I sleeping.” (Tuyen)

*Race, Language, and Culture*

“Canada is not an easy country.” (Ayana)

Recent immigrants were faced with constraints related to language and cultural barriers as well as foreign-credential recognition. Camila went to an agency to look for an office job, “but my English is bad ... my communication is not too good, and I cannot get the job.” She wanted to take courses to improve her English but also needed a job, so Camila ended up enrolling in a training program to become a PSW:

“I took the training because I need to work. And I need more English, but I don’t have time.”

Many women who are new to Canada have a post-secondary education from their home country but only high school equivalency in Ontario. In addition to language and educational limitations, some women also faced additional constraints stemming from their cultural backgrounds. Marriba explained the expectation that she take care of her husband and obey him:
“He don’t have good health, so it’s my responsibility to do something for him, according to my culture. We obey him and we do everything for him. I do everything for him.”

Other barriers and constraints that the research participants spoke of included health, diet, time as well as various professionals with whom they interacted, such as teachers, social workers, or childcare workers.

### 6.2 Provisioning Strategies

The numerous barriers and constraints limit the ability of low-income mothers to provision for themselves and for their children. In order to get around these barriers, low-income women use various strategies to deal with the barriers and manage their responsibilities on a daily basis. Some of these strategies are conscious efforts and plans to achieve particular goals; others are survival tactics to deal with constraints and overcome the hurdles of everyday life. These strategies, however, come at a cost to low-income mothers. The cost can be in the form of having to carry out extra activities, such as the need to take several buses to attend a parent-child drop-in program. Women also bear costs by being forced to make financial, health-related, and personal development sacrifices.

Generally speaking, the WEDGE provisioning strategies fall under two categories: practical, daily strategies and transformative strategies. Practical strategies that are used on a daily basis include activities that fall under two categories: creating and managing resources, and engaging in risky behaviours. Transformative strategies
involve re-creating social identity, resisting stereotypes and stigma, negotiating boundaries of responsibility, and envisioning the future.

The mothers in this study mostly use strategies that relate to creating and managing resources. Among others, these strategies include making sacrifices in order to care for their young children, seeking out community resources, and improving their education or volunteering. Mothers also shop for items on sale, buy inexpensive food, and receive help from kith and kin whenever possible. These types of strategies, discussed in the following section, illustrate the ways in which the low-income mothers in this study create and manage their resources.

**Practical Strategies: Creating and Managing Resources**

“I just went to the food bank. I'll go anywhere to get food for my kids.” (Jocelyn)

Creating and managing resources are the ways mothers deal with the demands of daily living. Included are approaches to managing and gathering resources needed to make ends meet, such as saving, strategic budgeting, juggling bills and priorities, making sacrifices, cutting back, and going without luxuries. Exchanges would also be considered under this category of strategies; however, the research participants in my study did not appear to engage in exchange activities. Similarly, selling items was not an activity in which these low-income women engaged.

Since they face certain constraints that more affluent women do not, low-income mothers have to regularly organize their time and create schedules around the
children’s day, taking into account such barriers as a lack of money or transportation. One of their simple strategies was setting reminder rings on their cell phones. Several times during the interviews, as the end of the session approached, the mothers’ cell phones would ring to remind them to pick up their children.

Most of the research participants regularly had to make decisions around which bills to pay, stressing that paying their rent and hydro bills were top priorities. Jocelyn, Bahati, and Maxine explained:

“Most important, first thing first, I’ve got to pay my rent. Even half of your rent, you’ve got to pay it.” (Jocelyn)

“We have to pay that. ... It’s kind of high but the bill, you have to pay. You must pay hydro, you have to pay.” (Bahati)

“The hydro is so shaky. I just got my hydro bill and it says $900. ... It’s really unsettling so I’m just trying not to think about it.” (Maxine)

Maxine tried to cut down on her hydro bill:

“I put the heater off at nights ... and when I do put it on, I put it on very low. ... And it’s not like I’m cooking that much. I cut down on the cooking.”

Courtney described how she budgeted her monthly bills:

“I get $525 so that’s the most money I’m going to get this month plus the extra $100, so this month I’ll pay like my phone and my cable out of my baby bonus. And then buy a little bit of groceries, and then at the end of the month, because usually it’s two, three days after my baby bonus I get my welfare cheque, and so I’ll do grocery shopping. And then sometimes I’ll switch it around. It’s just because we get our cheques around the same time, like the 20th and then like the 28th or 29th of the month. So you have to spread
your money out to last you from the 20th of one month to the 20th of another.”

At the same time, the mothers lived with the constant stress of being behind in their bills. When I asked Bahati to talk about how she decides what bills to pay, she responded, “Two to three to four months — I’m behind in everything.”

Jocelyn described her managing strategy:

“Even before all the bills are done paying, I have to make sure my son has enough money for the month for school — for lunch and his tickets. And my daughter has to have her snack. When I go buy grocery, I have to make sure I have her snacks and her lunches. But most important is your rent and your food. You know, they’re our needs [and] maintaining of self. And then the rent and the bills — hydro and everything else — could come after. You have to pinch your pennies. What I do is, when you go shopping, I said okay, I’m going to go buy meat. I buy enough and I season up everything and I put it away. And that’s how I make it last, so I don’t have to go every week to buy meat.”

The mothers said there were two months of each year that were most difficult financially: September (when school starts) and December (the holiday season).

Mothers who avoided using credit cards during the rest of the year would purchase on credit, reluctantly, when their children needed school supplies:

“It’s scary, you know, and the interest is high. If you don’t pay, it’s going up. ... I couldn’t sleep if I am behind [in my bill payments]. ... Even the telephone bill, if you don’t pay they cut it.” (Bahati)

Marian also had to turn to a credit card when times were tough:
"When [my son] was a baby, [my husband] got laid off. We were using a credit card. ... He just started to work [and] he pays a little bit at a time."

Bahati managed her money by avoiding purchases for herself, shopping without her children, and buying items when they are on sale or during off-season (e.g. buying winter boots in the spring).

“I don’t spend a lot because I use what I have. If I have two, three pants, I clean it. I don’t spend like women do, even for my hair. I find that for my hair you have to pay $70 or something. $70 for my kids shopping — okay ... $70, $80 for hair, no. That’s for my grocery one week. I take shower for $10, $15 to wash my hair by myself. I comb, I dry it, that’s it.

“I don’t [go] shopping my kids. I buy $2.99 nail polish [and] I buy my hair shampoo, that’s it. I wash my two pants. If you clean it, they look like new.”

However, Bahati had no option but to pay $250 for her son’s eyeglasses, which she understood to be not covered by social assistance. Like Bahati, Marian was careful with her spending and would shop when items were on sale:

“We don’t buy too much clothes ... only if we have to go somewhere special, then we will buy an outfit. ... Sometime I see something in the mall that I want but I say what I’m going to do with it? I’m just going to have it in the closet. So I’d rather save the money to buy things like Pampers ... [and] if there’s diapers and stuff on sale then my husband will go buy it during the week.” (Marian)

Camila expressed a similar sentiment when talking about where she spends the limited amount of money that is available to her:
“For food because I don’t have too much money ... all the time my children is more important. ... They have pizza lunch, every month he have a pizza lunch, and for to buy the book because they send the magazine to buy. It is difficult but you need to buy.”

Although it would seem that buying in bulk would be cost-effective, Jocelyn explained why she avoided the practice:

“People say buy bulk food, don’t do that. ... It will spoil on you. You have too much of this, and you’re not using that, and maybe your kids don’t want that no more. ... So you buy stuff that you know you’re going to use up, and then every week you spend $20 every week for meat. That’s what I do, because I don’t have that much.”

Women manage their resources by doing laundry at night because the hydro rates are lower. They also try to save laundry costs, as described by Magdalena and Eshe:

“I do laundry at home [by hand] because I can save some money. It’s too much money to spend at the laundromat. I wash some clothes at home and the bigger stuff I will take to the laundromat on Saturdays.” (Magdalena)

“It’s expensive for you to wash a load. ... You don’t want to wash the white clothes in with the coloured ones, and if I have to use them separately, I have to use $6.” (Eshe)

Going shopping without their children (if at all possible) was another way that mothers managed their resources because they would not feel pressured to purchase items that their children requested. As Marian stated simply: “I go grocery shopping without them.”
Camila also tried to do her shopping when her son was at school or with his father. Since she had to take a bus to the nearest grocery store, Camila’s shopping was limited to an amount she could deal with on the bus. This meant that she had make several smaller shopping trips each week:

“Sometimes I go with [my son] but it’s too difficult because I need to take the bus. ... When he goes with the father on Saturday, I go shopping ... maybe three times a week. And when he goes in the school sometimes I go when I need milk. On Saturday or Sunday, I buy other things.” (Camila)

Mothers with preschool-age children often didn’t have the option — they had to take their children to the store. Eshe had a six-month old baby:

“I take him along with me. I use the stroller. I buy my grocery and I take him with me. I buy enough things that my stroller can carry.”

Eshe scheduled her shopping trips so that she could buy the bulkier items at the same time:

“If I have to buy more than what fits in the stroller, then I take a cab. ... When I know I’m going to go buy those things, I schedule it to the time I will have lots of things to buy. If I don’t have detergent, I don’t have bleach, I don’t have diapers — when I know they are the big, big things, then I take a cab.”

No matter how low their income was, several of the participants talked about trying to save money for their children’s futures. Farisa, a mother of six, ensured that she and her husband put away $60 each month for her children’s education.
**Seeking Out Community Resources**

“Whatever I can — park, swimming, community — I take them everywhere. Summertime I never sit at home, never.” (Bahati)

All of the research participants described how they regularly sought community resources, such as parent-child programs, social events, and library programs. In order to enrol her daughter into swimming lessons that she could afford, Magdalena arranged one of her two days off work to be the same day as the lesson; otherwise, she would not be at home in time to take her daughter to the pool. She had to take two buses each way to the pool, and it was a 45-minute trip:

“I would like to put her in more programs but I can’t manage, you know, it’s too much. If I could drive, it’s okay probably, it’s going to be more easy for me. ... It’s impossible, you know, when you work, and the time, you know, in the wintertime, it’s very hard.”

**Making Sacrifices to Care for Their Young Children**

It was clear from the interviews that women wanted to take care of their young children themselves. They were reluctant to allow their preschool-age children to be in the care of others. In order to do this, women made numerous sacrifices — in terms of their time, their health, their financial security, and even their futures. Many women spoke about not being able to get an advanced education themselves but they deeply desired one for their children.

“When they sleep, I clean the house, I cook, laundry, or whatever they took from shower, I take everything and clean.” (Bahati)
“In the morning I always have to get up, like, half an hour before they do to make sure that their breakfast is ready.” (Courtney)

“When my daughter is awake, I’m not doing too much chores or for myself. I mean, not as work for my own self. Then when she goes to sleep, I will prepare the dinner, maybe doing some work, or I can read my own book. Normally that when she is sleeping, I’m not doing that much for her. But I might check my son’s homework.” (Daiyu)

Ayana and Daiyu devoted most of their days on activities with their daughters.

Ayana would help her daughter with reading: “A child has to be ready for school”; while Daiyu approached each day as a learning opportunity:

“Whatever place I take her, like if I go shopping, I just feel like it’s a learning experience for her. If I pick up something and I’m going to show her: okay, this is a vegetable, and she can touch it, she can feel it. But sometimes she might — it’s too much messy the floor of the store — and she also helps me, too. I ask her to pick this up and then she learns how to get the instruction.”

Leena would have liked to go to school or attend a training program but the cost of daycare was out of reach:

“I’d like it, to go to the school again. But I cannot go ... because just my husband is working. My rent is too much high.”

Leena didn’t want to neglect her son’s education, however, and pays a tutor every month:

“So just I’m saving for the education for them. ... I’m sending my son for the education ... $50 every month to pay for the guys who teaching my son.
**Getting Help from Kith, Kin and the Church**

“It’s expensive, you know. Godmother and godfather buy a jacket for wintertime. Friends give me $50 certificate in Wal-Mart for shoes, running shoes, pants. And, my brother, he spent money on boots for [my daughter].” (Magdalena)

Most of the participants depended on some help from kith and kin; however, these friends and relatives were, in most cases, also living on low incomes. Ayana depended on her extended family for much emotional and social support. Her children played with their cousins, and she felt comfortable and happy with family living close by.

Courtney’s family was also important to her:

“We have a close family. There’s me and my two brothers and then my dad and then my brother’s wife and my brother’s girlfriend. We’re all close.”

Sandra’s received some help from her sister, but nobody else:

“We all take care of each other. I babysit my niece and nephews. My sister babysits mine — but anybody else, no.”

Courtney relies on her two older sons to help with the baby:

“They help me out a lot. They love the fact that they have the baby brother. If there’s some times where I’m in the kitchen and say I’m doing the dishes or I’m cooking and he’ll be crying and I’ll say can you give your brother the soother or can you put him in his swing.”

Friends and neighbours were an important source of support. Courtney, Camila, and Marriba each had a friend who helped them out:

“She just lives up the street and has kids of her own. If I have doctors’ appointments or something, she’ll pick up my
other two from school and feed them until I get home. But the baby mainly stays with me because I breastfeed.” (Courtney)

“I have the friend and when I have problem, she pick up my son, 4 o’clock when he come back.” (Camila)

“If I am not at home, one of my friend and her daughter looks after my daughter. If I’m going outside, she take care of my daughter.” (Marriba)

Magdalena, who had separated from her husband, depended on her brother to watch her daughter on Saturdays when Magdalena worked. She also had a friend who helped with groceries:

“Sunday, I usually make my grocery. A friend of mine she drove me to a place to shop.”

Eshe, a refugee, was fortunate to have a roommate with whom to share an apartment:

“The rent is $950. It is a two-bedroom flat so I pay and she pays. I pay $450.”

Eshe’s roommate helped out in other ways:

“When my roommate is home, she’ll watch the baby. ... One time I had a doctor’s appointment, and it was raining. She came from her job so that I could go see my doctor.”

Maxine received help from her landlord:

“My computer had a problem, and he fixed it. ... The landlord is pretty nice. ... If I needed to go somewhere, I could ask him and if he’s available, he would take me.”

The church was an important source of support for several of the research
participants, including Daiyu, Eshe, Magdalena, and Marriba:

“We also go to church on Sunday. ... They have different programs for different ages. ... The little ones program is just playing time. Maybe our situation’s not so typical because we’re an immigrant family from another country. We don’t have relatives in the city so most of the time we feel the community service is so important to us. We rely on that a lot.” (Daiyu)

Eshe took a bus and a subway each week to attend church:

“[We attend] every Sunday ... and there was one time, like in the church, somebody just give us a baby playpen. Somebody might give us toys, and also, in the church, they gave us $100.”

Magdalena and Marriba also found support and comfort in the church:

“Now I’m going on Friday night to my church. ... For me, it was a refuge. For three years, I feel very safe. ... I receive a lot of support in my church.” (Magdalena)

“Mostly our community, we have a good benefit here in our community. ... They are the same religion, they look after us.” (Marriba)

While kith and kin provided a lot of support, a number of the research participants talked about their reluctance to ask for help — although if help were offered to them, they would accept:

“I don’t like to bother anybody to pick me up. If you need, you have to go by yourself.” (Magdalena)

“I don’t want to bother [my brother] because my life is my life. ... He has his life.” (Bahati)
Other Strategies to Create and Manage Resources

Other strategies that the mothers turned to included seeking a source of income, however minimal (e.g. welfare, or one or a number of jobs) and applying for services or benefits. They would regularly postpone employment or education/training, but would also try to improve their education whenever an opportunity presented itself.

Sandra refused to have her children with ADHD receive medication because she worried that the cost would not be covered when the children ceased to be eligible for health benefits under social assistance. Sandra tried to make sure she had a bit of extra money:

“I have to make sure that I have [some money] there for medication for myself if I need it, because I don’t have a benefit. ... My psychiatrist just wants to bill me for the medication. I just need somebody that I can talk to that can help me without the medication.”

Several of the research participants talked about keeping their children out of school for reasons unrelated to the needs of the child. For example, mothers often had to take their children out of school because they didn’t have alternative childcare arrangements. Bahati, a single mother with a serious medical condition, at times had to take her five-year-old son to appointments with her during his school day because she would be unable to make it to the appointment and be back in time to pick him up at noon when his class ended:

“They said we don’t have a choice, we have to give you that [medical treatment]. So they gave me now and still I’m taking the medication. Every two weeks, three weeks [I go] downtown. I took the little one with me because to go there
and come back it takes time. So he's absent in the class. ... I spend all day there and with the subway, it's not easy. So by 2 sometimes I finish, came straight home, pick up the other two.”

**Engaging in Risky Behaviour**

In terms of risky choices, women make decisions on the degree of risk that they are willing to take. Some women engage in more risky behaviours than others. For example, Sandra had been renting out a room in her basement without informing the public housing corporation, but when it became clear that the tenant was engaged in the illegal drug trade, Sandra ended the arrangement. She explained:

“I could go to housing and say do you guys have anybody that just wants a room but I have to be able to say because of my children, I don't want just anybody in my house.”

**Transformative Strategies**

The WEDGE research identified provisioning strategies that were transformative in nature. These strategies include re-creating social identity, resisting stereotypes and stigma, negotiating boundaries of responsibility, and envisioning a future. For the low-income mothers in this study, transformative strategies did not surface as readily as did the practical strategies. Those that were the most evident were related to negotiating boundaries of responsibility and envisioning a future. Some mothers also identified activities associated with re-creating identity (e.g. taking time to care for themselves by pursuing spiritual, leisure, social, and non-formal learning opportunities); however, in my sample of low-income mothers, these transformative strategies were few and far between.
Negotiating boundaries of responsibilities are ways women direct or strategically manipulate their relationships of responsibilities. They generally negotiate these boundaries by distributing their work across domestic-market-community lives, or by developing new — or setting limits on — existing relationships with friends, families, acquaintances, and networks that challenge existing boundaries around their work.

As children grew older, the mothers said that they would relinquish some of their responsibilities.

“For my son, actually, I don't spend almost any time with him in the morning because he’s 12 and he takes care himself very well. He also prepares his own lunch.” (Daiyu)

Several participants talked about the importance of maintaining their privacy. They would establish boundaries around individuals with whom they would acquaint themselves. Camila, for example, does not like to socialize with other women from her cultural community and avoids getting into arrangements of childcare exchange favours:

“No, I don't have [friends who take care of my son] because they want to know about my life, after they talk, I don’t like.”

Finally, strategies related to envisioning a future refer to the way women define and envision how they might provision in the future. Activities in this category might range from making concrete timelines and outlining specific tasks, to more general thoughts of how they would like to experience their future lives. Included here are women's descriptions of what is imagined, limits to imaginings, and how futures are
imagined. Many of the participants had plans to re-train and find a job when their children were in school full-time. Leena intended to retrain herself and get a job once all of her children are in school:

“For the future, I have a plan. After my daughter, she’s going to school for the full-time, so I'm going to school, first of all.”

Most mothers articulated visions for their own futures in terms of their children’s futures. They wanted their children to get a good education, perform well in school, and attend post-secondary education. Mothers of preschool-age children expected their lives to become easier when their children began to attend school full-time and become somewhat more independent. Those whose children were already in the middle-school years, however, worried that the future would become more difficult because their children would be more susceptible to peer influence. The participants tried to maintain a positive attitude and remain hopeful that life will change for the better in the future:

“The future is in front of you, the past is gone.” (Marriba)

“I just think things will get easier. ... I'm pretty much an optimist.” (Daiyu)

“If you have a little, it's okay. You have to say thank you God, because some families they don't have nothing. You have to say that.” (Bahati)
Chapter 7: Experiences with Childcare Policy

"And the three kids, wintertime with the stroller — sometime the snow — even you can’t push the stroller. How I can take them? Where is the daycare? It is not around this area. I don’t have a car." (Bahati)

Childcare-related matters are intrinsic to the lives of low-income mothers. The lack of affordable, available, and quality childcare was a significant barrier, especially to women who wanted to find a job because their children were in full-day school. However, daycare is not necessarily what all low-income women want or need: It is but one aspect of childcare policy.

Childcare policy is instrumental in both supporting and impeding the ability of mothers to provision for themselves and for their children. In this chapter, I describe the childcare arrangements of the research participants and identify the key themes that came from the interviews. The childcare arrangements of the 20 women participating in this research were as follows (see Table 8):

- 12 mothers were full-time caregivers of their children and had at least one child of preschool age (under six years);
- one mother (Tuyen) had some children in public school and one child in a full-time daycare centre;
- three mothers had children who were in full-day school;
- two mothers had children in full-day school and in before- and/or after-school programs; and
- two mothers had children in full-day school and used a combination of before- and/or after-school programs and a neighbour.

While the criteria to participate in the study included having at least one child between 0 and 12 years of age, some of the mothers had children who were close to age
12 and were no longer supervised at all times. These mothers had a degree of flexibility with respect to limiting their work or volunteer activities to the school day. Some of them would allow their children to be at home alone for a short period of time after school.

### Table 8: Research Participants’ Childcare Arrangements

<table>
<thead>
<tr>
<th>Preschool-Age Children</th>
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<tbody>
<tr>
<td>Mom full-time caregiver</td>
<td>Eshe, Marian, Maxine</td>
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<tr>
<th>Preschool and School-Age Children</th>
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<tbody>
<tr>
<td>Mom full-time caregiver</td>
<td>Ayana, Bahati, Courtney, Daiyu, Farisa, Leena, Noorzia, Sandra, Tazmeen</td>
</tr>
<tr>
<td>Mom in adult day school program; children at school and daycare centre</td>
<td>Tuyen</td>
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</tbody>
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<tr>
<th>School-Age Children</th>
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<tbody>
<tr>
<td>School and mom</td>
<td>Jocelyn, Marriba, Sara</td>
</tr>
<tr>
<td>School and before- and/or after-school program</td>
<td>Amisi, Magdalena</td>
</tr>
<tr>
<td>School and combination of before- and/or after-school program and neighbour</td>
<td>Camila, Sathi</td>
</tr>
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#### 7.1 Variations in Childcare Arrangements

Women’s childcare arrangements vary from mother to mother. More importantly, individual women modify their own childcare arrangements over the years depending on their circumstances at a given point in time. The research suggests that
these shifting childcare arrangements reflect the fluidity of most women’s lives as they alternate between spells as caregivers and spells in the labour market. The mothers in this research project were no exception. Several of the participants had a particular arrangement for the care of their children at the time of the interview, but a different arrangement one year prior. Others expected that their current arrangement would change over the next year or two.

Tuyen had been the primary caregiver of her first four children until they reached school age. She was thrilled to get daycare for her youngest two children:

“I didn’t know [about fee subsidies]. My friend, she went to the school, and so I asked her. I think why — because she has three children — who takes care of her children? She’s so selfish [I thought] she doesn’t be home. So I didn’t know, if I go to the school, the government give me daycare. ... Before I don’t have children, I don’t want to go to school. But now I want to go to school.”

Sara’s daughter had a variety of caregivers over the years — a typical arrangement among the research participants:

“When I first had her, I took a year off and then stayed with her for a year. And then I went back to school, and then her dad took care of her the next year. And then after that she was two, we put her in daycare. Before that, I made sure that we were on the waiting list for subsidy daycare. She was in daycare probably for two, three years. ... I ended up taking her out and then switching her over to the school that was closer to my home. ... It was like five minutes away ... so it’s more convenient for us.”
Over the years, Jocelyn used a variety of childcare arrangements. For a period of time, her mother provided childcare until it became evident that, due to her age, she was no longer capable:

“So I said no, she can’t babysit because she will forget that she has my baby, so I just took my baby and stayed home. Then my mother — I took her to the nursing home. I had to take care of [my daughter]. So I had to quit all three jobs to take care of her.”

Jocelyn talked about the childcare arrangements with which she felt most comfortable:

“My neighbour’s daughter babysitting — while her father was really doing the sitting — that’s the only one I really, I could breathe. I was okay. I never had to worry [and] wonder what’s going on with my child … and even if I come home late from work, he says to me she’s sleeping, leave her be. That’s the only place I felt safe. And the daycare: during the day I worked in the daycare. I never get much work done because [my daughter] would cry if I picked another child up, so I kept asking my boss, could you move me from her room? And he says no way, your baby needs you. I was, like, okay, gosh, but this child cries every time I pick up another child, it’s like, he said she’ll get used to it.”

7.2 The Ongoing Dilemma: Going to Work or Staying at Home?

“You can’t afford to pay a babysitter. You feel sorry to ask people watch my kids. You can’t leave them at home — they are young — and I like to work, so it’s very hard.” (Bahati)

The majority of the participants had been in the labour market — either in Canada or abroad prior to immigration — and they intended to return to employment as soon as their children were older. Most of them earned minimum wage. Marian worked in a candle factory prior to having her two children, Noorzia worked in a
bakery, Sandra worked in a warehouse, and Tazmeen worked in a restaurant as a manager. The participants talked about upgrading their own education level and getting a job once their children were in full-day school. Leena planned to return to school for two main reasons: the extra income she would earn and the boredom of being at home alone. It was also important for her to be able to ‘keep up’ with her children’s education levels:

“... Especially for the kids, they need more education, like more information about everything in the future. So if I’m not answering, they can tell me: so mom, why you didn’t you go to school that time, when you came to Canada? So I have to go to school.”

Even when appropriate childcare was available to them, most of the participants were keenly aware of the trade-offs. Employment might provide a higher level of income than social assistance but the associated stress of maintaining a job while keeping up with their children’s needs was a factor that they could not ignore. Social assistance, on the other hand, provided a very low income and intrusive scrutiny from social workers yet allowed women the time and flexibility to be available for their children. The sense of security that came with being there to care for their children was extremely important to the participants.

Courtney, the young mother of three, described her life in the labour market before she went on social assistance:

“I was doing market research and the hours were good because it was from 9 to 5, but sometimes I didn’t have to be in till 11:30, sometimes I didn’t have to be in till 12, sometimes I got home early so it gave me time to actually go
home. If I got off at 2:30, I could go home, get dinner all ready and then pick up the kids from daycare early. But if I worked till 5, it was about an hour away so it was kind of, like, rush — I had to leave right at 5 in order to get that bus. Because I had to take two buses to get home, so in order to catch the bus, I had to leave right at 5, so if I left after 5 I was going to be late. It was hard, it was hard. I wish they extended [the daycare] an hour — instead of having to pick them up at 6 at least 6:30.”

Until recently, Jocelyn had multiple jobs — spending several hours a day working at the local public school and then at her second job from 7 p.m. until midnight. Jocelyn had trained to be a PSW and was working at a warehouse when she had a workplace accident. The dilemma facing Jocelyn was how to watch her children and go to work at the same time:

“I have to go to work. The only thing my kids could say is mommy’s never around, she’s always working. ... But now I've had an accident, I’m there for them, you know. They understand. I get to see a lot that I’d never seen before.”

I Never Leave My Children

“I had to make sure that person is capable of looking after my child. ... If I lose a job, it’s okay — but I don’t want anything happening to my kids.” (Jocelyn)

“You can’t leave anybody your kids. You just you have to know the person.” (Bahati)

“I don’t go nowhere by myself except for my appointment.” (Marian)

Safety was paramount to the research participants, and the need to trust their caregivers was a common sentiment expressed by the women. Some mothers would
not leave their children in the care of anyone outside of family members, and a few women even felt uncomfortable with a member of their family watching their children:

“Don’t bother with your friends. Friends don’t care if there’s a fire, they’re grabbing their kids first and they’re gone.” (Jocelyn)

“Even when they’re at their grandma’s or with their dad, I always call, like, every five to 10 minutes to see what they’re doing ... and their grandma was getting upset because she said they’re in good hands.” (Marian)

Maxine’s preference was to have a family member care for her sons if and when she got a job:

“If I can afford it, I’d have someone come and live in and take care of them. ... I’d prefer it to be family ... my sister or a cousin.”

Farisa had six children and, aside from school, they were always in the care of her or her husband. Occasionally, she would call on a relative to watch the younger children if she had an appointment. When I asked Leena if she could ever leave her children somewhere if she had an errand or wanted some time to herself, she laughed: “When I was back home, yeah. But now, no. They are small kids, where I leaving them? (laughs).” When I asked if she would ever have a babysitter come to her house, she responded: “No. We just stay at home.”

There is a range of comfort levels among mothers with respect to others caring for their children. To a certain extent, these viewpoints vary depending on the age of the children. But even so, some mothers feel less comfortable than others at the
thought of someone else watching their children. Cultural expectations also influence women’s views on childcare. When asked at what age Marriba would feel comfortable leaving her daughter alone at home, she responded: “Maybe at the age of 18 to 20.”

For those who put their children into a daycare arrangement, a great deal of consideration was devoted to finding a suitable childcare setting — if there was any choice at all. Most of the participants whose children attended daycare centres were pleased with their arrangements. Camila, Magdalena, and Courtney were more comfortable with their children in daycare centres rather than in home-based settings:

“I think it’s more better ... more profession for him. I don’t like to leave him there with other people because I think it might be more danger for him.” (Camila)

“I like it. Especially because they’ve got the rules and they teach them rules. They schedule them and they put in type of programs, and if I pay for somebody, probably I don’t know the person, they doesn’t have the knowledge how to deal with kids. And this is my concern. If I bring my child to someone who doesn’t know anything about child, it’s very difficult to — especially here, I no got family. And to trust, it’s very difficult to trust. ... For me it’s the best choice I made, to put her in the daycare centre. Even I heard people — they say no, I’m never going to put my child in the daycare because I don’t know who is going to treat them, I don’t know who is going to watch. ... Daycare is the best thing in Canada. They keep their eye on them. It’s better than somebody else you don’t know.” (Magdalena)

“I was a very protective mom, so I never left my kids with anybody except with my mom or my dad. ... My mom used to say well why don’t you put them into daycare? And I’m like, no, I don’t trust it even though it’s like public daycare, and then I came here and got to know them and seen how they were with my kids and how my kids reacted to them. And I decided to leave them here a couple of times, and then
once I moved out on my own I decided to go to work so I put them into daycare.” (Courtney)

Tuyen’s youngest child attended a daycare centre and although she was happy with the arrangement most of the time, she still had some worries:

“I happy with daycare but sometime I not happy because sometime when [my child gets injured] when I ask them, they don’t know. But they take care of my children, right? Why you don’t know? Only that, I’m not happy with that … that daycare is good, healthy, everything is good. But sometimes, when it happens, I want to know. Sometimes I tell them if my children fall down and hit their head, you let me know. And I go check with the doctor because head very important, right? I worry … because I don’t want when they grow up have a sickness.”

In contrast, Jocelyn had a greater level of comfort with home settings rather than daycare centres:

“Even when my girls were younger, they would go to private home daycare. I would not send them to the big daycare because I would have to know you — and trust you. I was, like, always scared about that. I don’t why but I was always too protective.”

Despite her comfort with home settings, Jocelyn described her ‘worst nightmare’ with respect to one particular childcare arrangement:

“My son was three years old, and I used to go to work and leave him at home with my daughter, because she just had a baby so she wasn’t at work. And one day I was at work and I got a call, there’s a fire at my house. Apparently my daughter left a lighter downstairs on the couch and my son picked it up and went to my bedroom. … So when I got to the house, there were two ambulances, one my daughter was in, that’s my third daughter — no, my second daughter — she was in an ambulance, and he was in one. They said he was very lucky — he inhaled so much smoke. …That was
my worst nightmare. So after that I quit my job and I stayed home until he was six years old. When he was six years old, I got pregnant. What a life I tell you, but I’m happy.”

If I Started to Work, I’d Miss Them

“I felt close and attached to them [and] if I started to work, I’m going to miss them.” (Marian)

Well, we wanted to [put our son into daycare] but he is so attached with us. He would start crying and we just, we were, like, no he’s going to cry too, so we never tried. ... I know sometimes it’s hard, like when, you know, the job — if he [Tazmeen’s husband] had to come late but I was waiting for him, so that he can come home and he watch him and I go to work. (Tazmeen)

Mothers of young children said they would long for their children if they entered the labour market. Marian and Tazmeen were both married mothers of two children. They had the choice to be full-time caregivers because they both had husbands with jobs, albeit the jobs were unstable and not well paid. Tazmeen would be able to choose if she wanted to go back to work at the end of her maternity leave because her husband had a sufficient income:

“And even I feel like if I, if I don’t want to go to work, that will be, like, my, like I can choose it. ... If I want to stay with my children, my husband won’t force me to go.”

Even with that choice, Tazmeen knew that they needed to start planning. She was not comfortable with using a daycare centre and planned to return to work only if they were able to arrange complementary shifts at work:

“If the timings are the same, you know, with my work and my husband’s job, so I hope we can arrange that. But if it is like a little bit of a problem, like my son’s going to start
school, so we’re not sure if he’s going to get the mornings or afternoons, so, and then probably it’s going to be a little bit of a problem.”

*I Can’t Afford It*

The high cost of childcare drastically limits the choices available to low-income mothers. Without a fee subsidy, licensed childcare centres are out of reach financially. The wait-list for a fee subsidy is long and, furthermore, there is a shortage of licensed childcare providers in some communities, including the research community. For mothers who are able to get a fee subsidy, an additional restriction is that some daycare centres do not accept subsidies. In the broader neighbourhood where I conducted this research, there were only four licensed childcare centres, of which one did not accept fee subsidies.

Bahati was thrilled to learn that there was a daycare centre directly across the street from her children’s school and that she could possibly get a job. It was like a ray of sunshine:

“... [It was] like a big sun for me. I drop them 7, it’s very close and the kids they can go [to school]. ... Six, I pick them up. ... I have long chance from 7 to 6, can work even 10 hours, nine hours.”

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9 The Ontario Ministry of Children and Youth Services maintains a directory of licensed childcare providers. This directory indicates that there were only four licensed childcare providers in the community where I conducted this research. In comparison, there were 43 licensed providers in my home (and more affluent) community.
Bahati’s excitement quickly faded when she discovered that the centre did not accept fee subsidies:

“I ask them if they accept the kids for daycare. They told me yes. I was so happy that time, I say okay I have three children. ... And they told me how you can pay the money ... for one child $150 a week they said. That one, I can’t afford it because you don’t get subsidized.”

As there was no other centre near her children’s school, Bahati’s options were limited and she decided that she would have to remain at home until her children were older:

“The other daycare they don’t have around ... so that’s why I stop. I stay with my kids. Leave them till they grow.”

Sara felt she had somewhat of a choice in selecting her daycare centre but she was constrained by those that accepted fee subsidies:

“There was a daycare closer by and I looked into that but they were so expensive. And I was like, wow, for childcare that’s really pricy. ... It was pretty out there, like, high-end.”

Sathi and Leena also found the cost of daycare to be out of reach. Sathi used a childcare centre when she had a fee subsidy but then stopped:

“I find it is too much, the daycare money ... too expensive then I stop. And I tried to find, I said to myself, it’s only for two hours — or one hour in the morning, I’d better find (inaudible) for a person. And it’s not always because I work some days, some days not.”

Leena would like to go to school but paying childcare fees is simply out of the question:

“I can’t afford it. ... I’d like to go to the school again. But I cannot go. ... My husband is working. My rent is too much high.”
Jocelyn used a number of different childcare arrangements over the years and cost was always a factor. She sometimes had to rely on teens living in the community:

“If you could get a teenager, then you could pay them a set fee, like $10 a day — and that’s okay. You could deal with $50 a week.”

But Jocelyn worried about the care her daughter was getting:

“There was one babysitter in particular, she used to take kids to school ... and I asked her and she said, yeah, she would do it. Then I couldn’t afford to pay her because the money was that much. So I said I need somebody else that ... I could pay a little bit cheaper, so I found a younger person. And I said to my daughters, pick her up so I don’t have to have her there all afternoon. And that’s what I did, and then that didn’t work; and so I had to find a teenager because they’re cheaper. Well, it turned out that the teenager’s father was watching my daughter for me but I used to pay his daughter anyway. He would say, she don’t watch her, you know. She don’t. I have to do it. And I was, like, thank God somebody’s doing it, because I would go crazy.”

Jocelyn’s sense of humour helped her to deal with the constraints of childcare:

“Some teenagers will say no, they want more. Like my son, I said I have to go to work, I said to him you’re getting $20 and that’s it, whether you like it or not. And you’re going to make sure you take care of my baby, because if I come home and one thing is wrong with her, you’re both going. And he’s, where am I going? The Children’s Aid (laughs) so that’s the best place for you both (laughs).”

Like most of the research participants, Marriba decided that she and her husband would have to look after her child full-time because the cost of childcare was prohibitive:
“I try to do work in the morning time, and my husband he’s doing job in the night-time, because when he come back and she’s home, he look after her because I can’t afford babysitters, and I don’t have money. So we look after her.”

It’s Too Much of a Hassle to Put Them into Daycare

“They still haven’t gotten back to me. They said I should write a letter appealing that I be moved to the top of the priority list. I said, you know what, I have enough stress of my own.” (Maxine)

“To be honest with you, it’s just, it’s too much of a hassle to put them into daycare again. And especially around here, I don’t know of any place that actually takes subsidy. Like, there’s a daycare across the street but they don’t take subsidy.” (Courtney)

Enrolling children into a daycare was described by the participants as a hassle in two respects: first, the process of applying for a fee subsidy and locating a daycare centre; and second, for mothers with more than one child, the day-to-day burden of bringing children to the centre and picking them up in time. Maxine and Courtney describe the process of applying for a subsidy:

“You have to be in school, working or your children must be special needs, which is what my children qualify for. ... I applied since last year September, and the daycare called me and said they had space. ... So I called them, and she said it doesn’t mean that I’m on the top of the list for the daycare, but I’m not on the top of the list for [the subsidy]. Why would, if there’s all the people at the top of the list, why is the daycare bothering me? Call the people that’s on top of the list.” (Maxine)

“You have to make an appointment, and you’ve got to go down and bring all these papers to make sure you’ve even eligible for subsidy; and then even sometimes you’re still eligible for it, but they only pay for half and you have to pay
for the rest, and you don’t always have the money to even pay for that. And then ... if you make changes you have to take a day off of work to go and bring them the papers because you can’t fax it to them, you’ve got to bring it to them. So I don’t even bother any more. I figure I might as well keep them home and when they get old enough where they’re all of them are at school all day, then I’ll go back to work. But the only thing I don’t like about that is now I’m sitting on welfare.” (Courtney)

As described earlier, even when appropriate childcare was available, most of the participants were keenly aware of the trade-offs. Courtney described what it was like when she had her young sons in daycare:

“It gave me and my kids the space that we needed from each other but it was still, it was like more work, because I’d be at home, like, I’d have to get up even earlier because I’d have to get them ready to take them to daycare early, then go to work, you know, and if I was late with taking them to school, I was late to work. You know, and then if I was late coming home from work, I was late picking them up; and then I’d go to work and deal with work all day, come home, pick them up and go home and start work all over again, just a different kind.”

Courtney talked about being too exhausted after work to maintain a consistent schedule for her sons:

“So it was kind of harder. I was just more tired and I was more slack. I didn’t have [scheduled] time — this time is this, and this time is this. I was just so tired [that I would say] okay fine, we’ll do this now, we’ll do this later. ... I was just more exhausted then because there was all this running around and being at work. And then you’d come home and it’s like, oh, my day still hasn’t ended. ... When you’re working, then you really come to appreciate being a parent more. Because you only have like from 6 till 8 when they go to bed to spend with your kids as compared to being with them all day. [But being with them all day] it’s like, oh you’re driving me nuts, go to school or something, you know?”
They’re Not Like the Normal Kids

“So I just said forget about anyone else for childcare. The only one who can really deal with all three of my kids together is my mom.” (Sandra)

“They fight a lot, too. And they fight, and they fight, and they fight.” (Maxine)

Caring for children with special needs adds an additional layer to the constraints on low-income mothers. The participants who had children with special needs were faced with significant limitations to their childcare options. Sandra and Maxine each had preschool-age twins who were born premature and had numerous ongoing health problems. Maxine described her experience with taking her sons to a community program:

“It’s kind of stressful sometimes when I take them out, especially by myself. ... They start playing and then before you know it, they’re taking the chairs, stand up on the chairs, trying to open the cupboards, moving tables, and I have to go this way and that way ... and you can’t count on other people to help you. ... If they see you busy with one, they won’t be like let me play with one for her. People are not like that.”

Due to the level of care that Maxine’s children required, she was not comfortable leaving them in anyone else’s care. Maxine was also uncomfortable attending any programs, even those designed specifically for mothers and that offered childcare. Maxine’s sister occasionally helped with her twin sons, but Maxine said:

“Most times I take them along. I won’t go unless I take them along. ... They are very active, you know, so I get worried. ... They are very, very active. They’re not like the normal kids.”
Sandra also avoided non-parental childcare arrangements:

“I don’t really like to use daycare. ... Now for the visually-impaired one, she was in preschool for visually impaired children.”

**I Start to Work at 6 O’clock in the Morning**

“I start to work 6 o’clock to 2 o’clock and I need her in the morning for she goes with him to the bus stop.” (Camila)

The problem of incompatible work hours and school/childcare hours was raised by several mothers. Bahati wanted to find a job but could not see how she would be able to arrange childcare for her three sons:

“With the kids you have to make money, what I’m going to do? If I can get work at night but who’s going to watch them. ... If I get 8 to start the work, who’s going to drop them [to school at] 8:45? Who’s going to feed them? I can’t afford to pay the babysitting and because I have to give them one hour, two hours, to who I trust? If I go to downtown, I need one hour transportation so with the kids I have to leave 7 or 7:30. So because they are little ... I can’t leave them — while if they are older, they can walk but still, they are young — if something happen, you know, I don’t trust ... .”

Courtney, also a mother of three boys, described what it was like when she had a job:

“It was, it was kind of a hard time, to be honest with you. And then I was trying to find a job from 9 to 5 but it’s hard because my kids, they started daycare at 7 at the earliest and you had to pick them up by 6. But if I’m traveling to go to work, I drop them off at 7, I have time to get to work. But if I get off work at 5 and I have to be at the daycare for 6, what if I work an hour away? That’s not enough time for me to pick them up. And if you’re late, it was a dollar every minute after 6. And then if you weren’t there by 7, they were calling the police and Children’s Aid, and it was $2 every minute after 7. So it’s like, you’ve still got to worry
about working, so it was hard to find a job that gave me the right hours and that was so close to home.”

Bahati used to volunteer on Fridays and bring her children to a parent-relief program provided at a community agency. However, when the children reached the age of seven, they were too old for the program. Professional activity (PA) days at schools were also problematic for low-income mothers, as described by Bahati:

“Sometimes now I’m working every Friday, with the cooking program. Last time now they had PA day, they don’t have school. ... It was hard for me because I like to work here. Who is going to watch them — the kids at home.”

_There’s No Way I’m Sending My Kid There_

As mentioned earlier, all of the participants were concerned about their children’s safety. Mothers were careful about selecting a childcare setting where they felt comfortable bringing their children, and where their children would be safe and looked after attentively. When Sara was looking for a childcare centre, she made unannounced visits:

“I did a surprise visit. It’s around the area, so I wanted to go walk in and they didn’t know I was coming, and ... I seen the kid eating off the floor and I’m like, hey, you’re not supposed to be doing that ... and the one little boy went on the table and the kids were out of control. And I was, like, there’s no way I’m sending my kid here.”

Courtney also wanted to be sure that she was comfortable with the daycare centre:

“[My son] never spent the night away from me. He wasn’t away from me for longer than an hour until he was about three. So for him to leave me for the whole day was a big thing for him. So for the first couple of days I would stay
with him and that’s how I would get to know the women that were working the program and well the head supervisor. And seeing that they were very nice women, they all had children of their own. And there was even a volunteer that used to come in and she was around my age at the time so we kind of became friends. We even lived in the same building and then every time my kids would see her, it was like, oh she goes to my daycare (laughs). So and it was a first name basis with the women who worked at the daycare. They’d say hi and I’d say hi and we’d talk, so I just I pretty much grew a relationship with them.”

Magdalena discovered a big difference between two childcare centres her daughter attended:

“You can see the difference ... the people ... and the kids. My child ... before she became so rude the way she speaks, the expressions. ... I can see the difference so much ... and I don’t want this for my child.”

Maxine was trying to arrange for a fee subsidy so that she could send her twin boys to daycare; however, she was hesitant because she expected that they would become ill more often, and they already had numerous health issues:

“They claim there are more germs in the daycare. ... But one of [my sons] falls sick a lot and then I hear all the stories, like, even in daycare they get sick a lot because lots of kids have running noses and stuff like that. That’s my only fear that, you know, he’d come home sick a lot because of that. But other than that, I would love to get them in daycare.”

They Learn to be Around Other Kids

“You can’t always be around your kids and they have to be a little bit more independent too.” (Sara)

Although the research participants were extremely cautious about whom they would trust to care for their children — and many preferred to have their young
children solely in their own care — the mothers also spoke about the importance of their children’s social development. The mothers considered it an extremely important step in their children’s preschool development to give them an opportunity to socialize with other children and adults. These experiences would allow their children to learn skills that would prepare them for school and independence. The mothers who enrolled their children in a daycare centre considered this developmental aspect to be one of the benefits. Sara described the benefits of children attending a daycare or a preschool program:

“To me that’s important because then it helps out the parent and it also helps out the child, because then they’re both not isolated. And I think that helps out the child a lot more, too, because they learn to be around other kids, they know what to expect. Whereas if it’s just you and your child, they get scared, too, they’re isolated.” (Sara)

Ayana also preferred a daycare centre, where there were many other children, to a home-based setting with fewer children. She felt that her daughter was happier and the larger centre was better for her social development. Camila, a recent immigrant, wanted her son to be with other children so that he could improve his English language skills. In the case of mothers who were at home full-time with their preschool-age children, community programs that they could attend with their children were indispensable.
My Child is Responsible... But She is Still a Child

As children get older, mothers’ concerns about their childcare arrangements continue to play a significant role. Before- and/or after-school programs vary, with some providing care until a child reaches age 10 and others until age 12. Low-income mothers who live in communities with high rates of violence and criminal activity worry about their children’s safety walking to and from school and being at home alone.

Magdalena expressed her concern about what type of childcare arrangements she would be able to get when her daughter becomes too old for the school's before-and/or after-school program:

“My concern [is that] the daycare take the child up to the age 10. What is going to happen — they no provide service after because they can walk by themselves up to 12 from the home to school. ... In my case, it’s very hard. ... I no got family here who can pick her up. I no got friend close to my new place ... I’m a single parent. I can’t pay a person who pick her up because it’s going to be at least a hundred a week. They charge at least $10 a day. ... I know my child is very mature ... and she is responsible. But still she’s a child.”

A related concern for mothers of older children is the desire to allow them to participate in safe and healthy activities outside of the school day. The cost of these programs is prohibitive for low-income mothers. Bahati described her situation:

“They send too many flyers now from the school for everything — soccer ... basketball, football — very nice activities, but you have to pay for one child $170 and $150. I have three kids. ... Even $50 for me for one person it’s expensive. ... He was very interested to go soccer last year, but I didn’t take him because the money’s too much.”
Many of the research participants believed that they were the best caregivers of preschool-age children. They felt that no one else would love their children to the extent that they do, and that other caregivers would lack the affection, patience, and interest when caring for their child. Daiyu, whose son spent his first several years being raised by his grandparents, believed that the mother is the best caregiver of a young child but expressed some concerns about childcare when she returns to work:

“I just feel like the parent, the mother, is the best caregiver for the kids when they were young. ... I determine to go back to work next year when she is three years old at least. If it's possible, I prefer to take care of her until she’s five — but it’s not realistic for me because we are new immigrants so we have to further our career. If I have to go back to my professional work, I have to find a program or some people to some extent replace my role. ... [I] love her, play with her, take care of her — I have to say it’s a higher standard than the normal daycare program.”

Some women expressed a sense of the personal reward that they received by being the primary caregivers of their young children. Daiyu described it this way:

“It's really amazing when you watch the children growing up. ... We, as parents, as we’re teaching them we’re also learning, too, from them. We’re also personally developing.”

Being at home full-time, however, can result in a feeling of isolation and this was described by several participants. Sara stayed at home with her daughter for one year but found it to be isolating:

“There’s nothing wrong, if that’s your choice, to stay at home for five or six years to take care of your kid; but at that
time I felt so isolated. I have to be around people too. That’s not healthy — to stay at home with your kid.”

Noorzia was the sole caregiver of her children: not even her husband watched the children alone without Noorzia present. She wanted to be at home with the baby for about one year but then hoped to put the child into daycare. Noorzia felt that both she and her child would benefit from this arrangement because being at home was boring for her with no one to talk to and a daycare setting would be beneficial for her child’s social development.

7.3 Family, Friends and Community

Extended family members, friends and community services are a vital source of support for mothers. Several of the participants talked about the help they received from family members:

“So I just said forget about anyone else for childcare. The only one who can really deal with all three of my kids together is my mom.” (Sandra)

“It’s the grandma … if we needed to go do stuff or needed a babysitter, usually she would offer; or my sister would offer as well. So we had either one.” (Sara)

Sathi wanted to move to a more desirable area of the city but she was concerned about who would watch her son. Instead, she was looking for a house in a less desirable area but one that was in her mother’s and sister’s neighbourhood.

Other women received some support from friends or from the community:
“If I am not at home, one of my friends and her daughter looks after my daughter. ... Mostly our community — they are the same religion, they look after us and the kids. If she is alone, sometimes they look after her.” (Marriba)

Many participants, however, had no family or friends that they could call on for support and thus faced additional constraints. For mothers like Marian, community services were indispensable:

“I have no friends — no one has ever asked me [to watch their children].”

Childcare-related community services included both full-day programs at daycare centres, as well as parent-child programs at community centres or local agencies. Both of these types of programs were in short supply in the research community, but their importance cannot be overemphasized. There was also a severe shortage of respite childcare programs for mothers who were full-time caregivers. Eshe wished she could bring her six-month-old baby to a childcare drop-in program on occasion. She said she would find this helpful in two respects: as respite so that she could carry out some tasks such as appointments or grocery shopping without always taking her baby along, and as an opportunity for her son to learn to become somewhat independent from her. Maxine attended an evening training program, which she was able to attend only because it offered on-site childcare. Tazmeen also spoke about the significant role that community programs played in her life while she was on maternity leave:

“I’m always looking for the programs where I can take my son, so I already know — Monday, Tuesday and Thursday. And the timings are afternoon so we just take the bus. I take
my daughter and my son, and we do different activities there. I read books to him and do different kind of stuff, whatever they offer in the programs. And then on Wednesday I take him to the library. ... After he started going there, I saw such a big change so I never wanted to miss that program anymore.”

In terms of policies and programs, the research participants indicated that it was essential to have a mix of income support as well as community services. Tazmeen highlighted the value of these types of support:

“I think they both are different. Of course, money — you always need it so of course I know everybody likes that. But I feel that those programs — like moms — I always tell them to go to the programs. I have to take my son. I want him to learn. I want him to learn manners. I want him to get ready for school, so I love those programs too.”

7.4 The Implications of Childcare Policy on Mothers’ Experiences

“It was the only choice I had at that time.” (Magdalena)

“I don’t have a choice, I have to go to work.” (Courtney)

“I don’t think I have much of a choice really.” (Maxine)

One of the aims of this research is to understand how the political, economic, and social environments shape the childcare ‘choices’ of low-income women. The issue of choice among childcare arrangements as well as what women perceive as quality childcare were key themes for analysis in this study.

A premise of my study was that choice regarding childcare preferences is part of a discourse that applies only to women who are already privileged. The assumption was that choice does not really exist for women in low-income communities because
family income determines the range of available childcare options. Previous research has shown that the particular childcare arrangement selected by parents is based on such socio-demographic factors as family income, family structure, and ethnicity (NICHD, 2004).

Quality is a complex variable to measure. The National Longitudinal Survey on Children and Youth (NLSCY), one of the most comprehensive longitudinal surveys collecting data on Canadian children, provides data on a range of childcare arrangements. It does not, however, provide a distinction based on quality of care. Incorporating the concept of quality into a survey such as the NLSCY is difficult for a number of reasons. Since the respondents are overwhelmingly parents, certain issues may arise in their responses to questions addressing childcare quality. They are likely to overstate good quality for two reasons: First, childcare is a costly issue, both emotionally and financially, and they want to believe that their children are in high-quality care; and second, they may not have an accurate impression of the care being provided and are making their best (and desired) guess.

From the perspective of mothers, the concept of ‘quality’ in childcare goes far beyond profit versus non-profit childcare centres. It relates to who they feel is best suited to provide the care and in what setting. It depends on the age and developmental stage of the child. For mothers of babies, it often boils down to the simple belief that no one else can love the child the way the mother loves the child and, therefore, quality care means care by the mother.
The concept of quality is multi-faceted yet is intertwined with the notion of choice. If a high-quality childcare arrangement is available, a mother may feel that she has a choice among various arrangements. If, however, the only available childcare is of low quality, the mother may feel that she has a lack of choice. The choices mothers make with respect to their childcare arrangements relate to, first, whether or not they will care for their children on a full-time basis and, second, what childcare arrangement will they make if they engage in the labour market.

Numerous factors affect mothers’ decisions to either care for their children on a full-time basis and postpone employment, or get a job and arrange for childcare. It is often a matter of one decision outweighing another. The factors that influence mothers’ choices regarding their childcare arrangements include the level of employment income, the type and location of job, the hours of work, and the availability of childcare. Other aspects that have a bearing on women’s decisions are the ages and developmental stages of their children, and whether their children have specific needs. These are balanced against the developmental needs of both the child and the mother.

When I asked the research participants if thought they had a choice in their childcare arrangement, the responses were mixed. Some mothers believed that they had a choice while others felt they had no options. This was rather unexpected as I had anticipated that most of the women would state that they had no choice in their current childcare arrangement. As in the general population, some of the participants expressed a preference to be in the labour market rather than being full-time.
caregivers, while others preferred to be at home on a full-time basis with their children. Some of the participants preferred to attend an adult school program and send their children to daycare; others tried to find affordable daycare but were unsuccessful. One participant, Marian, responded that she had no choice in her childcare arrangement because, as the mother, she was the best caregiver for her children. Marian would not even entertain the option of having another caregiver watch over her children and believed strongly that mothers, and possibly fathers, should be full-time caregivers of their young children. Tazmeen, who was on maternity leave with her second child at the time of the interview, also believed that parents should be the primary caregivers of young children but felt that she did have a choice in the matter:

“Well, we could have dropped him at daycare but we were, like, no, this is our child, we should just watch him on our own.”

Tazmeen and her husband had a tag-team arrangement in which they organized their work schedules so that one of them was always at home with their son:

“When I used to work — I had a job before — but it was, like, every time I go, my husband come home and he watch him. And then when he went to work in the morning, I was home with him.”

She intended to make the same arrangement for her baby daughter at the end of her maternity leave. Amisi’s view was that she, too, had a choice regarding her son’s childcare arrangement. She enrolled him into an after-school program while she attended adult day school. She believed that this arrangement benefited both of them: He was kept occupied with activities, and she was able to attend school.
In contrast, Camila’s sense was that she did not have a choice with respect to placing her son into a daycare. She was enrolled in a training program that would help her to get a job and withdraw from social assistance. Similarly, Magdalena believed that she did not have a choice regarding putting her daughter into daycare or staying at home with her full-time. Magdalena needed to learn to speak English, and so she put her daughter into daycare at 10 months of age. She did not receive a daycare fee subsidy at the time because her she and her husband had not yet separated, and he had an income. Magdalena explained:

“It was the only choice I had at that time — to learn English...because without English, it’s no function. ... I don’t want to be like, in the future, my child is going to be the translator for me for everything ... I have to read on my own. I decide to come to this country. It’s a wonderful country. ... If the only way I can learn at least basic English to be independent, no to ask friends, to no ask my child to do this ... to function in the system. You must function by yourself.”

Magdalena preferred the daycare centre to being at home as a full-time caregiver:

“[At] daycare she’s happy. She played with other kids. With myself, she’s going to be isolated at home, no play with no one and no interact with other kids.”

Like Camila and Magdalena, Sathi did not feel she had the option to be the full-time caregiver of her son. She had separated from her husband:

“It’s hard, in my separation situation. Staying at home, it wouldn’t be possible. ... I really didn’t like to put [my son] in the daycare at all ... but it was okay. It was good training to put him. He was learning English and he was learning. ... I wanted to have a permanent full-time or part-time job. ... I needed a job.”
Sathi put her son into daycare when he was 20 months following a two-month stay at a shelter. Her son would spend the weekends with his aunt and grandmother while she worked the weekend shifts. Sathi also had friends in her apartment building who helped to watch her son.

Similarly, Ayana did not feel that a choice was available to her and knew she would have to get a job so that their family income would be sufficient. Ayana believed that the ideal situation was for a mother to remain at home full-time with her children. If money were not an issue, she would prefer to stay at home until the children were in their teens. Ayana was of the opinion that, even when the children were older, it was important for her to be available when they return from school so that she can help them with homework and monitor their activities and their involvement with friends.

Jocelyn, who had adult daughters as well as school-age children, believed that more choices were available to her with her first set of children than were available now:

“Then you could choose but not now. You don’t know who is who because people pretend to be all nice and then when you leave your kids, they go all crazy on your kids. So you don’t know who to trust.”

Sara was in high school when she gave birth to her daughter. Although she stayed at home for the first year, it was important for Sara to return to school as soon as possible:

“I didn’t second guess that. ... I have to go back to school. ...I did whatever I had to do to get to where I needed to go ...
because her dad was in school and we were like young, so he went to school. And then I said, okay I’ll stay home. … For one year, I’m going to stay home and watch her.”

Courtney, also a teen mother, talked about choice in two areas. She stated that, on the one hand, she had no choice regarding whether to go to work; however, because she was on social assistance, the money she would earn would be deducted from her welfare cheque:

“To be honest with you, with the help that I get from child tax and welfare it’s, it’s really not enough to live on. So to go to work now — I have a three-month-old son — it’s hard. I want to stop breastfeeding so I can go to work … it’s financial help. I don’t have a choice, I have to go to work. And then if you go to work, you’re still not making enough because welfare’s taking whatever you make off of your cheque. So it’s not like I’m getting extra money. I’m not working to make extra money. I’m working to make the same amount that they give me. And they take baby bonus off your cheque, which I really don’t think that they should.”

Courtney did feel, on the other hand, that there were options with respect to the daycare she selected:

“I did have a choice and one of the main reasons why I did pick it was because it was close to my house. And where I was living, it was literally a five-minute walk away from my house and they also took my boys to school. So I went in and got to know the women that were running that program … seen how they interact with my kids [and how] my kids interact with them and it was fine. So I decided, okay, I’ll put them into daycare. So they were in daycare for about a year.”
7.5 Child Benefits are Essential

For low-income women, certain childcare policies are essential while others are entirely irrelevant. The most important, by far, is the Child Tax Benefit (CTB). All of the research participants depended on the CTB for a significant portion of their monthly income. The Universal Childcare Allowance was also important, but to a lesser extent, due to the small amount of assistance it provided and the restrictions around eligibility. Only 10 of the 20 participants were eligible for the UCCB, each receiving $100 per month.

Although the CTB was essential, one issue that was raised relates to the ‘clawback’ of the benefit from women receiving social assistance. Courtney described the problem:

“When you’re a single parent nowadays you’re in a lose-lose situation, because if you’re on assistance, it’s a hassle. And then like I said, they deduct money from you that they really shouldn’t be but they deduct it.”

7.6 Fee Subsidies and Maternity Leave Benefits Offer Limited Assistance

For those who are eligible, the daycare fee subsidy is vital. Magdalena talked about how important the subsidy was for her because she would not have been able to afford the daycare centre otherwise even with her wages from full-time employment. Having her daughter in the centre gave Magdalena the reassurance that her child was being well cared for:
“This is a very good system for me ... because you can work. If I don’t got the daycare, I couldn’t ... I can leave my child safe, and know it’s under the program and they supervise it ... [at] the daycare, a person from the government check every single spot, like carpets, kitchen, everything. I say my child is safe. I'm so glad Canada has this kind of service”.

Sara was able to get a subsidy but she had to do some of the legwork:

“I ended up getting the subsidy because I really did my research and then I got it. So we were on a huge waiting list but then for me to get it bumped up, so I ended up checking out the daycares to see who was available and they had a spot. So they ended up picking me because I already found a spot instead of them looking for me, then I got it right away.”

Other women expressed concerns with the design of the daycare fee subsidy program. First, the subsidy can only be used in the licensed childcare sector and not for informal childcare arrangements. As Jocelyn noted: “You can’t get a subsidy to use a babysitter.”

Second, not all licensed centres accept subsidies, and the task of finding a centre is onerous. Courtney described her experience:

“I used to ask them where they were located, what their hours were because some daycares open sooner than other daycares, if they have spots in the daycare for the age that they were, if they took subsidy, and if they walk them back and forth to the school ... and I must have called at least eight different places before I actually found the one.”

Courtney explained some of the other limitations of the fee subsidy program:

“You have to find the daycare around you. You have to make sure there’s spots. If not, you have to be put on the waiting list. I went through I don’t even know how many
daycares before I actually found like the one that was right beside my place. And not all daycares take your kids to school for you. So it was really hard, because I’m trying to work and if I could find a job ... but I’ve got to wait until I can find daycare, and then if I find daycare, then I’ve got to get a job because you have three months that you have while your kids are in daycare before you can find a job. If not, your subsidy’s cut off and not everybody — as weird as it seems — not everybody can find a job in three months.”

Some women were encouraged to apply for a subsidy so that they could enroll their children into a licensed daycare facility. This was often the case for women who received early childhood intervention services and their children were identified as having special needs. Maxine, the young mother of preschool-aged twin boys, related that her early childhood intervention worker would “come to the house every two weeks ... and they recommended that [the boys] should be in daycare because of their activeness, so that’s why she said she’s going to write the letter to them.” While the benefits of putting children with special needs into a licensed daycare are supported by research (Cleveland & Krashinsky, 2001), the capacity of the sector to accommodate children with special needs is limited due to funding shortages.

Maternity leave is marginally helpful to low-income women — only one out of 20 research participants was eligible for maternity benefits under Canada’s Employment Insurance program. The vast majority of these low-income mothers were not eligible.
7.7 Providing No Support: Tax Deductions, Live-in Caregivers, Preschools

Two programs that were irrelevant and not used by any of the women were the Childcare Expense Deduction and the Live-in Caregiver Program. The interviewees never mentioned these programs.

As indicated in Chapter 2, kindergarten and preschools are not captured in the definition of childcare policy for the purpose of this research. Two points regarding these programs are, however, worth noting. One relates to preschools and the other to the province's plans in implement full-day kindergarten. Preschools, which are regulated in Ontario by the Day Nurseries Act and are considered part of the broader early childhood education and care policy, were not used by any of the low-income women in this research. Preschools are widely used by higher-income women who can afford the fees. While low-income women did appreciate kindergarten, they stressed that half-day kindergarten often did not even provide enough time to go to an appointment, not to mention allowing women to participate in employment or school. For some mothers, it allowed a two-hour respite, although many women had younger children that they cared for during the time their older child was in kindergarten. Despite its limitations, they said kindergarten did provide socialization and educational opportunities for the children.

The research participants expressed mixed feelings about full-day kindergarten: while it would provide them with more time to work or to go to school, it would still not
cover a full work day including transportation time. In terms of their own children, women expressed a concern that children as young as four would be too young to attend a full-day school five days a week.

7.8 Community Supports and Services

“This Christmas my worker got my kids some boots because financially I was in a hardship.” (Sandra)

“Early Years, they offer lots of programs too, but I’m still looking for one close to my house. I couldn’t find it.” (Tazmeen)

Support services in the community, despite being few and far between, were extremely valuable resources for the participants. All of the mothers who had preschool-age children attended community programs on a regular basis. They would participate in parent-child drop-in programs or attend parenting classes several times each week. The library was an essential resource, with mothers using library services several times each week.

Most of the programs that were previously housed in family-resource centres were converted to Ontario Early Years Centres (OEYC) in the early 2000s.

“To me that’s important. ... It helps out the parent and it also helps out the child because then they’re both not isolated. I think that helps out the child a lot more because then they learn to be around other kids, ... whereas if it’s just you and your child, they get scared. They’re isolated.” (Sara)

Marian attended the local OEYC:
“It teaches you how to be a better parent. Like, some parents, like, what we learn, like, when the kid is crying we attend to them, because the teacher will say that they cry for a different reason. But my in-laws say, like, when they cry I should just leave them, so.”

Maxine, a mother of twin boys, talks about how she enjoyed going to the OEYC, but when a staff member was replaced by a new staff person, Maxine stopped going:

“It was okay because that one person that we didn’t, it’s like, it’s a place where kids come and play you know. At the end, you know, if your kids mess the area, you’re supposed to clean it. And then this one particular person the minute she sees her child go in there, Maxine clean up — I say, you know what, I have enough stress of my own already.”

Maxine continued:

“We’re going to start staying home. She does that to everybody and, like, a lot of people started staying away because of that. ... It’s a good centre, you know, and there was this one — when we started going there, there was this one person there and she was so good with the kids and everybody. She made you felt like — you felt obligated to go every time they had this program. ... And then we stopped going there so much”

7.9 A Statistical Profile

The purpose of this section is to illustrate how families from different income levels in Ontario benefit from the three federal programs that are part of childcare policy. The three programs are maternity/parental leave, the Child Tax Benefit, and the
Child Care Expense Deduction. The figures are based on 2009 estimates using Statistics Canada’s Social Policy Simulation Database and Model (SPSD/M). The SPSD/M is a Statistics Canada tool designed to analyze the financial interactions of governments and individuals in Canada.

Families with Children

In 2009, there were approximately 1.5 million families with children under 18 years in Ontario. More than 20% of the families had incomes of $40,000 or less. The average family size of the study participants was 3.8. For a family of four living in a large city, the 2008 LICO (before-tax) was $41,198.

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10 This analysis is based on Statistics Canada’s Social Policy Simulation Database and Model. The assumptions and calculations underlying the simulation results were prepared by Judy Cerny and Andrew Mitchell and the responsibility for the use and interpretation of these data is entirely that of the authors. The SPSD/M is a statistically representative database of individuals in their family contexts, with enough information on each individual to compute taxes paid to and cash transfers received from government. The database was constructed by combining individual administrative data from personal income tax returns and unemployment insurance claimant histories with survey data on family incomes and on expenditure patterns. As the name implies, SPSD/M consists of two parts: a database (SPSD) and a model (SPSM). The current version of the SPSD/M can be used to examine the effects of changes to federal and provincial tax and benefit programs on families and governments from 1991 through 2012. It is based on micro data from 2003.
Figure 4: Number of Families by Income Level, Ontario, 2009

Source: Based on Statistics Canada's Social Policy Simulation Database and Model, 2009

Figure 5: Proportion of Families by Income Groups, 2009

Source: Based on Statistics Canada's Social Policy Simulation Database and Model, 2009
**Maternity/Parental Leave**

The following chart illustrates the number of maternity and parental benefit claims made by mothers from different family income groups. Half of all claims (50.9%) made by women were from those who lived in families with annual incomes of over $80,000. Women with family incomes of less than $40,000 made only 13.3% of the claims. Of the 20 low-income mothers in this study, only one was eligible for maternity leave benefits.

![Figure 6: Maternity and Parental Leave (Female), 2009](image)

**Source:** Based on Statistics Canada's Social Policy Simulation Database and Model, 2009

**Child Tax Benefit**

The Child Tax Benefit consists of a base benefit and a low-income supplement. The following charts illustrate the distribution of total federal benefits (base and supplement) to families of different income levels. Most of the 20 women in this study received the Child Tax Benefit (both base and supplement).
Figure 7: Child Tax Benefit (Base), Ontario, 2009

Source: Based on Statistics Canada's Social Policy Simulation Database and Model, 2009

Figure 8: Child Tax Benefit (Supplement), Ontario, 2009

Source: Based on Statistics Canada's Social Policy Simulation Database and Model, 2009
**Child Care Expense Deduction (CCED)**

The CCED is beneficial to upper income mothers. Nearly 75% of all CCED claims in Ontario are made by mothers who live in families with incomes of $60,000 or higher, and almost half (48%) of these have incomes higher than $90,000.

**Figure 9: Child Care Expense Deduction (Female), Ontario, 2009**

*Source:* Based on Statistics Canada's Social Policy Simulation Database and Model, 2009
Chapters 5, 6 and 7 presented the findings from the interviews with 20 low-income mothers. This qualitative data, together with the statistical profile presented in section 7.9, paints a portrait of a childcare policy that fails to adequately support low-income mothers. A new policy is envisioned in the following chapter.
Chapter 8: Envisioning Policy Based on Shared Caring

“Apparently you’re not at work when you’re in labour.”
(Anonymous)

One of the policy issues addressed in this thesis lies in the unresolved debate around the best way to assist mothers through childcare policy. This debate takes place in the context of a wider matter — that being the way caregiving is viewed and addressed through public policy. This essential caregiving work, however, has failed to be adequately incorporated into Canada’s economic model and public policies, resulting in a weak childcare policy and the neglect of low-income mothers and their children.

The data presented in this dissertation indicate that childcare policy inadequately supports low-income urban mothers in Ontario, Canada. One way to contribute to the development of responsive and supportive childcare policy is by deepening our understanding of the complexities of low-income mothers’ provisioning — the daily work of securing resources and providing the necessities of life for their children, the multiple demands of their caregiving, and the barriers among which mothers perform all of this work.

This final chapter outlines the key research findings and proposes policy changes. In the popular children’s song, the bucket cannot be fixed because it is caught in an infinite loop. In the end, water is needed to fix the leaky bucket — which cannot carry water because of the holes — which cannot be fixed without water. Similarly, while childcare policy can be patched in the short term by fixing some of the holes, a
long term solution calls for a new way of understanding and supporting women’s provisioning. The bucket needs to be replaced.

8.1 Key Findings

“It was not my dream — this life — but what am I going to do?” (Bahati)

The low-income mothers described in this study perform a wide range of provisioning work to sustain their lives and those of their children. They do this work among considerable barriers, many which are beyond their control. Provisioning work goes well beyond the realms of domestic tasks and paid employment. The typical paid-unpaid work dichotomy fails to illustrate the complexities of this work.

Provisioning includes caregiving labour, of which there are three distinct categories: physical, mental and emotional. The physical tasks of caring for children, especially babies and those of preschool-age, are endless and exhausting. For low-income mothers, daily tasks are hampered by a layer of constraints. For example, grocery shopping without a car means that women have to carefully plan how many items they can fit in the base of their stroller or in their shopping buggy, and then maneuver on and off the bus. Mental tasks such as budgeting, scheduling, and seeking out community resources are also part of provisioning. Further, mothers devote a considerable part of each day providing their preschool-age children with socially and cognitively enriching experiences, and helping their school-age children with their homework. In addition to physical and mental activities, provisioning in the domestic
sphere includes emotional work. For example, low-income mothers worry about their children’s development, health and safety. They devote considerable emotional energy to disciplining their children, placing limits on television and video games, and having to say no to items that their children would like to buy. Among the positive emotions, mothers also take great pleasure in seeing how their children grow and learn, they take pride in their children’s achievements, and they draw on their sense of humour to carry them through life.

Like caregiving work, the provisioning activity of engaging in the labour market is more nuanced than either having a job or going to school. The types of jobs available to low-income women are frequently casual, part-time, or low-wage work. Some women have the opportunity to get paid work through community projects; however, these initiatives are normally contingent on project funding and are time-limited in nature. Low-income mothers are often channeled to become personal support workers in the social and health services sector. These jobs are offered on a casual or part-time basis and involve shift work, making childcare arrangements all that much complicated. Many low-income women try to upgrade their education by enrolling in training programs or completing a high school equivalency in the case of foreign-educated women. For women who have a foreign post-secondary education, the requirement to complete a high school education can be discouraging and demeaning.

Volunteering in the community is another aspect of women’s provisioning. For low-income mothers, this can range from helping out in community programs to
‘looking after’ or mentoring youth in their community. Mothers on welfare often
volunteer in the community. Some do this volunteering as part of their social assistance
requirements; others because they enjoy the opportunity to socialize and to develop
their skills. In addition to work in the community, the labour market and the domestic
spheres, women’s provisioning also includes many seldom examined tasks related to
sustaining health, ensuring safety and making claims. These are areas of women’s work
that are key tasks yet we are just beginning to understand their scope.

Sustaining their own health and that of their children is difficult for mothers to
carry out due to lack of money, transportation, and health benefits. This means that
their diet is inadequate, and they sometimes go without dental or vision care. Mothers
living in situations like those characterizing the environments of these participants are
diligent at trying to ensure their own and their children’s safety. When children are
very young, mothers avoid placing their children in anyone else’s care and they are
selective with regards to whom they engage in a childcare arrangement. In some
neighbourhoods, mothers of older children and teens try to protect their children from
being given illicit drugs or becoming victims of crime or gun shootings.

A significant aspect of women’s work involves making claims and, for low-
income women in particular, this provisioning task is crucial to their survival — and yet
can be exhausting. As discussed in Chapter 5, the low-income mothers in this study
were faced with making a variety of claims on a regular basis and had to deal with
multiple government offices. Making claims involves advocating for any number of
benefits, such as social assistance, child support payments, legal aid, as well as public housing, daycare fee subsidies, and programs for their children who have special needs or developmental disabilities. The impact of social assistance on single mothers has been well-documented in the literature; however, it is only one of a number of programs used by low-income mothers. Single mothers on social assistance have a particularly difficult task in managing the various and at times contradictory guidelines of multiple government programs from which they receive support. As mentioned earlier, this is one aspect of women’s provisioning that we are only starting to understand. In their study looking at the work demands of single mothers managing multiple state-provided benefits, Cumming & Cooke (2008) note that “there has been little attention paid to how these programs interact to form a web of rules and obligations for recipients” (Cumming & Cooke, 2008:75).

Low-income women living in urban settings provision for their children under relentless constraints and among numerous barriers. At the core these constraints are a continuous shortage of money and childcare issues. Whether their source of income was social assistance or employment earnings, the average income was lower than the rest of the city. In this study community, almost one quarter of the families depended on government transfers such as welfare (Statistics Canada, 2008). The welfare income for a lone parent with one child in 2006 was $15,534 and $20,155 for a couple with two children — an income that fell well below the Statistics Canada Low Income Cut-off (LICO) of $26,396 and $39,399 respectively for families living in large cities (NCW, 2008).
Women’s lives are further constrained by single parenthood and/or isolation resulting from having no family or friends to call on for support, as well as the need to deal with multiple social service organizations, and/or the necessity of caring for children with special needs or developmental disabilities. Many mothers are burdened with poor health or an inadequate diet. Racial barriers, limited English language skills and the struggles of adapting to a new country further impede women’s lives. In this research community, more than half the population was not born in Canada (Statistics Canada, 2008). Community organizers routinely struggle to develop and maintain services related to employment, poverty, and education issues, especially in a community where “racial minorities are falling farther behind in a number of socio-economic indicators. So their life chances are declining and many of them are despairing.” (Kalinowski, 2007).

The mothers in this study lived in a neighbourhood that was disadvantaged from the perspective of economic and community standards, placing considerable demands on the already limited social and community services. Compared to the rest of the city, the community depended to a greater extent on precarious and low-wage blue-collar occupations such as manufacturing. Poor employment opportunities, a lack of transportation, low quality housing, and a high level of violence/criminal activity in their neighbourhoods were factors that these low-income mothers had to deal with on a regular basis.
The greater the number of barriers and constraints facing women, the fewer options are available to them. The mothers in this study had limited choices and used a variety of strategies to counter these barriers — except that the strategies cost them in terms of time and health, as well as physical, mental and emotional energy. Engaging in risky activities, establishing boundaries of responsibility, and envisioning a future were strategies that low-income women used in their daily provisioning. However, most of their strategies related to creating and managing resources, such as:

- securing some income, however minimal (e.g. welfare, job, child support);
- making sacrifices in order to care for their young children (e.g. avoiding health and dental expenses for self; delaying mothers’ own opportunities for education; saving for children’s education but not for their own);
- seeking out community resources;
- improving their education;
- volunteering to learn skills, stay active, and reduce isolation;
- planning and undertaking extra activities (e.g. travel time using public transportation);
- going without luxuries (e.g. avoiding the hairdresser; not shopping for clothes for self);
- buying inexpensive food (i.e. avoiding meat);
- buying on sale;
- getting help from kith and kin (e.g. family, acquaintances, church); and
- keeping a positive attitude.
Limitations of the Research

The limitations of this research relate to the scope and the sample. While the research participants were all low-income women, the scope of the study was limited to urban women and did not accommodate those from rural or small-town communities. Also, because it was limited to low-income women, it also did not explore the childcare experience of middle- and upper-income women. However, the most significant limitation was that participation was self-selected and voluntary. As a result, only those women who had some sense of security, confidence, and motivation participated in the interviews. The research did not capture the experiences of women whose lives are so burdened that they would not speak to a researcher (e.g. due to limited English language skills, fear of implications, or psychological issues). Thus, the experiences portrayed in this thesis may well reflect those of women who are the strongest and have the most capacity to survive.

8.2 Patching the Holes

“With what shall I fix it, dear Liza, dear Liza,
With what shall I fix it, dear Liza, with what?”
(Traditional children’s song)

The research findings indicate that the women in this study received minimal levels of support through childcare policy, and programs need to be significantly enhanced in order to increase women’s capacity to provision for their children. The Child Tax Benefit and, to a lesser extent the Universal Child Care Benefit, are important sources of support for mothers’ provisioning. Most of the other programs, however,
provide inadequate assistance to these mothers. Childcare fee subsidies and maternity leave support provisioning to a limited degree. The Child Care Expense Deduction and the Live-in Caregiver Program were entirely irrelevant to the low-income mothers in this study. With the exception of one mother who qualified for maternity benefits, the maternity/parental leave program was unhelpful because the women did not meet the eligibility criteria.

A childcare (i.e. daycare) system of services is necessary yet equally important are income supports and community services. In the short term, policy changes such as increasing the number of subsidized childcare spaces (i.e. fee subsidies), enhancing maternity leave, and removing children from welfare through child tax benefit programs would support women’s provisioning. Maintaining the CCED is also an important albeit short-term policy.

Canada’s system of maternity/parental leave is relatively advanced compared to other Western countries. However, most mothers are not eligible for maternity benefits and a longer duration of leave (i.e. from the current 12 months to 18-24 months) would be more appropriate in terms of child development. Expanding the eligibility criteria to include women who have had fewer hours of paid employment and providing a longer duration of leave would provide parents with an income yet maintain their labour force attachment. The expansion of eligibility for and duration of benefits was among several recommendations of the Ministerial Advisory Committee on the Government of Canada’s Child Care Spaces Initiative (Canada, 2007).
The policy directions outlined above, while essential in supporting low-income mothers, are also short-term solutions. In order to meaningfully support women’s provisioning, a new way of thinking about work is needed. In other words, the bucket needs to be replaced — not just patched.

8.3 Replacing the Bucket: A Vision of Shared Caring

“The public policy issues surrounding childcare, early education and preschool are controversial; Canadians hold passionate, perhaps irreconcilably divergent, positions on what should be done.” (Cleveland et al., 2008:4).

Replacing the bucket with long-term approaches would entail a paradigm shift to a universal caregiver (Fraser, 1997), dual-earner/dual-caregiver (Meyers & Gornick, 2008), or ‘carefair’ society (Kershaw, 2005). This approach embraces a broad concept of work that includes not only employment and self-employment, but also training, voluntary work, and care for others. It means that an individual is a member of the labour force even if she or he does not currently have a job. It also implores governments to redesign public policy so that men and women are supported in allocating their time between employment and caregiving.

There is an entrenched connection between women and care work. It is carried out primarily by women and takes place in the household and, increasingly, in the community. The increased demand on women to perform care work in the community is a result of government cutbacks in funding for health and social programs. The deinstitutionalization of individuals who require care, such as the elderly and the
disabled, has had an impact on women’s caregiving obligations in the community. At the same time, the focus of childcare to provide improved early learning opportunities suggests an approach toward institutionalization of children for the purposes of education. This has brought to the surface opposing views on the role of the state in the lives of families with young children.

The pervasive nature of politics in relation to childcare policy is a central issue in Canada and abroad (Brennan, 1998; Michel, 1999; Rae, 2001; Randall, 2000). Childcare policy has been at the centre of a power struggle between opposing ideologies about childrearing and the role of the state. The elitist argument is made that people who can’t afford children shouldn’t have them and because children are largely viewed as a private responsibility, there is resistance to enhancing policies that would support low-income families. Further, since women who are members of visible minority and/or immigrant populations are disproportionately represented in the low-income population, the consequence is that childcare policy fails to support not only low-income mothers but also women of colour. This reflects the inequities of these programs in Canadian society.

The cost of a comprehensive policy is regarded as a barrier to policy development despite international comparisons demonstrating that Canada’s level of public spending is inadequate. The problems stemming from insufficient funding for health services, affordable housing, post-secondary education and childcare have sadly become part of daily Canadian discourse.
In addition to the cost, the issue of jurisdiction is generally considered to complicate the development of a coherent national childcare policy in Canada. These jurisdictional debates are reflected in discussions on how to achieve the necessary political will. Clearly, the provinces and territories need to be active partners with the federal government in developing a national childcare system. However, the federal government is already deeply involved in childcare policy and the public expect the national level of government to take leadership on the issue. The issue of jurisdiction is surmountable, as demonstrated by the ability of the country to resolve health funding through the Canada Health Act and the fact that the federal-provincial governments were able to reach agreements on a national childcare strategy in the mid-2000s.

A childcare policy framework should simultaneously support families, reduce gender inequities, and address family poverty. It must be based on the three principles outlined in Chapter 2: responsibility for children should be shared between parents and the state; responsibility for children should be shared between the parents; and, children must be seen as having a distinct claim on the state’s resources (Eichler, 1997; Freiler & Cerny, 1998; Kitchen, 1995).

### 8.4 Policy Implications: Reconciling Earning and Caring

“Women need policies that support their work-life balance, but these will discriminate against women unless the unpaid work that they do is factored into ‘work’ policies.” (Neysmith et al., 2009:103).
The vision of a society that recognizes the dual responsibilities of earning and caring, that promotes class and gender equity, and that supports the well-being of children has policy implications in the areas of taxation, community supports and services, and employment practices. This policy agenda involves all levels of government and requires both universal and targeted approaches. It calls for a mix of income supports and community services — a strategy that has been presented by others such as Jenson & Stroick (2000) who argue that the best policy mix for children includes adequate income, supportive communities, and effective parenting. With respect to the latter policy focus, Jenson & Stroick (2000) argue that effective parenting can be supported through a variety of approaches including employment-related measures (e.g., paid and unpaid parental leaves, flexible employment schedules), improved access to community services such as resource centres, and enhanced availability of developmental childcare and preschool for both employed and stay-at-home parents. The findings from this dissertation substantiate the need for such a policy mix.

What does this mean specifically for childcare policy? First, integrating the current patchwork of programs — maternity/parental leave, the CTB, the UCCB, the CCED — into a single child tax benefit and a caregiver’s allowance. Second, phasing out the subsidized fee system and replacing it with a childcare system based on the principles of quality, universality, accessibility, and development. An important component of this childcare system is that it would be established in community hubs that offer support for early and mid-childhood years, and would be available to all
children irrespective of their parents’ labour force attachment. Third, advancing changes in employers’ attitudes; and fourth, amending the immigration regulations governing the LCP. Improvements to housing policy and the transportation system are also extremely important, although recommendations in these areas are beyond the scope of this dissertation.

Some of the recommendations outlined in the following section are long-term goals. Two specific recommendations are highlighted that could be implemented in the more immediate future and that would support low-income women such as those described in this dissertation.

*From Research to Action: Two Policy Recommendations for Low-income Mothers*

The study findings point to the need for a mix of income programs and community supports to help low-income mothers in their provisioning. Two specific policy recommendations that are needed immediately to assist low-income mothers are increased child benefits and improved community childcare services and parenting supports.

*Child Benefits*

Child benefits help to reduce poverty and to provide recognition for the costs of raising children. The current convoluted federal child benefit system, consisting of three child benefit programs (i.e. the Canada Child Tax Benefit, the Universal Child Care Benefit and the non-refundable child tax credit) should be replaced with a single child...
tax benefit such as the one proposed by the Caledon Institute of Social Policy (Battle, 2008). This proposed child tax benefit has many advantages: it is inclusive, non-stigmatizing, portable, and progressive. The benefit would provide up to $5,000 for low-income families, regardless of their source of income, thereby significantly reducing poverty and covering much of the basic cost of raising a child in a low-income family. Further, a two-part benefit — consisting of a basic benefit that is provided to the large majority of low and middle-income families and a supplement that is paid to only low-income families — would provide recognition of the costs of raising children and prevent modest/middle income families from falling into poverty. A universal child benefit provided at a substantially higher monetary value would express society’s shared responsibility for children by restoring the universal recognition of child-rearing and contributing to the extra costs of raising children.

*Childcare Services and Community Supports*

Quality childcare that is accessible and affordable is needed by all families, not just those living in affluent communities. Community supports for the mothers in this study were scarce and opportunities to bring their young children to activities were few and far between. Attending nursery or preschool programs, while common among children from privileged and affluent families, was not an option in this research community because the programs were unaffordable and unavailable. Recreational activities, such as swimming or basketball lessons, were ‘luxuries’ that the mothers could not afford due to the cost of these programs and the barriers related to a lack of transportation. Cleveland & Krashinsky (2001) make the point that "there is
considerable agreement that organized, good quality child care for children two to five years of age is generally beneficial . . . Organized child care does provide socialization and educational experiences that are invaluable to children; children cared for at home will do as well, especially if they receive part-day early education experiences (as do children in many upper-middle class families). Although good child care is quite expensive, the benefits outweigh the costs for most children and mothers.” (Cleveland & Krashinsky, 2001:247).

Investments in a range of community supports are essential, especially in low-income neighbourhoods. Clearly, additional licensed childcare programs need to be established in low-income communities; however, a regulated childcare system needs to recognize social and cultural diversity. This is connected to the theme of quality that is debated in the childcare policy literature. Studies exploring the concept of quality in childcare suggest that certain types of arrangements significantly enhance children’s school readiness, thus leading to better developmental outcomes in children (Doherty, 2001; Friendly, 2004; OECD, 2004b). Research into differences in childcare centres, for example, provides evidence that non-profit and for-profit centres have differing levels of quality (Cleveland & Krashinsky, 2005). The concept of quality, however, is perceived by parents as encompassing a broader range of issues than whether the childcare centre is commercially-based or non-profit.

The childcare services sought by parents respond both to the parents’ own needs and their yearning for childcare that is of good quality. Although most parents want a
good quality childcare service, this is not the only criterion for their decision. Parents weigh their desire for quality with other factors: the childcare service must be in a convenient location (i.e. near their home or place of work), suit their working hours and be within their financial means. At the same time, more and more parents look for services which foster children’s intellectual and social development during the preschool years. This is the case whether or not the mother works outside of the home. As demonstrated through the interviews with the research participants in this study, most mothers understand what their children need at different stages. For younger children (under about age 2), they need to have to option to care for them or to place them in care. Once their children reach the preschool age, however, they want opportunities for their children to socialize and these opportunities would also provide the mother with time to develop skills and interests.

In addition to the need for a range of childcare services, municipally-delivered recreation and leisure programs — while affordable for middle-income families — are too costly for low-income families. Children’s programs — for both preschool and school-age— must be available at little or no cost to low-income parents. The establishment of universal preschools would have the dual benefit of providing children with early learning and socialization opportunity as well as giving low-income mothers some much needed respite, during which time they can have a chance to pursue personal developmental and skill-building activities. Other desperately needed community supports include investments in social housing.
**Building on the Policy Direction in Ontario**

“The strategy’s target is to reduce the number of children living in poverty by 25 per cent over the next 5 years. All low-income families with children would see the benefits of this strategy, which would help lift 90,000 children out of poverty.” (Ontario Budget 2009)

The Ontario government’s 2009 poverty reduction strategy provides a framework for the recommendations outlined in this dissertation (Ontario, 2009). Among other initiatives outlined in the provincial poverty reduction strategy are increases to the Ontario Child Benefit, investments in housing and in community hubs for family services, and enhancements to the social assistance system. The strategy also includes an increase in the minimum wage and funding for youth programs. Investments in all these areas would directly help low-income women like those in this study.

Another notable provincial initiative is the 2009 release of a report from Ontario’s early learning advisor (Pascal, 2009). The report provides a framework and recommendations that would support mothers from all income groups but it also points to recommendations that would be particularly helpful to low-income mothers such as those in this study. The Pascal report focuses on implementing early learning in Ontario and emphasizes four key components: full-day learning for 4 and 5 year olds, before- and after-school and summer program for school-age children, quality programs for younger children, and enhanced parental leave by 2020. Although the policy attention has been on the full-day learning for 4- and 5-year olds, the more critical component to help low-income women such as the twenty mothers in this study.
would be the establishment of quality community programs for younger (i.e. preschool-age) children. As the Pascal report indicates, changes to the childcare fee subsidy eligibility would open participation to more children and this, too, is an essential component to childcare policy reform.

**Long-term Recommendations**

The recommendations over the long-term are based on a universal approach in the sense that they would help to reconcile earning and caring for families across a range of income levels. A universal system of high quality, affordable and accessible childcare is needed. At the same time, a caregiver's allowance that would include a parental care component for up to the first three years of a child’s life, and a lesser amount for the next three years, is also a key component of childcare policy. The allowance should be designed to be available to individuals who are provisioning for others, such as seniors or individuals with a disability. Long-term recommendations also include changes in employment practices and modifications to the system of regulating live-in caregivers.

**Employment Practices**

Profound changes are needed in employers’ attitudes towards a work-family balance, in rethinking the ways in which responsibility for children is assigned, and in recognizing that caring for children is a socially useful service requiring public support. As noted by Johnson et al., (2001) work-family conflict affects individuals, families, and organizations. While childcare is the focus of my dissertation, the problems related to
work-family conflict are not limited to parents and there is growing evidence that providing supportive and flexible workplaces benefits employers (Johnson et al., 2001).

There are numerous ways employers can help with childcare, including offering flexible work arrangements (work-from-home, self-funded sabbaticals), family care leaves, maternity/parental flexibility (extensions, part-time return), or benefit top-ups for maternity/parental/compassionate care leaves. Enhancing the provisions for flexible work arrangements, including part-time, job sharing, and alternative career paths has been recommended by the Government of Canada (Canada, 2007). As mentioned in Chapter 2, enticing employers into the business of providing childcare services for their employees is not, however, a feasible policy direction as the federal government found through consultations with employers (Canada, 2007).

**The Live-in Caregiver Program: An Elephant in the Childcare Policy Room**

The Live-in Caregiver Program is a policy that reveals the class/income privilege that exists in Canada. The program encapsulates the inequities that divide Canada: privilege that accompanies upper income families, and the reliance on immigrants from developing countries to provide low-wage labour. The existence of the LCP impedes progress in equitable policy development by appeasing a powerful and vocal segment of the population. A parallel exists between using private childcare and private health care or education. Just as the increased use of private health care or education erodes popular support for a public system, the continued use of private live-in caregivers by
upper-middle class society inhibits widespread support for a universal childcare system.

The fact that parents with professional careers need a live-in nanny in order to meet their obligations is hardly surprising, yet deeply problematic. Family responsibilities conflict with most careers. Missing meetings to care for a sick child, reducing work hours or refusing to travel or work evenings are common occurrences in the absence of live-in caregivers. Clearly, the LCP has been instrumental in helping some women achieve gender equity. However, employing live-in caregivers is neither desirable nor feasible for most families.

The existence of the LCP presents a quandary in childcare policy. Successful professional families with children depend on the services of a live-in caregiver/domestic worker so that they may have the benefits of a career as well as those of a family. This is problematic for two reasons: it creates an inequitable situation for dual-earner families with children who are either unable to hire or do not desire live-in domestic help; and it placates families who otherwise would be demanding a comprehensive childcare policy. If the program were eliminated, there would be an outcry from among foreign caregivers and Canadian families who depend on the program. On the other hand, the continued presence of the LCP hinders the necessary demand for a childcare system from upper-class families. It also perpetuates the servant tradition. Changes to the program are needed to make it consistent with the regular immigration system. In other words, removing the requirement for foreign
caregivers to provide two years of live-in caregiving in exchange for permanent residency status. Instead, women would apply to immigrate to Canada under the general immigration guidelines.

**8.5 Conclusion**

The approach to childcare policy must be based on the assumption that all adults have caring responsibilities, and that caring for others is seen to be as central to the lives of all citizens as is employment (Neysmith et al., 2009). Campbell (2006) argues that a national childcare system must be premised on a “new way of envisioning family relationships and responsibilities, work and childcare” (2006:171) and that a successful childcare policy gives thoughtful consideration of the role and value of women’s work. Childcare policy should communicate that caring for children is demanding, requires skill and knowledge, and deserves appropriate compensation.

Childcare policies in other countries and regions provide helpful models for Canada. Mothers in Finland, for example, may receive a home-care benefit for about two years following the end of maternity and parental leave (i.e. until the child’s third birthday). The benefit is allowed only if the child is not in public childcare. Parents may also choose to use that payment to purchase care from a private childcare provider (Gornick & Meyers, 2008). Employment policies such as the ‘beyond employment’ model that has been adopted in Germany, the Netherlands, and Sweden offer approaches that are more attentive to transitions in the life cycle (Vosko, 2009). The Québec approach demonstrates an explicit and collective responsibility for children — a
responsibility that is shared not only between parents and the state, but also between both parents. Among the lessons learned from the policy in Québec is that, while ideology does matter, governments will need to respond when social movements mobilize (Jenson, 2009).

In Ontario, recent notable provincial initiatives such the poverty reduction strategy and the early learning framework provide a number of recommendations that would assist low-income mothers. The findings in this dissertation point to two critical recommendations for supporting low-income mothers in their provisioning: an increased child benefit and enhanced community services. Lifting families out of poverty requires programs that provide adequate incomes. Providing early learning/childcare opportunities for mothers who are full-time caregivers as well as those who are employed is essential. This would have the dual advantage of providing early learning opportunities for children before they reach kindergarten age and giving mothers some regular opportunities to engage in training, volunteer, or labour market activities.

All nations, including Canada, rely heavily on women’s work of social reproduction as well as their labour force participation. A comprehensive childcare policy consisting of a publicly-funded childcare system and community services together with a child benefit program and care allowance, would reflect recognition of women’s provisioning. Year after year, this provisioning work will be carried out, as described by Jocelyn, a mother of five and grandmother of 11:
“Over the years I don’t think anything will change that much because none of us has won the lottery and we don’t have no big inheritance to get something (laughs). So I’ll be still taking care of them. I still help them. I still have to help my daughters with my grandkids ... I don’t have no food — but they won’t go to the food bank, so I’ll go.”

Envisioning a childcare policy based on shared caring, in a society that supports women (and men) in both their earning and caring roles, provides hope that Jocelyn’s daughters and granddaughters will be appropriately supported in their provisioning responsibilities.
References


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## Appendix A: Summary of Comparative Literature

### Summary of Selected Comparative Research Literature*

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<th>Tax Deductions</th>
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<th>Preschool/Kindergarten</th>
<th>Live-in Caregivers</th>
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<td>B&amp;P; M&amp;G; Mahon; S&amp;K</td>
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<td>B&amp;P; Mahon</td>
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<td>B&amp;P; M&amp;G; Morgan</td>
<td>M&amp;G; Morgan</td>
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<td>M&amp;G</td>
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<td>B&amp;P</td>
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<td>S&amp;K</td>
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<td>B&amp;P</td>
<td>B&amp;P</td>
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<tr>
<td>Sweden</td>
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<td>OECD; B&amp;P; Mahon</td>
<td>OECD; B&amp;P; Mahon</td>
<td>OECD; B&amp;P; Mahon; S&amp;K</td>
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<tr>
<td>U.K.</td>
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<td>OECD; B&amp;P; Mahon; S&amp;K</td>
<td>Mahon; S&amp;K</td>
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<tr>
<td>U.S.</td>
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<td>M&amp;G</td>
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</tbody>
</table>

*The studies presented in this table are Bettio & Plantenga (2004); Jenson & Sineau (2001); Mahon (2001); Meyers & Gornick (2003); Morgan (2003); OECD (2005); and Sipilä & Kröger (2004). The reason for selecting this sample of studies was simply to illustrate the difficulty with making global comparisons of childcare policy as defined in the broadest sense (i.e. as defined in this thesis).
Appendix B: WEDGE Project

The WEDGE Provisioning Research Project

Fall 2004

What is the research about?

In the global economy, women face risks of unemployment and underemployment while programs that help them face these risks have been cut back. At the same time, women do important work in their households and communities that is not recognized nor paid. Yet all of women’s work is essential for family well-being. WEDGE was chosen as the project’s name to suggest its focus on women and communities ‘on the edge’ of the global economy working together ‘on the edge’ of new ideas and strategies for surviving with dignity.

First, we want to look in a new way at the work which women do. We believe that women’s work can’t be neatly divided into categories of paid and unpaid work. They work in the arenas of family, employment and the community in complex and overlapping ways. We are trying out the concept of provisioning to describe the work that women do. By provisioning we mean all the activities that women do to provide the necessities of life for all those they are responsible for inside and outside the home. This research project examines the actual patterns of work that women do in their households, communities and jobs.

Second, we are especially interested in the provisioning work that women do in the community. We know less about this area of women’s work than we do about their work in the family and paid employment. We are interviewing women who are part of groups that define themselves as low income, immigrant, ethno-racial, youth or older. Such women are often at the mercy of government programs and policies, social service providers, employers, and businesses that have restrictions and regulations about how to access them, when and how often. Government, business and social programs, while helping, can add work to women’s lives or give help that is not useful. In looking at women’s community work, we want to find out how government policies and programs and all the organizations that affect women’s lives can be changed to better support the provisioning work that women do.

What are the objectives of the research?

One. To find new ways to understand the endless amount of work that women do to maintain the lives of those they feel responsible for, especially the work they do in the community.

Two. To develop better social practices, programs and policies that make it easier for women to provide for others without sacrificing their own well-being.

How Are We Working Together?

It is important that researchers and community members work together as equals as much as possible. Each site will have a small committee of women who are familiar with the community-based programs. The purpose of this committee is to make sure that all the research developed for this project makes sense to the site and gives community members input into how it is designed and interpreted. Over the three years of the project (2004-7), ways of working together will be developed on the basis of the following understandings:

At the site level: The researchers’ commitment is to: a) listen respectfully to the words of community members; b) appreciate the ideas, emotions, the skills and relationships of project participants; c) honour community members for the time and energy they bring to the research and compensate costs promptly; d) provide workshops, information or other resources as negotiated with the committee.
At the cross-site level: The four researchers in the project will be sharing data with each other to answer questions common to all the sites. Much of the research is based on interviews, small discussion groups and site documents. The Ethics Committee at the relevant university will approve research procedures before they are undertaken. There will be no information shared that will identify any individual person or site. A major outcome of the research will be the development of policy documents that will support women’s provisioning work in the community.

Who is the Research Team and what are the Study Sites?

The cross-site research team includes four professors and graduate students. The professors have experience in community-based action and policy research on issues of concern to women. Each one is responsible for at least one research site. There are also graduate students on the team including doctoral candidates who may be responsible for sites under the supervision of a professor. The funding body, The Social Sciences and Humanities Research Council of Canada, requires that students at all levels be hired whenever possible to enhance their training in research involving communities.

The sites and researchers are:

Stephanie Baker Collins, Ph.D. Assistant Professor, School of Social Work, York University: a food cooperative in southern Ontario.

Sheila Neysmith, DSW, Professor, Faculty of Social Work, University of Toronto, a community of older age urban dwellers.

Elaine Porter, Ph.D. Associate Professor, Department of Sociology, Laurentian University: a community resource centre in northern Ontario.

Marge Reitsma-Street, Ph.D. Professor and Principal Investigator, Studies in Policy and Practice, Faculty of Human and Social Development, University of Victoria: an employment program for abused women.

Sandra Tam, Ph.D. candidate in Faculty of Social Work, University of Toronto: an employment resource centre in an urban community of young immigrant women.

Judy Cerny, Ph.D. student in Faculty of Social Work, University of Toronto: an urban social housing tenants’ group in northwest Toronto.

How to find out more about the WEDGE Provisioning Project?

Contact Principal Investigator: Dr. Marge Reitsma-Street, Studies in Policy and Practice, University of Victoria, Telephone: 250-721-6468, Email: mreitsma@uvic.ca.
### Appendix C: Study Area Profile

#### Study Area Profile, 2001 and 2006

<table>
<thead>
<tr>
<th></th>
<th>Study Area</th>
<th>City of Toronto</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Population</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population in 2006 and % of the City</td>
<td>112,000 / 4%</td>
<td>2,503,000</td>
</tr>
<tr>
<td>White population, 2001/2006</td>
<td>43% / 36%</td>
<td>57% / 53%</td>
</tr>
<tr>
<td>Black population, 2001/2006</td>
<td>17% / 19%</td>
<td>8% / 8%</td>
</tr>
<tr>
<td>Chinese population, 2001/2006</td>
<td>6% / 6%</td>
<td>10% / 11%</td>
</tr>
<tr>
<td>South Asian population, 2001/2006</td>
<td>11% / 12%</td>
<td>9% / 12%</td>
</tr>
<tr>
<td><strong>Families and Households</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons per household, 2006</td>
<td>2.9</td>
<td>2.7</td>
</tr>
<tr>
<td>One person household, 2006</td>
<td>20%</td>
<td>30%</td>
</tr>
<tr>
<td>Households with six or more persons, 2006</td>
<td>7%</td>
<td>4%</td>
</tr>
<tr>
<td>Children and youth under 20 years, 2006</td>
<td>27%</td>
<td>22%</td>
</tr>
<tr>
<td>Family households (% of households), 2006</td>
<td>75%</td>
<td>65%</td>
</tr>
<tr>
<td>Non-families (% of households), 2006</td>
<td>25%</td>
<td>35%</td>
</tr>
<tr>
<td>Single parent families (% of families), 2006</td>
<td>29%</td>
<td>20%</td>
</tr>
<tr>
<td>Seniors, 65 and over, 2006</td>
<td>14%</td>
<td>14%</td>
</tr>
<tr>
<td>Multiple family households, 2006</td>
<td>6%</td>
<td>3%</td>
</tr>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average individual income (before tax, all sources, persons 15 and over), 2005</td>
<td>$24,700</td>
<td>$40,400</td>
</tr>
<tr>
<td>Average employment income (before tax, wages &amp; salaries only, persons 15 and over), 2005</td>
<td>$27,600</td>
<td>$43,700</td>
</tr>
<tr>
<td>Average household income (before tax, all sources, persons 15 and over), 2005</td>
<td>$53,900</td>
<td>$80,300</td>
</tr>
<tr>
<td>Households with income $20,000 or less %, 1970/2005</td>
<td>11% / 21%</td>
<td>15% / 19%</td>
</tr>
<tr>
<td>Households with income $100,000 or more %, 1970/2005</td>
<td>5% / 9%</td>
<td>9% / 18%</td>
</tr>
<tr>
<td>Persons in households below Statistics Canada Low-income Cutoff (LICO, before-tax), 2005</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>Economic family income from employment (wages &amp; salaries only), % of total economic family income in 2005</td>
<td>74%</td>
<td>79%</td>
</tr>
<tr>
<td>Economic family income from government transfer payments (e.g. welfare), % of total economic family income in 2005</td>
<td>20%</td>
<td>9%</td>
</tr>
<tr>
<td>Study Area Profile, 2001 and 2006 (continued)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td></td>
<td></td>
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<tr>
<td><strong>Housing</strong></td>
<td>Study Area</td>
<td>City of Toronto</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
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</tr>
<tr>
<td>Average monthly rent, 2006</td>
<td>$840</td>
<td>$930</td>
</tr>
<tr>
<td>Dwellings in need of major repairs, 2006</td>
<td>10%</td>
<td>7%</td>
</tr>
<tr>
<td>Social housing units and % of total dwellings, 2001</td>
<td>4,000 / 11%</td>
<td>91,000 / 10%</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons 25 or over with a university certificate, diploma or degree, 2006</td>
<td>16%</td>
<td>39%</td>
</tr>
<tr>
<td>Persons 25 or over without a school certificate, diploma or degree, 2006</td>
<td>35%</td>
<td>18%</td>
</tr>
<tr>
<td>Persons 25 and over with a PhD, 2006</td>
<td>0.4%</td>
<td>1%</td>
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<tr>
<td><strong>Immigrants</strong></td>
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<td></td>
</tr>
<tr>
<td>Not born in Canada, 1971</td>
<td>40%</td>
<td>37%</td>
</tr>
<tr>
<td>Not born in Canada, 2006</td>
<td>60%</td>
<td>50%</td>
</tr>
<tr>
<td>Immigrants arrived between 1996 &amp; 2001 in 2001</td>
<td>12%</td>
<td>11%</td>
</tr>
<tr>
<td>Immigrants arrived between 2001 &amp; 2006 in 2006</td>
<td>10%</td>
<td>11%</td>
</tr>
<tr>
<td><strong>Employment</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White collar occupations (managerial/professional), 2006</td>
<td>20%</td>
<td>40%</td>
</tr>
<tr>
<td>Blue collar occupations (manufacturing, transportation, construction, utilities), 2006</td>
<td>36%</td>
<td>17%</td>
</tr>
<tr>
<td>Arts, literary, recreation occupations, 2006</td>
<td>2%</td>
<td>5%</td>
</tr>
<tr>
<td>Unemployment rate, 15 years and over, 2006</td>
<td>9%</td>
<td>8%</td>
</tr>
<tr>
<td>Youth unemployment, 15-24 years, 2006</td>
<td>15%</td>
<td>17%</td>
</tr>
<tr>
<td>Self-employed, 15 years and over, 2006</td>
<td>6%</td>
<td>12%</td>
</tr>
<tr>
<td><strong>Crime and Safety</strong></td>
<td></td>
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<tr>
<td>Homicide rate per 100,000, 2005-07</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>Homicide by shooting, 2005-07</td>
<td>15 / 58%</td>
<td>121 / 52%</td>
</tr>
<tr>
<td>Average age of homicide victims, 2005-07</td>
<td>26</td>
<td>31</td>
</tr>
<tr>
<td>Homicide victims 20 years of younger and % of total homicides, 2005-07</td>
<td>10 / 38%</td>
<td>53 / 23%</td>
</tr>
<tr>
<td>Marijuana grow-op rate per 10,000 dwellings, 2006</td>
<td>18</td>
<td>5</td>
</tr>
</tbody>
</table>

**Source:** Statistics Canada, Census 1971 to 2006. Compiled by Cities Centre, University of Toronto, 2008.
Appendix D: Profiles of Research Participants

The individual interviews were conducted at Riverview between April 17, 2007 and January 8, 2008. All names have been changed to respect the confidentiality of the participants.

Amisi was a lone mother with three sons between nine and sixteen years of age. She was one of four research participants who did not wish to be audio-taped yet spoke openly about her experiences and concerns. At the time of the interview, Amisi was a recent immigrant from Egypt, having been in Canada for just over one year. Amisi was on social assistance and her husband was living in Egypt. Her sons attended full-day school and her youngest son attended an after-school childcare program. Amisi was not comfortable with anyone else watching her youngest son aside from her or his older brothers. Amisi was completing her high school diploma through the adult education program at a local school and planned to enroll into either a hairdressing or an aesthetics program. She was leaning towards aesthetics because the tuition level was more affordable for her. Amisi’s sons were her priority: she tried to provide them with everything they needed and often sacrificed her own needs. While the family certainly didn’t have much money, Amisi wanted her sons to focus on their school work so that they would finish high school; therefore, she did not want them to take on part-time jobs. She would spend at least one hour each evening helping her youngest son with his homework. Amisi wished she could enroll her youngest son into an after-school basketball program; however, the cost was too high and the subsidized program was full. She did not allow him to play basketball outside in the community courts because it was too dangerous due to high levels of crime and violence in the neighbourhood.

Ayana was a married mother with two daughters, age four and six, who came to Canada ten years ago from Eritrea. She was one of the four participants who did not wish to be audio-taped. Nevertheless, she appeared enthusiastic about the interview and shared her thoughts and experiences openly. Ayana and her husband had been a two-income family until recently. She had had an injury at work and so, at the time of the interview, her husband’s employment wages were their only source of income. Her husband had two jobs: on weekends he delivered papers and during the weekdays he worked in a small warehouse. He also sometimes worked 3-4 hours per night on weekends. When she was employed, Ayana’s children attended home-based as well as centre-based childcare settings. Although she planned to return to work when her younger daughter entered kindergarten, Ayana would prefer to be available to care for her children on a full-time basis. In her view, a mother at home full-time was best for the family. If money were not an issue, she would rather be able to remain at home until the children complete high school. Even when her daughters are teenagers, Ayana considered it
important to be at home full-time: to be able to monitor their homework and to know who their friends were. Ayana attended college courses on a part-time basis. She felt she did not have enough education herself and wanted better opportunities for her children. Ayana would spend several hours each day helping her daughters with school-related work, including helping her younger daughter to prepare for school.

**Bahati** was a single mother with three sons — eight, seven and five years of age — and had been separated from her husband for five years. She appeared to welcome the opportunity to talk to someone about her experience as a mother. This was likely because, as she indicated, she did not have many friends. At two points during the interview, the participant began to cry when describing the difficulty in providing for her three children. Bahati came to Canada twelve years ago from Eritrea and was receiving social assistance. At the time of the interview, she was receiving some child support on an irregular basis and her ex-husband was behind in all payments. In spite of not receiving full child support payments, Bahati’s social assistance was being reduced on the assumption that she was in fact receiving support payments. She did not, however, like to call her social worker because she was ashamed to ask for additional assistance. Bahati lived in subsidized housing. She was worried about her sons and wished she could enroll them in some activities, such as sports programs, but they were too expensive. Bahati and her husband previously had a house and a restaurant together at which she worked seven days a week. Both the home and the business were lost due to his problem gambling. Her youngest child was just six months when she separated from her husband. At the time of the interview, Bahati was on medication for a serious vision-related condition. She had recently experienced loss of vision and so she was prescribed a strong medication, which left her in a predicament: without the medication she would lose her vision entirely yet the side effects of the medication were such that the doctor did not want her to be taking it for an extended period of time. Bahati often had to take her youngest son, who was in half-day kindergarten, along with her to medical appointments because the location of the appointment was too far and she would be unable to make it back in time to pick him up from school. There was no one else who could pick him up.

**Camila** was a single mother of three sons: eight, eighteen and twenty-four years of age. The two younger sons lived with her and the eldest lived on his own. Camila had immigrated to Canada from Cuba three years ago. She was on social assistance, lived in a private rental building, and was separated from her husband, a trained engineer who was working as a supervisor in a factory because he had been unable to get a job in his field. Camila received regular child support payments and the amount was deducted from her social assistance. Camila was trying hard to get off welfare. She had just completed a training program to be a personal support worker (PSW). At the time of the interview, Camila had been offered a PSW position at the nursing home where she had been volunteering and was awaiting the results of her medical examination before the job offer could be finalized. Since the position would not be full-time, Camila planned to get extra hours through an agency that arranges for PSWs to work in private
homes. Camila’s shift at the nursing home would begin at 6 a.m. so she was trying to make arrangements for her son’s care during the early morning hours before school. Her expectation was that this would be divided between her 18-year-old son and a woman who lived in the building. Improving her own English language skills as well as those of her eight-year-old son was a priority for Camila. She volunteered at local agencies because that gave her an opportunity to practice her English. Camila had concerns about her younger son: his asthma, his struggles with school (mainly due to his limited English language skills) and the amount of time he watched TV and played computer games. On top of her own daily work, Camila helped her son each night with his homework assignments which involved reading, writing in a diary, and studying math.

Courtney was a 24-year-old mother of three boys: a six-year-old, a five-year-old, and a three-month old baby. Courtney was born in Canada and each of her three sons had a different father. Although at the time of the interview Courtney was living with the father of her youngest son, she was essentially a single parent. Her partner was a young father himself, uncomfortable with the responsibility of having a baby not to mention two step-sons. Courtney was on social assistance, lived in public housing, and received no child support payments. She did not know the whereabouts of the father of her eldest son and thought he was probably out of the country. A restraining order had been placed against the father of her second son and this meant that he also did not pay child support. Courtney was keenly aware of the need to find a job for financial reasons; however, the logistics of arranging daycare for her three sons and finding a job with work hours that could accommodate her childcare arrangements were overwhelming and remote. Courtney had been employed prior the birth of her youngest son and experienced the struggles associated with combining a job with daycare. While she appreciated the time away from her children that a job offered, Courtney also described the exhaustion she felt each evening after work and the resulting difficulty with keeping her children on a schedule. Her sense was that being available to care for her sons full-time allowed her to parent her children more effectively. Courtney expressed affection for the teenaged girls in her neighbourhood because many of them either had children at a young age or wanted to have children. They would often come to her for advice and, at times, even the parents of young girls would ask Courtney to speak with their daughters — to tell them about the experience of young motherhood and to try to ‘scare them into not having any kids right now.’

Daiyu was a married mother of two children: a 12-year-old boy and a two-year-old girl. She was from China and had been in Canada for four years. Prior to emigrating, Daiyu was an accountant and taught accounting at a university. At the time of the interview, their source of income was her husband’s salary and Daiyu was completing her professional designation exams to be a certified chartered accountant. Daiyu was the full-time caregiver of their two-year-old daughter. She intended to remain in this role for one more year and then put her daughter into a daycare program. While still in China, Daiyu’s son spent the first four years being raised by his grandparents —
common practice among Chinese professional parents. Daiyu expressed reservations about this tradition and did not want to repeat it during her daughter’s early years. She was enjoying raising her daughter on a full-time basis — spending a lot of time teaching her and playing with her. Daiyu was comfortable in the knowledge that she was always there to offer help to her daughter. Daiyu thought that taking care of her daughter during these early years allows her to balance her career aspirations. She would study for her professional designation exams in the morning before her daughter awoke. Their children’s education was a priority for Daiyu and her husband. Daiyu regularly attended parent drop-in programs offered in the community so that she could meet other mothers and her daughter could learn to socialize with other children. She was always teaching her daughter, whether it was through play, reading, drawing, or music; or learning to recognize numbers on the elevator buttons in their high-rise rental apartment. Every afternoon during her daughter’s nap time, Daiyu would review her son’s homework and prepare additional homework tasks for him. In the evenings, her husband would teach their son math to supplement his school lessons.

**Eshe** was a 24-year-old single mother of a six-month-old baby boy. She was the full-time caregiver of her son and was on social assistance. Eshe was a refugee from Nigeria who came to Canada when she was seven months pregnant. Her decision to leave Nigeria resulted from a dispute with her parents when they selected a future husband for her whom she did not want to marry. Eshe longed to be with the baby’s father, who was in Nigeria and whom she met at university. She wished that he could come to Canada because she was finding it extremely difficult to be alone in a new country and solely responsible for raising a child. Eshe shared a private rental apartment with a roommate who helped out with some of her caregiving duties. Eshe had a university degree in English and a teaching certificate, and wanted to enter teaching or train to become a nurse. Her social worker, however, was recommending she complete a high school diploma — which Eshe did not want to do given that she had a university degree — and she found that the only training accessible to her was that of a Personal Support Worker because the cost was subsidized by the government. Eshe had applied for a daycare fee subsidy but was told that she first needed to enroll in a school program. Eshe wished that there would be a place where she could drop off her son, even for just a few hours occasionally, so that she could get some respite. As a refugee, she was not entitled to any childcare-related programs such as the Child Tax Benefit.

**Farisa** was a married mother of six children between the ages of three months and eleven years. She came to Canada fourteen years ago from Somalia. Farisa and her husband were on social assistance and lived in a subsidized three-bedroom townhouse. Her husband worked part-time at a warehouse and was attending a training program to become a forklift operator. Farisa’s days and nights were filled with caring for her children. Each morning she woke up early and helped the school-age children prepare for their day. She made breakfasts and lunches, assisted with grooming the children, and ensured that they had all the necessities for their school day. Throughout the day, she was caring for the baby and for the pre-school age children. When they napped, she
cooked and cleaned. Farisa and her husband collaborated in taking care of the children although he tended to perform the outside tasks (shopping, appointments, taking children to school) while Farisa did the inside tasks (cooking, cleaning). Farisa was taking driving lessons. She was thinking of applying for a daycare subsidy so that she could attend a course. She wanted to take a childcare education program and eventually provide childcare in her home when her children were older. Farisa and her husband were saving for their children’s education, $60 each month for each child. Farisa felt isolated being at home full-time with the children. Farisa was one of four research participants who did not wish to be audio-taped.

Jocelyn was a single mother and grandmother in her mid-40s. She had a nine-year-old daughter, a 15-year-old son, and three daughters in their twenties. Her children had different fathers. Jocelyn also had 11 grandchildren between a few months old to age 13. She came to Canada from Jamaica when she was nine. Jocelyn was on social assistance and lived in public housing. She had been previously employed, often having two or three jobs at the same time because “one job pays the rent, one job pays the babysitter, and one job pays the food.” She was a community leader and was on the steering committee of her tenants’ group. Jocelyn felt a strong sense of responsibility for all the children in her neighbourhood, especially the boys.

Leena had two children — an eight-year-old boy and a four-year-old girl. She was married and came to Canada nine years ago from Afghanistan. The family’s source of income was her husband’s salary. They had never received social assistance nor did they live in public housing. Her husband worked in a garden store. Leena’s marriage had been arranged and she didn’t know her husband before they were married. Her husband controlled the household expenses. Leena spoke tearfully about the difficulty of having to say no to her children when they asked for items, especially for things like books that are promoted for sale through the school. Expenses like these were out of reach for her family. Leena felt resentful at the apparent inequity between amount of child benefits her family received compared to those on social assistance who, in her view, get ‘too much money from the government’.

Magdalena was a single mother of a seven-year-old daughter. Magdalena was born in Colombia and had lived in Canada for nearly twenty years. At the time of the interview, Magdalena had recently moved to a new apartment following a separation from her husband of nearly 20 years. She had a full-time job serving customers in the deli department of a local grocery store. Magdalena was proud that she had never received social assistance and felt resentful at the perceived ‘abuse of the system’ by others. Her days were long, leaving the house each morning by 6:30am to drop off her daughter at daycare and starting her shift at 8:00am. She was trying to obtain regular child support payments from her husband but was having trouble securing a legal aid certificate so that she could hire a lawyer.
Marian had two children: a son age three and a daughter age 18-months. Marian had been married for five years and came from Guyana 11 years ago. Her source of income was her husband’s employment and her husband handled the money. Marian cared for her children full-time and felt strongly that she was the best caregiver for them. Her husband worked on the night shift as a shipper in a factory and had been laid off for three and a half months. It was difficult to pay bills during that period of time as his EI cheque was just over $200/week. The family used their child tax benefit payments and a credit card to pay for groceries and other bills. Marian was relieved that her husband was recently called back to work. She hoped to go back to Guyana for a visit one day when she had enough money.

Marriba, a married mother of an 11-year-old daughter, emigrated from Pakistan five years ago. Marriba had been an accountant back home and was completing her Ontario high school education. Marriba’s husband, who had a Master of Business Administration, worked as a security guard. At the time of the interview, Marriba and her husband were on social assistance. Marriba engaged in a variety of volunteer activities at local agencies and in the Muslim community. She and her husband spent a great deal of their time parenting their daughter. They taught her to speak Urdu, tutored her in math, and helped her with school projects. They also carefully monitored her computer activity. In terms of childcare, they had always alternated their home and work schedules so that one parent was at home at all times. Marriba wished she had enough money to more adequately meet her daughter’s needs but felt she was doing her best at providing healthy food, clothes, and a good education. She wanted to enroll her daughter into recreation programs but a cost of $50 for a 12-week session of swimming classes was unaffordable to them. Marriba also would like to help her family back home but lacked money to do so at this time.

Maxine was a Canadian-born young single mother of twin boys, age two, who both had multiple health and developmental issues. In addition to suffering from asthma, vision and hearing problems, the boys were hyperactive. Maxine was on social assistance and was their full-time caregiver, which she found difficult mainly because there were two of them. The boys’ father visited several times each week. He often paid for clothes and toys, and also paid some child support to her. While she was at home full-time with her young sons, Maxine was not comfortable attending parent and child drop-in programs. She felt that her sons’ high level of activity was disruptive and that they were unwelcome in these programs. Maxine’s social worker had recommended that she enroll her sons into a childcare program. She had applied for a daycare fee subsidy but was still on the waiting list at the time of the interview. Maxine attended an evening community leadership program which provided on-site childcare. Generally, the only childcare providers with whom she was comfortable leaving her sons were their father or her own sister.
Noorzia was one of four participants who did not wish to be audio-taped during the interview. She was a married mother of two children: a 12-year-old boy and a three-month-old baby girl. Originally from Afghanistan, Noorzia and her family had only been in Canada for one year at the time of the interview. The family lived in a private rental apartment into which they had moved recently after living in a family shelter for six months. They were not receiving social assistance because that was one of the conditions of her husband’s entry to Canada. Their source of income was her husband’s wages. Noorzia was a full-time caregiver at home. She was the only adult who ever watched the children — even her husband never stayed at home alone with the children. Prior to having the baby, Noorzia worked in a bakery for minimum wage. She wanted to remain the primary caregiver during her daughter’s first year. After that, Noorzia wanted to put her into daycare because being at home was isolating, the baby would have an opportunity to develop social skills and independence, and the family would have a higher income. While she wanted to have an income to help support the family, she also wanted to be at home with her baby. Noorzia always went grocery shopping with her husband, who had a credit card. Whenever they could, they would send money home to their family in Afghanistan. Noorzia wished each of her children could have their own room. She also wished that she had a job and her own credit card so that she could pay for household items herself.

Sandra was a single mother of three children who each had special needs. She was born in Canada. Sandra’s nine-year-old daughter had been identified as having Attention Hyperactivity Deficit Disorder and attended a school program for children with similar conditions. Sandra’s four-year-old twins — a girl and a boy — were born prematurely at six months and both had developmental delays. The twin daughter was visually impaired and, as a result, Sandra received funding through the provincial Assistance for Children with Special Disabilities (ACSD) program. She lived in public housing and her main sources of income were ACSD and the Child Tax Benefit. Sandra had been on social assistance for some time but requested that it be terminated because she felt that the administrative and reporting requirements were not worth the small amount she would be receiving. Sandra also received some child support from the father of her older daughter. Sandra’s children were biracial — their mother was white and both the fathers were black. Although she was living as a lone parent at the time of the interview, Sandra had a long-distance relationship with the father of the twins and was hoping to sponsor him so that he could return to Canada from Jamaica. She would send him money whenever she could.

Sara was a single mother with an 11-year-old daughter. She was eighteen when her daughter was born. At the time of the interview, Sara was on social assistance but had been employed until recently. Sara was born in Canada and her ethnic background was Guatemalan. She was close with her sister and felt a strong sense of responsibility for her niece and nephew, aged 11 and 10 respectively. She and her sister provided a great deal of support to one another. Sara found her role as a parent much easier now that her daughter was more independent. When her daughter was born, both Sara and the
baby’s father were in high school. They each wanted to complete their high school education so Sara cared for the baby full-time for one year and, after that, the baby’s father cared for the child for one year. Sara felt isolated during the first year of the baby’s life. She stated that she would have benefited from the availability of more programs during that time. Sara made every effort to find free or affordable after-school programs for her daughter so that she would be exposed to new experiences and develop a range of interests. This was especially important to Sara because the area in which they lived was dangerous and she wanted to keep her daughter in a safe environment. Sara believed that it was important to have both parents involved in raising their child. The father saw their daughter every other weekend and kept her overnight. He had not been paying child support so Sara went to court to pursue the enforcement of child support payments. As for future expectations, Sara felt that her role as a parent would become easier because her daughter would be increasingly more independent; however, it would also be harder because she would be a teenager and would rebel. Sara hoped her daughter would make good choices.

**Sathi** was a widow with a seven-year-old son. She worked at a nursing home, lived in subsidized housing and had never been on social assistance. Sathi came to Canada eight years ago from Sri Lanka. Although she was a widow, Sathi had separated from her husband shortly before his death. Her mother, sister and two brothers lived in the city and were an important source of support to her. Since she often had weekend shifts at the nursing home, Sathi would leave her son with her mother and sister overnight while she worked. Sathi wanted to move closer to them — they lived at the opposite end of the city — but she couldn’t afford to move out of subsidized housing. Sathi’s son had been in daycare since the age of 20 months and was now in school full-days. She depended on her sister and a friend in the building to care for him outside of school hours while she was at work. Sathi expressed concerns about her son’s emotional health and academic success. He was having difficulty at school and had also been referred to a psychologist for counselling. During the summer months when school was out, she enrolled him in a daycare program, took him to a tutor for academic enrichment as well as to a soccer program and to the local library reading club.

**Tazmeen** was married with two children: a four-year-old boy and a two-month-old girl. Tazmeen was born in Eritrea. The family’s source of income was her husband’s wages from his factory job and her Employment Insurance maternity benefits. Before her daughter was born, Tazmeen worked in a restaurant for minimum wage. She and her husband were able to arrange their hours of work so that one of them was always home with their son. Tazmeen wanted to care for her children full-time until they were both in school; however, she knew that she may have to return to work for financial reasons. She did not want to place her children into a non-parental childcare setting so she planned to return to work only if she and her husband could provide their own (i.e. tag-team) childcare as they had in the past. Tazmeen found the first months with the new baby hard because she has no family nearby. Like all the other research participants, her priority was her children’s education, especially her son’s as he would soon be
starting school. Tazmeen attended community programs several times each week and took him to the library once a week. She also ordered books for him online. Tazmeen was concerned that her son was too attached to her and felt that the programs helped him to develop a sense of independence and socialization skills.

**Tuyen** was a single mother with six children between the ages of eleven and three. She was on social assistance and lived in public housing. Tuyen had immigrated to Canada from Vietnam fifteen years ago. The father of her children was in Canada but had not seen them for about a year and did not pay child support. Tuyen had been under pressure from her social worker to apply for legal aid so that proceedings to pursue child support payments could begin. At the time of the interview, Tuyen was just completing her first year of an adult education program. Four of her children were in full-day school and the younger two attended daycare. Tuyen had been caring for her children on a full-time basis for nearly ten years until a friend told her that she might be able to get subsidized daycare for her two youngest. Despite having been in Canada for fifteen years, Tuyen was concerned that her English language skills continued to be limited. She made five references to her poor English skills during the one-hour interview. Tuyen dreamed of finishing school, becoming a hairdresser, and getting off social assistance. To say that her mornings and evenings were busy would be an understatement. In addition to the daily tasks of provisioning for six children on her own, Tuyen took them to the library and to church at least once per week and volunteered at a community agency.
Appendix E: Recruitment Flyer

Child Care Policy and Low-income Women

You are invited to participate in a research project that examines how child care policies and programs assist and limit low-income women’s strategies of providing care for their children.

The research project is interested in understanding the activities and tasks that women do in caring for their children, and how they make decisions about their child care arrangements.

The goals for this study are to document the endless amount of work that women do to maintain the lives of their children, and to determine how child care policies and programs could be improved for low-income women. The findings of this research will form part of the researcher’s PhD thesis in social work for the University of Toronto.

Do you have children under the age of 12?

If so, you are invited to participate in a 60-90 minute interview.

You will be paid $25.00 and your child care costs will be reimbursed.

In the interview you will be asked questions about the activities and tasks you need to do to provide for your children. You will also be asked about your child care arrangements. The information that you provide will be kept strictly confidential.

If you are interested in participating, please contact:

Judy Cerny (PhD Student)
Faculty of Social Work
University of Toronto
416-919-5839
judy.cerny@utoronto.ca
Appendix F: Interview Guide

1. The first set of questions will ask about your children.
   How many children do you consider yourself to be responsible for?
   How old are they?
   Are they all your biological children? Are any of them step-children or adopted?
   Are there other children you feel responsible for, such as nieces, nephews, grandchildren?

2. The next set of questions will ask about the activities you undertake and tasks you do in caring for your children.
   What activities do you undertake to provide for each of these children? (There will be a detailed prompt list for this question which gives examples.)
   How much time does each of these activities take?
   Are there activities that have been added in the last year or taken away?

3. The third set of questions will be about your childcare arrangements and general childcare programs/policies.
   Do you use any childcare arrangements? Describe them.
   Which of these are most helpful? Which are least helpful?
   How did you make the decision around this childcare arrangement?
   Did you feel you had a choice in this decision?
   Are there childcare policies or programs that you are eligible for? Are there some that you have heard of but don’t use? (There will be a prompt list for this question which gives examples of childcare policies.)

4. The next set of questions will ask about strategies around time, expenditures and resources.
   Prompt questions:
   how do you manage to get everything done?
   are there people who help you?
   how is your child/children’s father involved?
   are there other people that you need to help?
   are there people/agencies you can get help from?
   how do you decide which bills to pay?
   are there odd jobs you can do to make some extra money?
   are there things you do without?
   do you exchange services or help with other people?
   are there risks with any of the things you do to make ends meet?
   are there things some people do to make ends meet that you would not consider doing?

5. The last set of questions will ask about future expectations.
   What aspects of providing for your children do you think will get harder/easier?
   How do you think about the future and your ability to sustain the children that you are responsible for?
Appendix G: Informed Consent

INFORMATION SHEET / INFORMED CONSENT FORM (ORIGINAL ON UNIVERSITY LETTERHEAD)

Research Project: Child Care Policy and Low-income Women

What is the study about? The purpose of this research is to examine how child care policies and programs assist and limit low-income women's strategies of providing care for their children. The study aims to document the endless amount of work that women do to maintain the lives of their children, and to determine how child care policies and programs could be improved for low-income women.

The information you provide will be used to understand the activities and tasks that women do in caring for their children, and how they make decisions about their child care arrangements. The findings of this research will form part of the researcher’s PhD thesis in social work for the University of Toronto.

What is your role as a participant? You are being invited to participate in this research project as a low-income mother of a child/children between the age of 0-12 years and a member of Riverview. If you agree to participate, you will be asked in a 60-90 minute interview to discuss the activities and tasks you need to do to provide for your children. You will be asked questions about: (1) your child/ren; (2) the activities you undertake in caring for your children; (3) your child care arrangements and use of related child care programs/policies; (4) strategies around your time, expenditures and resources; and (5) your future expectations.

You will be given information about the project and an opportunity to ask questions. The interview will be done at Riverview at a time that is convenient to you. You will be paid a $25 honorarium for participation and your child care costs will be reimbursed. The information that you provide will be kept strictly confidential.

Will the interview be tape-recorded? The interviews will be audio-taped if you give your permission. You may ask for the tape recorder to be turned off at any point in the interview. You will receive a copy of the transcript of the tape, or the tape will be handed back to you, if you so wish. If you do not wish to be tape recorded, the researcher will take detailed written notes during the interview instead.

Is participation voluntary? Your participation is completely voluntary and the researcher does not have a connection to any government agency. The results of this study will be shared with others through articles and presentations to various audiences. In all cases confidentiality of each participant will be upheld. The notes/record of your interview will be returned to you upon your request. You are free to skip interview questions or even stop the interview, at which time the researcher will ask you whether your responses to that point may be included in the analysis.
Your decision of whether or not to participate will not in any way affect your access to services at Riverview.

**What are the benefits of participating?** This study can be a benefit in understanding how child care policy helps and limits women's strategies in providing care for their children. Sharing your experiences as a low-income mother will help the researcher recommend improvements to child care policies.

**What are the risks of participating?** The researcher will make sure what you say is confidential in the following ways:

- you do not need to give your full name. You can use a first name only or a different name. You can use a first name only or a different name when you are listing the members of your household.

- a tape recording of the interview will be made if you give your permission. No names or identifying information will be recorded in the research notes on the interview. The audio-tapes and transcripts will only be used by the researcher. No other persons will have access to them. The audio-tapes and transcripts will not have your name or any other identifying information on them. A pseudonym will be used instead. All data will be kept on a secure computer which will be password protected. All transcriptions, audiotapes, notes and other research data will be stored in a secure, locked cabinet. No information will be released or printed that would disclose any personal identity. The tape recording will be destroyed on or before April 30, 2008.

The consent forms are filed separate from any research notes and will be destroyed on or before April 30, 2008.

There is a risk that participating in this interview by talking about the activities and tasks that you do in caring for your children may be stressful in light of your own financial and/or emotional situation. If you find this emotionally upsetting and need further support, a list of counselling agencies will be made available to you.

You are reminded that what you say is confidential but that confidentiality can only be guaranteed to the extent permitted by law. The researcher has an obligation to report to a children’s aid society if they suspect that a child or youth under the age of 16 is or may be in need of protection.

**What happens to the results?** The findings of this research will be disseminated at academic conferences, as well as public policy, and community-based forums in a variety of formats including reports, presentations, articles or newsletters. In all cases, the information will be presented in a way that preserves the confidentiality of participants.
Your signature on this consent form indicates that you understand the nature and conditions of the study, and what it means to participate. You have had your questions answered and you agree to participate in an interview. A copy of this consent will be left with you.

I consent to be interviewed:

____________________________________
Signature                             Date

I consent to be audio-taped:

____________________________________
Signature                             Date

For more information or a copy of the results contact:

**Researcher:** Judy Cerny, PhD Candidate  
Faculty of Social Work, University of Toronto, 416-919-5839, judy.cerny@utoronto.ca

**Thesis Supervisor:** Dr. Sheila Neysmith, PhD Program Director  
Faculty of Social Work, University of Toronto, 416-978-3268, sheila.neysmith@utoronto.ca
Appendix H: List of Codes

Participant Characteristics
  Number of children
  Marital status
  Source of income
  Citizenship/immigration status
  Ethnic background

Provisioning Activities
  Labour market
  Domestic caring labour
  - mental, physical, emotional
  Community activities
  Sustaining health
  Making claims
  Ensuring safety
  For whom they provision

Provisioning Strategies
  Creating and managing resources
  Engaging in risky behaviours
  Creating and recreating oneself
  Negotiating boundaries of responsibility
  Resisting stereotypes and stigma
  Envisioning the future

Childcare Policy
  Daycare fee subsidies
  Child tax benefit
  Universal childcare benefit
  Maternity/parental leave
  Live-in caregiver
  Childcare expense deduction
  Ontario Early Years Centres

Other
  Choice in childcare
  Community agencies and programs
  Constraints
  Riverview
  Father's role
  Housing
  Quotable quotes
Appendix I: Overview of Research Participants and Their Use of Childcare Policy

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Number of children</th>
<th>Age of children (years)</th>
<th>Source of income</th>
<th>Marital status</th>
<th>Childcare arrangement</th>
<th>Ethnicity</th>
<th>Immigration (no. of years in Canada)</th>
<th>Current use of childcare policy</th>
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</thead>
<tbody>
<tr>
<td>Amisi</td>
<td>3</td>
<td>9, 14, 16</td>
<td>Social assistance</td>
<td>separated</td>
<td>older children in full-day school, youngest child in after-school childcare</td>
<td>Egypt</td>
<td>1.5 years</td>
<td>CTB</td>
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<tr>
<td>Ayana</td>
<td>2</td>
<td>4, 6</td>
<td>employment (two-incomes until recently, now only husband’s)</td>
<td>married</td>
<td>mom full-time caregiver</td>
<td>Eretria</td>
<td>10 years</td>
<td>CTB, UCCB</td>
</tr>
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<td>Bahati</td>
<td>3</td>
<td>5, 7, 8</td>
<td>social assistance</td>
<td>single</td>
<td>mom full-time caregiver, older children in school full-day</td>
<td>Eretria</td>
<td>12 years</td>
<td>CTB, UCCB</td>
</tr>
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<td>8, 18, 24</td>
<td>social assistance</td>
<td>separated</td>
<td>child in school; neighbour assists before-after school</td>
<td>Cuba</td>
<td>3 years</td>
<td>CTB</td>
</tr>
<tr>
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<td>0.25, 5, 6</td>
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<td>mom full-time caregiver</td>
<td>Canada</td>
<td>Canadian-born</td>
<td>CTB, UCCB</td>
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<tr>
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<td>2, 12</td>
<td>employment (husband only)</td>
<td>married</td>
<td>mom full-time caregiver</td>
<td>China</td>
<td>4 years</td>
<td>CTB, UCCB</td>
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<tr>
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<td>0.5</td>
<td>social assistance</td>
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<td>mom full-time caregiver</td>
<td>Nigeria (refugee)</td>
<td>8 months</td>
<td>none</td>
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<td>married</td>
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<td>CTB, UCCB</td>
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<td>children in full-day school, mom unemployed and volunteering</td>
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<td>40 years</td>
<td>CTB</td>
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<td>Leena</td>
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<td>4, 8</td>
<td>employment (husband only)</td>
<td>married</td>
<td>mom full-time caregiver of two children, one in school full-day</td>
<td>Afghanistan</td>
<td>9 years</td>
<td>CTB, UCCB</td>
</tr>
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<td>Pseudonym</td>
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<td>Age of children (years)</td>
<td>Source of income</td>
<td>Marital status</td>
<td>Childcare arrangement</td>
<td>Ethnicity</td>
<td>Immigration (no. of years in Canada)</td>
<td>Current use of childcare policy</td>
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<tr>
<td>Magdalena</td>
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<td>20 years</td>
<td>CTB, fee subsidy</td>
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<td>Marian</td>
<td>2</td>
<td>1.5, 3</td>
<td>husband's employment</td>
<td>married</td>
<td>mom full-time caregiver</td>
<td>Guyana</td>
<td>11 years</td>
<td>CTB, UCCB</td>
</tr>
<tr>
<td>Marriba</td>
<td>1</td>
<td>11</td>
<td>social assistance</td>
<td>married</td>
<td>child in full-day school, mom unemployed and volunteering</td>
<td>Pakistan</td>
<td>5 years</td>
<td>CTB</td>
</tr>
<tr>
<td>Maxine</td>
<td>2</td>
<td>2 1/2 (twins)</td>
<td>social assistance</td>
<td>single</td>
<td>mom full-time caregiver</td>
<td>St. Lucia</td>
<td>6 years</td>
<td>CTB, UCCB</td>
</tr>
<tr>
<td>Noorzia</td>
<td>2</td>
<td>0.25, 12</td>
<td>employment (no SA condition of immigration status)</td>
<td>married</td>
<td>mom full-time caregiver of baby, older child at school</td>
<td>Afghanistan</td>
<td>1 year</td>
<td>none (applied for CTB)</td>
</tr>
<tr>
<td>Sandra</td>
<td>3</td>
<td>4 (twins), 9</td>
<td>CTB</td>
<td>married, temporarily separated</td>
<td>mom full-time caregiver of twins, older child at school full-day</td>
<td>Canada</td>
<td>Canadian-born</td>
<td>CTB</td>
</tr>
<tr>
<td>Sara</td>
<td>1</td>
<td>11</td>
<td>recently social assistance, previously employment</td>
<td>separated</td>
<td>child in full-day school, mom unemployed and volunteering</td>
<td>Guatemala</td>
<td>Canadian-born</td>
<td>CTB</td>
</tr>
<tr>
<td>Sathi</td>
<td>1</td>
<td>7</td>
<td>employment</td>
<td>widowed</td>
<td>child in full-day school and after-school program, mom works full-time</td>
<td>Sri Lanka</td>
<td>8 years</td>
<td>CTB</td>
</tr>
<tr>
<td>Tazmeen</td>
<td>2</td>
<td>0.25, 4</td>
<td>husband's employment; maternity leave benefits</td>
<td>married</td>
<td>mom full-time caregiver, on maternity leave</td>
<td>Eritrea</td>
<td>10 years</td>
<td>CTB, UCCB, maternity leave</td>
</tr>
<tr>
<td>Tuyen</td>
<td>6</td>
<td>3, 4, 7, 9, 10, 11</td>
<td>social assistance</td>
<td>separated</td>
<td>children in licensed day care and school, mom attending adult education program</td>
<td>Vietnam</td>
<td>15 years</td>
<td>CTB, UCCB, fee subsidy</td>
</tr>
</tbody>
</table>