

Why public early childhood education and care? ^[1]

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Description:

The Canadian Union of Public Employees (CUPE), along with its partner advocates, has long opposed privatization in child care. CUPE believes public funding is the way to go-child care programs should not have to rely mainly on parent fees, vouchers or subsidies. As well, there's no place for profit-making in child care. For-profit child care-a growing sector-is not consistent with high quality programs, and good wages and working conditions for staff.

Now, the union is going a step further. As part of its national anti-privatization campaign, CUPE is advocating for an early childhood education and care (ECEC) system that is both publicly funded and delivered. Excellent community-based non-profit child care programs have been the back-bone of providing child care services in Canada for decades. Overall, how-ever, public delivery is most likely to benefit the most children and families.

CUPE has also launched a cross-country tour promoting publicly-delivered early childhood care and education - a move that would benefit children and parents, boost the economy and stem the tide of for-profit child care. The tour kicked off in Fredericton, NB on Oct. 27, and hits Halifax, NS on Oct. 29. See related link for more details on dates and public early childhood education and care case studies.

Related link: Materials from CUPE's child care anti-privatization campaign ^[3]

Region: Canada ^[4]

Tags: advocacy ^[5]

public opinion ^[6]

Source URL (modified on 27 Jan 2022): <https://childcarecanada.org/documents/research-policy-practice/09/11/why-public-early-childhood-education-and-care>

Links

[1] <https://childcarecanada.org/documents/research-policy-practice/09/11/why-public-early-childhood-education-and-care> ^[2]

https://archive.cupe.ca/updir/Why_public_early_childhood_education_and_care.pdf ^[3] <https://childcarecanada.org/documents/research-policy-practice/11/01/materials-cupes-child-care-anti-privatization-campaign> ^[4] <https://childcarecanada.org/taxonomy/term/7864> ^[5]

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