4 A review of selected literature on child care auspice in Canada and internationally

This section reviews selected research and analysis on child care and auspice. It is not exhaustive but focuses on selected key research and analysis available in peer-reviewed and significant "grey literature" published sources. There are many additional position, advocacy and policy papers, news stories, explanatory documents, further research, and other materials on this topic that are not included here. Additional literature reviewed for this paper is listed and described in Appendix 2.

This section builds on a compilation of literature published in 2011 by the Childcare Resource and Research Unit. It includes earlier research where it is appropriate and significant, especially in Canada, where recent research is limited. The material has been organized under two main headings: Canadian research[9], which is mostly related to child care quality, and international literature, much of which focuses on child care policy and structures at a systems level.

9 Recent Canadian research that includes substantial discussion of the issue of auspice but with a main focus on broader issues includes: Beach, J. (2020). An examination of regulatory and other measures to support quality early learning and child care in Alberta. Muttart Foundation; Prentice, S. (2016). Upstream childcare policy change: lessons from Canada. Australian Educational Leader, 38(2), 10; Cornelisse, L. C. (2015). Organizing for Social Policy Change: Child Care Policy Advocacy in Canada (Doctoral dissertation, Carleton University); Pasolli, K. E. (2015). Comparing child care policy in the Canadian provinces. Canadian Political Science Review, 9(2), 63-78; Turgeon, L. (2014). Activists, policy sedimentation, and policy change: The case of early childhood education in Ontario. Journal of Canadian Studies, 48(2), 224-249.

Canadian research

As noted, a main focus of Canadian research on auspice has been on program quality. Quality is an important consideration in child care, as child development research shows conclusively that "quality matters" – good quality benefits children while poor quality may be detrimental (see, for example, Shonkoff & Phillips, 2000). Thus, research from Canada, the United States, New Zealand, the United Kingdom, the Netherlands, and Australia that shows quality differences between for-profit and non-profit child care is of interest. These differences hold whether quality is measured with observational tools such as the Early Childhood Environmental Rating Scale (ECERS) that measure "process quality" or assessed using structural predictors of quality. Mainly, research examining child care variables across multiple jurisdictions shows that not-for-profit child care is likely to be of better quality than for-profit child care. Research suggests that auspice plays a key role in determining whether program quality will be higher or lower through its impact on wages, working conditions, ECE training, staff turnover, staff morale, staff/child ratios and group size.

Research on child care across multiple jurisdictions shows not-for-profit child care is likely to be of better quality than for-profit child care. Auspice plays a key role in higher or lower program quality through its impact on wages, working conditions, ECE training, staff turnover, staff morale and staff/child ratios.

Among Canadian studies, several stand out. A 2004 study by economists Cleveland & Krashinsky used the Canada-wide dataset from *You bet I care!*, the sole Canadian study linking cross-Canada data on the child care workforce to structural and process quality[10]

10 *The You bet I care!* study, published in 2000, collected workforce data in all provinces/territories and process quality data in seven provinces/territories including New Brunswick, Quebec, Ontario, Saskatchewan, Alberta, British Columbia, Yukon..

(Doherty et. al, 2000). Cleveland & Krashinsky (2004) calculated ECERS[11] scores in non-profit centres to be 10% higher in quality than for-profit centres, with for-profit centres overrepresented among lower quality centres. They concluded, "the positive impact of non-profit status on quality is persistent, even when a wide range of variables is held constant" (Cleveland & Krashinsky, 2004: 13), finding that non-profit centres did better on all measures, with greater auspice differences for infants and toddlers. The greatest differences were on measures and sub-scales concerned with children's personal care, use of materials, activities and teaching interactions linked to language development, teacher interactions with children, staff communication with parents and supporting the staff needs. When other factors associated with quality such as jurisdiction, child population, financial resources, and higher staff education were taken into account, non-profit centres still scored higher.

In another analysis of the *You bet I care!* data, Doherty et al. (2002) examined two hypotheses offered to explain quality differences by auspice: 1) non-profit centres have greater access to government funds and low-cost facilities, therefore have more resources to provide quality programs, and, 2) non-profit and for-profit operators have different organizational goals, leading to between-sector differences in organizational structures, behaviours, and characteristics. This analysis also explored whether centre quality is influenced by the interplay between auspice and provincial/territorial context. It concluded that for-profits' lower quality ratings do not simply result from poorer access to financial resources. Quality is affected by behaviours such as hiring more untrained staff, paying poorer wages, generating higher staff turnover and lower morale, as well as program characteristics such as poorer ratios (Doherty et al., 2002).

11 The Early Childhood Education Rating Scale (ECERS) is a widely used observational tool that rates a series of activities in a child care room.
See https://ers.fpg.unc.edu/scales-early-childhood-environment-rating-scale-third-edition.

Cleveland et al. analyzed four Canadian child care datasets and found "strong patterns of non-profit superiority in producing quality child care services across all the data studied" (2007: 6). Cleveland also analyzed City of Toronto Assessment for Quality Improvement[12] (AQI) data from centres providing subsidized child care (2008). Again, he found non-profit quality consistently higher than for-profits, while municipal centres showed the highest quality across all age groups. Cleveland noted "clearly, the differences in input choices (wages, staff training, use of funds) of non-profit centres contribute to their quality advantage over commercial centres" (2008: 9).

In Varmuza's (2020) PhD dissertation, City of Toronto Assessment for Quality Improvement (AQI) data on municipally operated, non-profit and for-profit centres providing subsidized child care was again examined, in this case, the stability of quality ratings of 1,019 preschool classrooms over three years. This analysis found significantly lower staff wages and lower proportion of staff with ECE credentials in for-profit centres. Comparison of the quality scores across centre types showed non-significant differences between non-profit and for-profit centres in the baseline year but significant differences between the municipally operated centres and the others. The author noted a caveat that "the data used…was restricted to centres with agreements to provide service to subsidized children[13] and represent only about 70% of all preschool-age programs in Toronto" (Varmuza, 2020: 92).

A number of Quebec-specific studies have compared quality in non-profit and for-profit centres. An overview summary of the body of Quebec research on quality issues was summarized by two Quebec child care quality researchers: "Quality levels vary significantly according to the type of child care setting: early childhood

12 The AQI is the City of Toronto's centre quality rating system.
13 Centres must achieve a specified City of Toronto quality rating to be granted a subsidy agreement, so it should be assumed that the group of centres used in Varmuza's research did not include centres that fell below this quality criterion.

centres generally offer better quality services than for-profit" (Japel & Whelp, 2014: 60).

The *Etude longitudinale du développement des enfants du Québec* (ELDEQ), using the ECERS, and the *Grandir en qualité*, using a Quebec-developed four-point quality scale, both found Quebec's for-profit centres offered consistently poorer quality than non-profits (Japel et al., 2004, 2005; Drouin et al., 2004). The *Grandir en qualité* study showed for-profit child care not only was poorer quality overall — scoring lower on all sub-scales — but lower on global evaluations as well. Drouin et al.'s (2004) study, like Cleveland & Krashinsky's (2004), also found for-profit centres to be greatly over-represented among "unsatisfactory" centres; for-profit infant care was more likely to be of unsatisfactory quality at eight times the rate of non-profits.

A study conducted by the *Institut de la Statistique du Québec* (ISQ) in 2015 is of particular interest because it was conducted following the development of the second tier of child care centres. As this paper discussed earlier, in 2008, Quebec began to offer a "natural experiment" for comparison between its operationally funded, set-fee, mostly non-profit *centres de la petit enfance* (CPEs) and a second "market" tier of child care centres–all for-profit, not operationally funded, not required to charge set fees, and relying on a tax credit to partly reimburse parents for fees paid. The ISQ study compared the two sectors. It rated 45% of non-profit centres with provincially set fees (CPEs) as "good or excellent", while 4% were "inadequate". In contrast, 10% of for-profit centres (*garderies*) used by full fee[14] parents reimbursed through a tax credit were rated "good", while 36% were rated "inadequate". Regarding compliance with educator training regulations: 87% of non-profit centres complied with a Quebec regulation requiring ECE training for 2/3 of centre staff

14 In Quebec, these are called "non-reduced contribution" centres. They are publicly funded through a tax credit reimbursement to parents rather than through operational funding and are not required to charge parents a provincially set fee ($8.35 a day in 2019).

but only 18% of full fee for-profit centres were compliant with this regulation (Institut de la Statistique du Québec, 2015).

In a 2017 analysis of Alberta regulatory issues, Richardson examined compliance with regulations based on data from an online tool posted by the Alberta government showing results of licensing inspections. Her research compares BrightPath with similar size non-profit child care centres in the community. Richardson's findings showed the for-profit centres were more likely to be reported as non-compliant with regulations, licensing inspection visits and critical incident investigations. Compared to the non-profit centres, BrightPath centres had "twice as many licensing inspection visits and four times as many non-compliances with provincial child care regulations; BrightPath's number of critical-incident investigations was over twice as high (31 investigations for BrightPath to 14 for the comparators). Even more striking, its complaint investigations were ten times more numerous (41) than those of non-profit centres (three)" (Richardson, 2017: 120).

Key differences between non-profit and for-profit child care have been identified with regard to child care workforce issues, where non-profits invariably are rated better: wages, benefits, working conditions, staff turnover, morale, satisfaction and education levels. Cleveland & Hyatt examined the effects of several variables including education and tenure, as well as auspice on wages. Their analysis found "the wage premium in different types of non-profits varies from 7% - 24%" (2000: 1). In addition to the data on the child care workforce generated by the 2000 *You bet I care!* Canada-wide study, a 2013 follow-up study titled *You bet we still care!*, also provided relevant data on the child care workforce across Canada. Flanagan et al.'s (2013) study collected data on structural variables but did not include process quality measures as the earlier study had. Doherty et al.'s (2000) study had found staff turnover rates in the for-profit sector to be almost double the rate for the non-profit sector across three teacher positions analyzed: assistants, teaching staff and supervisors (the 2013 study did not include data on turnover rates per se). Both studies found greater job satisfaction among educators in the non-profit sector. Flanagan et al.'s (2013) report found for-profit centres had greater challenges recruiting qualified staff and reported a somewhat larger average number of qualified staff leaving the centre compared to non-profit centres.

Matthew (2013) also used the *You bet I care!* dataset for her dissertation on the workforce in Canadian for-profit, non-profit and co-operative centres. This research supported previous findings regarding workforce differences by auspice and found higher wages, higher reported levels of workplace satisfaction, formalization (the extent to which roles and responsibilities are standardized and explicit), and better overall organizational influence in non-profit than in for-profit centres (Matthew, 2013).

In a 2018 Vancouver-based survey, Forer found both quality differences and differences related to the child care workforce between non-profit and for-profit auspice. Noting a caveat that for-profit centres had much lower response rates than non-profits, the Vancouver study found that staff in for-profit programs were "less well educated, had less ECE-related experience, were relatively underpaid (for those working with children only), and were less likely to be offered a variety of benefits, compared to those working in non-profit programs" (Forer, 2018: 8). Differences included not only hourly wages (especially when broken down by job roles), education, benefits and certification but differences by age (lower median wage, job mobility and tenure) in for-profits.

In a study conducted for a master's thesis, Romain-Tappin (2018) interviewed Ontario early childhood educators who had worked in both for-profit and non-profit centres. The participants reported receiving lower wages, poorer working conditions and recognition in for-profit centres, and reported the centres were more likely to be "unhappy" places. This study, although small, is consistent with other research in Canada and elsewhere (Romain-Tappin, 2018).

Finally, Macdonald & Friendly's 2021 report on fees in 37 large Canadian cities found that of the cities surveyed, almost every city showed higher median fees in for-profit centres—in some instances substantially higher—despite equivalent public (provincial/territorial) funding to the two. For example, the largest spread, in Surrey, B.C, for-profit centres charged 60% more than non-profits. In the Alberta cities of Calgary, Edmonton and Lethbridge, for-profit centres' fees were 36% to 55% higher than non-profits. In each of the five Quebec cities included, parents using for-profit centres were found to be paying several times more than parents in the non-profit *centres de la petit enfances* (CPEs), even after reimbursement through the child care tax credit system was factored in (Macdonald & Friendly, 2021).

Overall, these selected studies, and others, from Canada's body of research examining the relationship of centre ownership to child care quality characteristics have found a variety of differences using different methods over a number of years.

International research and analysis related to child care auspice

In addition to Canadian studies on quality associated with auspice, there have been many studies addressing auspice issues in other countries. European studies tend to be policy analyses, although there are some empirical studies of quality and inequality issues among them, especially among the comparative studies included. This section organizes international research by country and includes the main OECD countries where child care follows a market model – the U.S., the U.K., Australia, New Zealand and the Netherlands. Each section includes a brief description of the countries' early learning and child care landscapes, with a small number of key studies included. A section reviewing a larger number of comparative studies follows.

United States

The United States is a federation in which each of the 50 states has the main responsibility for education and child care, although there is a National Department of Education. It has never had a national child care policy but has had some national presence in data collection, some funding and a 50-year-old national compensatory education program, Head Start. The U.S. has long had a mixed-sector child care market, with more than 70% of centres reported to be for-profit, and one-third operated by for-profit chains that are often publicly traded (Sosinsky, 2012). In 2020, the twelve biggest for-profit child care providers in the U.S. provided child care for more than 850,000 children in 5,900 centres (Child Care Information Exchange, 2020). Before 2011, a number of older key studies had found quality differences between for-profit and non-profit child care, including, for example, the National Child Care Staffing Study (Whitebook, 1989), while Sosinsky (2007) found quality differences between corporate chains, smaller for-profits and non-profits (Sosinsky et al., 2007).

A 2012 book chapter by Laura Sosinsky describes how the expansion of for-profit child care services has been predicated on low wages, low early childhood training requirements, low public support for social services, and a large pool of female workers, many racialized (2012: 138). Working in child care is remunerated very poorly in the United States, with for-profit services generating a profit by reducing their largest budget item – staff wages. Lower income families access services with lower fees, sometimes weakly regulated, that they are able to afford. Without public funding, or limited public funding, these low fee services also pay low staff wages, thus ensuring lower staff quality, and lower quality of care. This creates “unequal access to higher quality child care”, higher-income families are better able to select and afford services with more qualified and well-remunerated staff (Sosinsky, 2012: 139).

United Kingdom

The United Kingdom, England, Scotland, Northern Ireland, and Wales each has its own approach to child care. However, they have generally followed similar trends (Penn, 2013). Child care improvement has been a recurring item on the Scottish political agenda through several elections and separation referenda (Cohen, 2014).

In the last twenty years, the United Kingdom has heavily promoted the for-profit child care sector within a market based system in which the national government has played the role of "market manager" since the introduction of a voucher system in 1998 (Mclean, 2014). The 2005 *Child Care Act* further entrenched a market model, in which demand-side funds for child care were linked to individual parents rather than to supply-side operating funding (Penn, 2013). According to Penn (2013) and Lewis & West (2017), the U.K. government incentivized private providers coupled with deregulation in order to meet their goals for rapid expansion instead of supporting local public providers to meet targets for provision. For-profit chains were incentivized, with the largest 20 nursery chains having a market share of 10% in 2014 (Lewis & West, 2017). A 2020 report from the New Economics Forum reported 84% of child care supply being provided by private providers, "as a consequence of government policies with the express intention of accelerating the marketization of childcare" (Hall & Stephens, 2020: 3).

Much of the analysis of the United Kingdom's child care provision has been centred around the interplay between marketization, for-profit enterprises and deregulation. Reducing regulations has been a priority of the U.K. government in recent years, with the key minister stating it is not for government to say that one form of child care is better than another, nor to prescribe wage rates or quality of staff (Lewis & West, 2017). Lewis & West (2017) described how regulations have been conceptualized by the government primarily as an impediment to their expansion goals, not as a safeguard or support for quality. Deregulation efforts have supported the expansion of large for-profit providers, who welcome the opportunity to cut "red tape" and associated costs. In a market system with high demand, for-profit services treat "quality" as a marketing feature in which they can promote their elective quality accreditation as a value-added for customers, while lobbying against efforts to improve quality through regulation (Penn, 2011). Hall & Stephens noted that "the current approach to child care means that the state is significantly subsidising the private sector. The likely trajectory of policy is that this subsidy will increase" (2020: 4).

Australia

Australia is a federation with six states and two territories; responsibility for child care is at the state level but the national government typically plays a key policy, funding and data role. Australia has a national department of education, which includes early childhood education and child care.

Australia provides an especially well-documented case study which is similar in many ways to other jurisdictions regarding to the outcomes of a thoroughly marketized child care system that intentionally encouraged for-profit provision. (The Australia case study is also described in this paper's section on the history of for-profit child care in Canada). Beginning in 1988, the national government in Australia opened public funds to the for-profit child care sector (Logan et al., 2012; Brennan, 2008a). This spurred the rise of large publicly traded for-profit chains, which grew exponentially, mostly through acquisitions of smaller chains and single centres. Newberry & Brennan (2013) analyzed how ABC Learning created a business model in which child care was divided into property investors which owned the facilities and operating companies, such as ABC, which leased the properties and ran the child care services.

There were, in addition, multiple ancillary companies specializing in everything from construction to cleaning, to ECE training. All parties sought increasingly high profits and returns on investment, resulting in the property investors increasing rent, and the operating companies increasing parent fees and reducing core service costs. The firm also had close linkages with the property trusts which owned the buildings, and had secured exclusive contracts so purpose-built facilities could not be leased to other providers. This monopolization was enabled by Australia's government policies, which encouraged corporate risk diversification, and by the child care subsidy system, which had shifted to financing child care through demand-side payments to parents. These researchers noted that funds were funneled into corporate profits instead of to lower fees or to enhance quality services (Newberry & Brennan, 2013).

Press et al (2018) discussed how neoliberalism in early childhood education care has positioned Australian parents as consumers and how this has impacted the child care market. Irvine & Farrell (2013) noted that at a time when most countries saw a large increase in the demand for child care spurred by an increase of female labour force participation, Australia "turned to market theory and New Public Management principles to inform ECEC policy" (Irvine & Farrell, 2013: 1). Thus, the Australian government positioned child care as a commodity applying a business model to the child care system, which ultimately eliminated much of the care from the system. The results were far from the "increased choice for parents, reduced government expenditure, reduced fees, improved quality and diversity" hoped for by the Australian national government, as Brennan reported in a Canadian presentation (2008b).

TABLE 2 Government goals in funding for-profit child care and outcomes

Goals	Outcomes
More spaces	More spaces
Increased choice for parents	Diminished choice
Reduced government expenditure	Increased government expenditure
Reduced fees	Fee increases
Stimulation of private sector	Many driven out of business
Increased diversity of provision	Increased uniformity of provision
Increased quality	Downward pressure on regulations

Source: Brennan, 2008b.

New Zealand

In New Zealand, child care services are operated in a mixed-model market-based system with large corporate chains, sometimes imported from Australia, playing a significant role in provision. Linda Mitchell, a key New Zealand researcher, has conducted several studies showing the negative effects of this on child care quality and analyzed how for-profit services have been "encouraged under a market approach to provision, generous government subsidies, and few constraints on how funding can be spent" (2019: 85).

After decades of expanding for-profit services, the current government's Minister of Education identified "turning the tide away from a privatised, profit-focused education system" in the Terms of Reference to New Zealand's Strategic Plan for Early Learning (Goulter, 2018). Since then, New Zealand's Labour government has released an Early Learning Action Plan, which includes policies to improve educator remuneration and retention and increase ratios and staff qualifications but has taken no specific actions on reducing for-profit provision (Ministry of Education New Zealand, 2019).

Mitchell has noted that this declaration "opens the door for rigorous and research-based analysis of the problems with a market approach and for-profit provision and a move towards public responsibility" (Mitchell, 2019: 78), and there have indeed been several notable pieces of research and analysis on the topic, for example, Gallagher, 2018 and 2020, and Neuwelt-Kearns & Ritchie, 2020. Neuwelt-Kearns & Ritchie, writing from an anti-poverty perspective, have made a number of concrete recommendations, noting:

> Private for-profit providers are less likely to provide quality services across a range of indicators, including teacher qualifications, workloads and retention, teacher-to-child ratios, and cultural responsiveness. The profit incentive inherent in the private and corporate models means that the financial gain of investors, rather than the rights and needs of children, are prioritized. Poor quality services are more likely to be located in lower socioeconomic areas, which is troubling when we consider that gains from access to quality ECE are greatest among children from low-income households (2020: 17).

Mitchell has described policy levers that can "turn the tide" on for-profit care provision, including staff pay requirements, parental fee caps and increased financial accountability to government and parental bodies (2019: 85).

One of the effects of the privatization of the child care sector in New Zealand and elsewhere has been the emergence of child care property as a financial asset and opportunity for real estate investment. Gallagher (2020) described how in New Zealand, high urban land values, commercial lease conditions for child care property and the perceived security of the investment due to government funding to private child care services create conditions where "mom and pop investors" see child care real estate as a passive investment opportunity. The assetization and ultimate financialization of child care is only possible in a market-based system, and has consequences for the sector's sustainability and ability to provide quality child care for children, as Gallagher explained; conceptualizing child care properties as an investment opportunity creates rental contracts that seek to extract increasingly high levels of rent to make a profit for the owner—to the detriment of all child care providers and the system at large (Gallagher, 2020).

The Netherlands

In the mid 2000s, The Netherlands engaged in a process of privatizing child care. The 2005 *Child Care Act* introduced a national demand-side subsidy and deregulated child care programs under a parent "choice" rubric[15]. According to Akgunduz & Plantenga (2014a), these changes were intended to allow parents more choice to be able to select their child care arrangement, which could now be subsidized regardless of type, using a child care benefit demand-side payment (2014a). Child care availability and use increased after 2005 but process quality decreased over time as for-profit centres replaced public and non-profit provision and use of organized child care increased across socioeconomic groups but use patterns differed by income levels (Akgunduz & Plantenga 2014b). Noailly et al. (2007) also noted that privatization increased inequality. Compared to the period before the new *Child Care Act*, by 2006, child care services had shifted to residential areas with higher purchasing power, where privatized services had financial incentives to open to meet high demand. These researchers found the increase in child care provision to be mostly due to the large expansion of for-profit services and child minders, with closures observed in non-profit services operating in lower-demand (often low income) areas. A 2014 study by Helmerhorst et al., found a "significant and substantial decline in quality compared to 2005, with 49% of the groups now scoring below the minimal level" (2014: 1). Akgunduz and Plantenga (2014a), however, have argued that the decline of quality in Dutch child care centres was

15 An international seminar on changes to Dutch child care described this as "introducing a light touch on regulation" (See Childcare legislation in The Netherlands).

due to rapid speed of expansion post-2005, not necessarily a result of privatization. A comparative research study of the Netherlands and the U.K. by Eva Lloyd (2009) examined the negative impact of the market on child care accessibility, sustainability and quality in both countries. In 2021, a government scandal centred on the government child care benefit program caused the right-of-centre coalition government in the Netherlands to resign.

Comparative research

Research that "aims to make comparisons across different countries or cultures" has been used to examine child care auspice issues across countries, especially as many researchers have identified that privatization has been increasing even in non-market child care countries. Urban and Rubiano (2014) point out that there is an increasing trend towards privatization within the global trend of neoliberalism across countries, with negative effects on accessibility and quality. Many of the comparative analytical research studies compare and contrast various countries[16] experiences of child care policy. These studies have examined the impact of the market, the influence it has had on the development of for-profit child care and the effects on services and families.

Mahon et al. (2012) studied two Nordic countries (Finland and Sweden) and two liberal-democratic countries (Australia and Canada) to "find points of convergence around themes at the level of policy discourse and continued diversity in the way these ideas are translated into actual policies. In other words, convergence is mediated by institutions and political realignments" (2012: 1). Thus, although for-profit child care has made incursions in Finland and Sweden, and social investment strategies are part of the discourse in Canada and Australia, the comparative analysis "reveals fault lines that prevent and interrupt change, while at the same time recognizing political and economic processes that could produce seismic shifts" (Mahon et al., 2012: 7).

In a comparative mapping of European countries, Penn (2014) created four categories to describe European countries' approach to private provision. The first category includes "countries which actively promote private provision and have relatively lax or narrow regulations" (Penn, 2014: 151) such as the United Kingdom. The second category is made up of countries with near-universal state provision which discourage any private enterprise child care. The third is made up of countries that allow private providers but with strict regulatory conditions, such as Germany, Norway, and Austria. The final category are countries that have not taken an active role for or against the private sector, mainly accession countries[16] and Southern Europe. Penn notes how marketization and for-profit care are widespread globally, but that Europe, excluding the U.K., still had "negligible" for-profit child care in comparison to market child care countries (Penn, 2014).

In Brennan et al.'s (2012) study of Sweden, England and Australia, the authors found that all three countries to a greater or lesser extent, encouraged a narrative of "individual choice". The authors noted that Australia had moved in an extreme way towards this narrative compared with Sweden, with parents viewed and treated as consumers of for-profit services in Australia and England (Brennan et al., 2012). Some researchers have noted that treating parents as consumers, using "choice" rhetoric enables the creation of private systems that do not support equitable access to care services. In a comparative study of inequality of access to child care in Germany, Sweden and Canada by the Deutsches Jugendinstitut, Canada's market model, with its considerable for-profit provision in some regions, was detailed by Japel & Friendly (2018), in comparison with Germany (Scholz et al., 2018) and Sweden (Garvis & Lunneblad, 2018).

According to a comparative study by Yerkes & Javornik (2018) of three public and three market child care countries, provision of child care is primarily public in Iceland, Slovenia and Sweden.

16 Accession countries are those that are in the process of joining the European Union.

These three countries have supported the development of accessible, affordable, available, and high quality early childhood education and care (Yerkes & Javornik, 2018). By contrast, these authors note that countries such as Australia, the Netherlands and the United Kingdom with market child care provision create opportunities for for-profit child care to emerge and thrive. With a market system, these countries have child care systems deemed "problematic" by the authors, who outline their accessibility and availability problems, as well as higher costs and lesser quality.

In summary, research from Canada and many other countries shows many differences between public, non-profit child care services and those operating on a profit-making basis across regulatory and financial environments on important dimensions including quality, components of quality, the child care workforce, equity and parent fees.