

# Inclusion Quality in the Time of COVID

The Impact of the Pandemic on  
Children with Disabilities in Child Care in Canada



Donna S. Lero  
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**HIGHLIGHTS**



# Invitation

Dear Early Childhood Educators, Directors, Policy Makers, Trainers, Advocates, Parents and other interested people:

Here is “Highlights” from *Inclusion Quality in the Time of COVID: The Impact of the Pandemic on Children with Disabilities in Child Care in Canada*, the latest book from Specialink: The National Centre for Early Childhood Inclusion.

Until recently, child care has been a service on the periphery of federal policy and inclusive child care has been on the periphery of that periphery. In 2017, the Canadian federal government made child care a priority and made inclusion a key priority in child care. It meant, from now on, that the effective inclusion of children with special needs would be on the table as a policy issue — and with that, child care in Canada was on the upswing.

Then in March 2020, everything changed with COVID-19 being declared a pandemic and all the restrictions that came with that designation. The pandemic challenged all of our practices, made us reconsider how we continue to successfully include children with disabilities in child care.

Research in this book delivers detailed elements of the changes created by the pandemic. It also provides suggestions for dealing with future pandemics in light of our continuing goal of fully including children with disabilities in child care and early education.

Copies of the complete book called *Inclusion Quality in the Time of COVID: The Impact of the Pandemic on Children with Disabilities in Child Care in Canada* can be downloaded at no cost at [www.specialinkcanada.org](http://www.specialinkcanada.org).

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# IN THE BEGINNING . . .

Before COVID-19, it was a struggle to include children with disabilities in child care in Canada, but the country was on the upswing. Under the *Canada-wide Early Learning and Child Care* agreements [CWELCC] the provinces and territories are required to include children with disabilities. However, the COVID pandemic brought new challenges such as children's health and behavioural issues, parental fears and reduced staff that closed the child care doors on many of those children.

The first confirmed case of COVID-19 appeared in British Columbia in January 2020. By March of 2020, all of Canada's provinces and territories declared states of emergency and, to varying degrees, began to implement school and daycare closures, prohibitions on large gatherings, and closures of non-essential businesses. Public health agencies recommended social distancing, isolation, masks, and rigorous cleaning of surfaces and materials that might enable the virus to spread. Vaccines were not yet available and there was no way to know if children might be at particular risk of serious illness and death. It was a terrible time for all, marked by distress, uncertainty, and isolation from the very people and places that provided support to children and families. Nothing was normal. News of serious rates of infections, hospitals being overwhelmed, and deaths heightened people's fears for themselves and their loved ones.

Very quickly governments realized the need for child care for children whose parents were essential workers, such as health care workers, first responders, and those who worked in grocery stores, and requested that centres provide such care. Consequently, while some centres closed completely, others remained open to provide care and comfort to children and parents they previously did not know, under far from normal circumstances. The federal and provincial governments and local public health agencies provided guidelines and protocols at various times and provincial governments set limits on the number of children who could attend during the rest of 2020. Centre directors experienced low enrollments, staff who were uncertain about whether they could or should continue working and, typically, inconsistent or changing information from authorities with no direct line to anyone they could reach out to for more specific information or support.

Financial assistance for centres to operate and comply with stringent sanitation requirements was rolled out, as were financial supports to

businesses and to workers displaced from their jobs. Children, families and staff were all subject to new rules that diverged from centres' normal practices. Parents were not permitted to enter children's classrooms (or, in some cases, even the centre's building) and consequently, many had no interactions with their child's teachers when dropping off or picking up their child. Efforts to promote physical distancing meant that normal group activities (circle time, dramatic play, use of sand tables and water tables, sharing materials) were limited.

The data in this book supports the conclusion that the needs of children with disabilities—individually and as a specific group—largely became invisible at this time.

Over time, centres were gradually given permission to enroll more children and to welcome back families who had previously used their services. While masking, rigorous cleaning, and practices that limited social interactions and sharing materials continued, ECEs and directors did their best to provide a safe and supportive environment in circumstances that continued to be challenging and, often, at odds with best child care practice. By June of 2020, the number of new cases waned as the first wave of the COVID pandemic subsided. Many centres reopened, at least partially, although enrollments remained lower than before as some parents were able to work from home or did not return to their previous employment; others remained concerned about their children's health and potential exposure to the virus in group care settings. At the same time, many centres experienced difficulty hiring staff to replenish their full complement, which also contributed to lower enrollment.

The Pandemic was not yet over in the summer of 2020. Larger second and third waves of COVID cases led by variants of the original virus were experienced in the fall of 2020 and in March/April of 2021. School and centre lockdowns occurred periodically in 2021 and 2022, especially in Ontario and Quebec. On the positive side, in August 2021, the COVID-19 vaccine was approved for children from 6 months to 5 years of age.

As of January 2025, based on recorded numbers of cases and hospitalizations, Canada had experienced seven waves of the pandemic. Mercifully, the latter waves were less serious since vaccines became available. While still a potential concern, the acute period of Pandemic disruptions and distress was now in most people's rear-view mirror. What remains are the longer-term impacts of those disruptions and distress as described in this book by centre directors and parents who note the continuing effects of COVID on children's development and on children's and parents' mental health, as well as longer-term impacts on the child care workforce.

As Canada has come to grips with the challenges of COVID-19, we have seen extraordinary efforts on the part of Early Learning and Child Care (ELCC) front-line staff to continue to meet the challenges of providing quality services. We have also seen — because of a variety of limitations including funding, spatial restrictions, and numbers of qualified participants — that when child care is under pressure, it is the children with disabilities who are the last to be included.

The literature regarding COVID and child care underlines these points. Its general focus is on preparedness and planning, social distancing strategies, cleansing and disinfecting rules regarding feeding, sharing and so forth. The literature reveals little regarding adaptations and accommodations required to include children with disabilities; the essential data and discussion on the status of such inclusion or exclusion has not been captured. No useful set of recommendations for including children with disabilities in ELCC during the pandemic has been published. Will these children with disabilities, often with single parents who need employment, be left out again? This book takes up those issues in the closing recommendations based on what our interviews with parents and directors have taught us.

Happily, prior to the pandemic, we at SpeciaLink developed a baseline to work from—the 2020 ESDC-funded project called *Inclusion Quality: Children with Disabilities in Early Learning and Child Care in Canada*. As detailed in that report, in 2019 and 2020, using the *SpeciaLink Quality Inclusion Scale*, we included observations regarding the quality of inclusion in 67 ELCC classrooms in 5 provinces—a baseline prior to the invasion of COVID-19.

This book, *Inclusion Quality in the Time of COVID*, takes the next critical step regarding our knowledge of the inclusion of children with disabilities in light of the COVID pandemic. It brings up to date the effects of COVID on children with disabilities who were either in ELCC programs and early elementary school or denied those experiences during the pandemic period. And it provides recommendations for improving the quality while preparing for the next pandemic.

## GOALS AND OBJECTIVES

Our main goals in this project were:

- To understand how the COVID-19 Pandemic affected the capacity of child care centres to support young children with disabilities, and
- To identify those policies and practices that can be employed now and, in the future, to ensure inclusion capacity and inclusion quality in Canada’s early learning and child care centres.

To do so, we undertook in-depth interviews with centre directors to understand what has happened and is happening in inclusive child care centres. Our interviews and the analyses that follow use two lenses and three time periods.

- One lens is a specific focus on inclusion practices and experiences in child care centres and directors’ observations of how children with disabilities have been affected by the Pandemic and are faring currently.
- A second lens is on child care centres themselves and the early childhood educators who work in them — with a focus on experiences and resources that are critical for maintaining quality early learning and care experiences for all children, as well as children with extra support needs.

This study allows us to understand what happened/is happening at three points of time:

- The period starting in March 2020 when the Pandemic was declared a national emergency, requiring immediate adaptations to ensure public health while maintaining essential services, as well as the time that followed as systems came back on stream, but with changes to reduce the likelihood of further infection (roughly lasting until about the end of 2021).
- A middle period, defined by the child care directors as a gradual, if not full, return to pre-COVID practices, which, for about half of our directors, took until the end of 2022. Other directors indicated that there could never be a return to pre-COVID times and that they were functioning in a “new normal,” marked by long-term changes in children, families, and ECEs that require ongoing adaptations.
- The third period was defined as “currently” — or the last 6 months prior to our interviews — to give us a sense of current practices, resources, and challenges facing child care programs.

It is important to underscore that in addition to short, medium and long-term impacts of COVID experiences, our research captures a time of major system change. The introduction of multi-year funding by Canada’s Liberal government in the 2021 budget to expedite a Canada-wide Early Learning and Child Care (CWELCC) system in collaboration with provinces/territories/Indigenous governing bodies has been historic and transformative. CWELCC agreements follow the goals of the 2017 Multilateral Framework and focus on developing a universal system of early learning and child care for all children, families and communities based on the principles of affordability, accessibility, quality, flexibility and inclusivity.

To date, the annual CWELCC agreements have focused mostly on affordability, reducing parent fees substantially to the desired goal of \$10/day by 2026. Initiatives have also included efforts to increase spaces, improve wages and benefits, and, to a lesser extent, support inclusion — with significant variation between jurisdictions in the specific actions introduced and their timing. The demand for affordable, licensed care has increased dramatically; however, child care workforce shortages have been a major factor inhibiting the rate of growth.

We remind readers that our study very much captures the impacts on centres and on inclusion of both COVID-related impacts on children, families and ECE provision and historic system change simultaneously.

With that in mind, we addressed a number of specific objectives:

1. To understand child care centres’ journey through COVID, with a specific focus on inclusion practices, resources, and program impacts;
2. To learn how COVID-related experiences affected children with disabilities and their experiences in child care programs;
3. To understand what changes have taken place in centres’ capacities

to include children with disabilities and how current experiences differ from the period before the Pandemic;

4. To identify current issues affecting inclusion practices and inclusion quality; and

5. To give voice to child care centre directors and present what they see as current unmet needs and necessary policy changes in order to sustain and improve inclusion capacity and inclusion quality.

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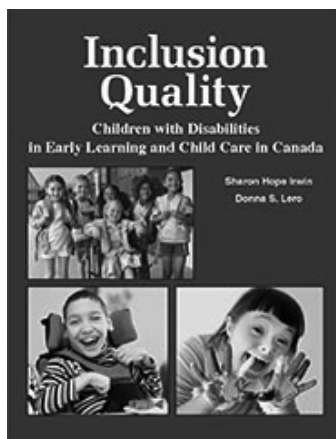


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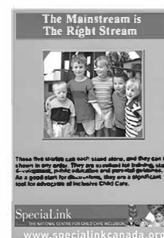
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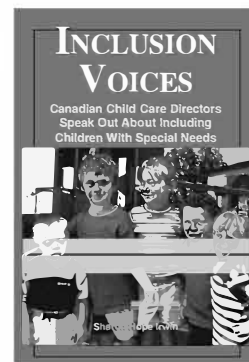
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