

The Well-being of Early Childhood Providers in Ireland

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Abstract

Early childhood professionals play a critical role in the lives of the children they work with, and their psychological well-being significantly impacts this relationship. Over recent years, societal changes, coupled with new policy, has increased the demands and pressures faced by these professionals. Therefore, the current mixed methods study set out to explore the well-being of early childhood providers (i.e., owner, owner-managers) in Ireland. In total, 489 participants completed the anonymous online survey, which included the WHO-5 questionnaire and an open-ended question that explored reasons for any stress experienced in the previous 2-week period. Almost 60% of participants scored 50 or lower and over 20% scored 28 or lower, indicating poor well-being and potential depression. The majority of participants reported feeling stressed in the 2-week period prior to completing the survey and frequently cited work-related issues as being the source of their stress. The major themes that emerged were burden of administration, overwhelming financial pressure, and staffing issues. These findings indicate that early childhood providers would benefit from bottom-up and top-down assistance to positively support their well-being. This is vital if they are to thrive in their professional roles and provide high quality, transformative experiences for our children.

Keywords: Well-being, early childhood, early years, providers

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Psychological well-being, or lack thereof, plays a significant role in a person's day-to-day functioning (Brackett et al., 2011). According to Fredrickson (2003) positive emotions support a broadening of attention and cognition, while building personal resilience and well-being. Negative emotions, on the other hand, serve to limit our perspective, our behavioural repertoires, and the quality of our lived experiences. Time spent at work encompasses a substantial portion of our daily lives, and as a result, workplace characteristics exert a powerful influence over employee psychological well-being and a person's day-to-day functioning (Farewell et al., 2022).

Internationally, early childhood professionals, in particular, face numerous and varied challenges in their daily working role and their well-being has a significant impact on education quality, care, and children's well-being (Brown et al., 2017; Kotaman, 2016; Tatalović Vorkapić & LoCasale-Crouch, 2021; Višnjić Jevtić & Halavuk, 2018). However, despite the significant relationship between the well-being of early childhood professionals and the well-being of the children they support, relatively few studies have explored the emotions and well-being of these professionals (Tatalović Vorkapić & Velan, 2023).

In 2014, Hall-Kenyon et al. (2014) reviewed the literature on preschool educator's well-being. Results across six countries (United States: $n = 23$; Australia: $n = 3$; New Zealand: $n = 1$; Israel: $n = 1$; Finland: $n = 1$, England: $n = 1$) indicated a need for an increased focus on early childhood professionals' well-being, including their financial health, emotional health, physical health, and life satisfaction. Building on this review by using the same search and selection criteria, with an extended date range, Cumming (2016) concluded that work environment, psychological and emotional well-being, and work-related stress are important areas for future research. While demonstrating valuable foci for future studies, both reviews also highlighted the dearth of research in the European context, including Ireland.

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Addressing gaps in the literature, which were identified by Hall-Kenyon et al. (2014) and Cumming (2016), Joen et al. (2018) surveyed 1,129 teachers working in early childhood education in the United States. Analyses showed a significant relationship between stress, poor well-being, and the early childhood work environment. Factors, including demands from parents, children and regulatory bodies were identified as having an important role to play in this relationship. Most recently, Hagan-Haynes et al. (2024) explored the relationship between experiences of mistreatment and mental health for 332 early childhood education staff, in 42 Head Start centres in Colorado, in the United States. According to their findings, the most reported form of workplace mistreatment was condescending or demeaning treatment from colleagues or superiors. This is consistent with observations by Cumming et al. (2021), indicating that collegial and supervisor support were ranked among the top four most valued aspects of work by Australian early childhood educators.

In 2018, the Irish Government published ‘First 5, A Whole-of-Government Strategy for Babies, Young Children and their Families (2019-2028)’ (Department of Children, Equality, Disability, Integration and Youth, 2018). This programme of work aimed to improve the experiences of children from birth to 5 years across all aspects of their lives. One of the main objectives was to ensure access to high quality, developmentally appropriate early learning and care (ELC) and school-age childcare (SAC). To achieve this, the following factors were identified as critical within the plan:

- Establish robust leadership and governance strategies, which support positive collaboration between all parties.
- Develop strong regulation, inspection, and quality assurance standards.
- Ensure a skilled and sustainable professional workforce.
- Build a national infrastructure to support research and the development of evidence-informed policy and practice.

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- Provide additional funding to achieve optimal outcomes.

The plan also acknowledged that significant systemic reforms and an increase in investment would be needed to bring this plan to fruition by 2028.

However, annual reports from Pobal, an organisation that surveys the early childhood sector in Ireland on behalf of the Department of Children, Equality, Disability, Integration and Youth, show an increasing complexity within the sector. Over 65% of services are working with children whose first language is neither English or Irish, while 75% of services have reported that they are supporting at least one child with a disability or additional need (Pobal, 2022). The annual staff turnover is 19%, with only 57% of services managing to retain staff. Furthermore, in services where the owner acts as manager, 82% of these owner-managers find themselves in the position of working with children, alongside their other duties (Pobal, 2023).

As such, early childhood professionals in Ireland, particularly owner-managers, are navigating a complex landscape, which requires them to adapt to ambitious policy changes, as well as real-world, practical challenges (e.g., embracing and supporting diversity of need, recruiting, and retaining high quality staff). Given the pivotal role that early childhood professionals play in the lives of young children, the impact of psychological well-being on this relationship, and the absence of research from an Irish perspective, the current study set out to explore the well-being of early childhood providers (i.e., owner, owner-managers) in Ireland, using a mixed methods approach. To the best of our knowledge, this is the first study to focus exclusively on the well-being of early childhood providers, including owner-managers, not only in an Irish context, but internationally. The study aimed to:

- Quantitatively assess the psychological well-being of early childhood providers.
- Ascertain if early childhood providers are experiencing stress.

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- Explore the factors leading to any stress experienced.

Method

Compliance with Ethical Standards

For pre-registration details, please see <https://osf.io/6mcjw>. Ethical approval was granted by the Dublin City University's Research Ethics Committees (REC) (DCUREC/2024/051). All participants provided informed consent prior to completing the survey and could withdraw consent up to the point of submitting the survey.

Participants

At the time of completing the survey, participants needed to own a childcare service in the Republic of Ireland. The survey was open for 14 days during May 2024. During participant recruitment, all members of the Federation of Early Childhood Providers in Ireland were targeted. The Federation of Early Childhood Providers is an organisation of 1,458 early childhood business owners working together to pursue excellence in early childhood education in Ireland. The Federation acts on behalf of members by engaging in government lobbying, policy consultations and initiatives aimed at developing a stronger, more equitable sector. To reach these members, the Federation of Early Childhood Providers shared the recruitment flyer via email and WhatsApp. Sharing the recruitment flyer was the only role that the Federation of Early Childhood Providers played in this study. A total of 489 people completed the survey (response rate = 34%). The majority identified as female ($n=484$, 99%), five identified as male, and the average age was 50 years ($SD=7.81$, range=31-73). The remaining demographic information can be found in Table 1.

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Table 1

Demographic Information (N=489)

Service Type	<p>Sessional childcare* - 208 (42.5%)</p> <p>Multiple childcare services – 177 (36.2%)</p> <p>Full-time childcare - 57 (11.7%)</p> <p>Part-time childcare – 35 (7.2%)</p> <p>School-age childcare – 11 (2.2%)</p> <p>Childminding – 1 (0.2%)</p> <p>*planned programme of up to 3.5 hours per session</p>
Location	<p>Urban – 252 (51.5%)</p> <p>Rural – 228 (46.6%)</p> <p>Mixed – 9 (1.8%)</p>
County (in Ireland)	<p>Dublin – 118 (24.1%)</p> <p>Cork – 74 (15.1%)</p> <p>Galway – 36 (7.4%)</p> <p>Meath – 32 (6.5%)</p> <p>Kildare – 27 (5.5%)</p> <p>Wicklow – 26 (5.3%)</p> <p>Wexford – 23 (4.7%)</p> <p>Clare – 16 (3.3%)</p> <p>Tipperary – 14 (2.9%)</p> <p>Limerick – 13 (2.7%)</p> <p>Mayo – 13 (2.7%)</p> <p>Louth – 12 (2.5%)</p> <p>Laois – 10 (2%)</p> <p>Cavan – 8 (1.6%)</p> <p>Donegal – 8 (1.6%)</p> <p>Offaly – 8 (1.6%)</p> <p>Carlow – 7 (1.4%)</p> <p>Kerry – 7 (1.4%)</p> <p>Sligo – 6 (1.2%)</p> <p>Waterford – 6 (1.2%)</p> <p>Kilkenny – 5 (1%)</p> <p>Westmeath - 4 (0.8%)</p> <p>Longford – 3 (0.6%)</p> <p>Leitrim – 2 (0.4%)</p> <p>Monaghan – 2 (0.4%)</p> <p>Roscommon – 2 (0.4%)</p> <p>Mixed – 4 (0.8%)</p> <p>Not specified – 3 (0.6%)</p>
Number of Children	<p>$M=56.48$; $SD=80.53$</p> <p>$Md=31.5$; range = 5-1400</p>
Number of Staff	<p>$M=8.61$, $SD=14.34$</p>

Materials and Procedure

The anonymous, online survey took approximately 5-10 minutes to complete and included nine demographic questions (e.g., gender, age, service type, location), the World Health Well-being Index (WHO-5), a closed-ended question (i.e., ‘Have you felt stressed in the last 2 weeks?’) and an open-ended question that asked about the reasons for any stress experienced in the 2-week period prior to completing the survey.

The WHO-5 is a five-item questionnaire (see Supplemental Material) that assesses subjective, psychological well-being. All five items are positively worded and are rated on a 6-point Likert scale (5 = all of the time; 0 = none of the time). The raw score can range from 0 (absence of well-being) to 25 (maximal well-being). For interpretation purposes, the score for each of the five items are added and the raw score is multiplied by four. Scores of 50 or less indicate poor wellbeing and have been shown to correlate with a ‘screening diagnosis’ of depression, while scores of 28 or below are highly indicative of major depression (Topp et al., 2015).

Research Design and Data Analysis

This study was based on a convergent parallel design (Creswell & Plano Clark, 2017). The quantitative and qualitative data were collected concurrently, analysed independently, then interpreted together. The first author collated and analysed responses to the demographic questions, the WHO-5, and the closed-ended question related to stress, using descriptive statistics. The first author thematically analysed the qualitative responses from the open-ended question using an iterative process based on the Braun & Clarke (2006) framework. Initially, themes were identified across the entire participant data set. Subsequently, the data was re-analysed to compare the responses from those scoring 28 or below on the WHO-5 with the rest of the data set.

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The first author was a chartered psychologist, with a doctoral level degree in Psychology. She has worked as a practitioner in the field of inclusive and special education for the past 17 years and as an academic in this field for almost 5 years. While she has led and contributed to several mixed methods studies in the past, this is the first study she has undertaken that focused on mainstream early childhood services in Ireland. Furthermore, the first author has no affiliation with the Federation of Early Childhood Providers. Therefore, she approached the study blind to any potential issues in this sector and open to exploring the themes that were uncovered in an open and organic way. The second author was a Federation of Early Childhood Providers committee member and therefore was not involved in the analysis or interpretation of data, to minimise bias, conscious or otherwise. However, a post-analysis review of the themes by both authors indicated that the themes identified were consistent with issues raised by Federation members over recent years.

Findings

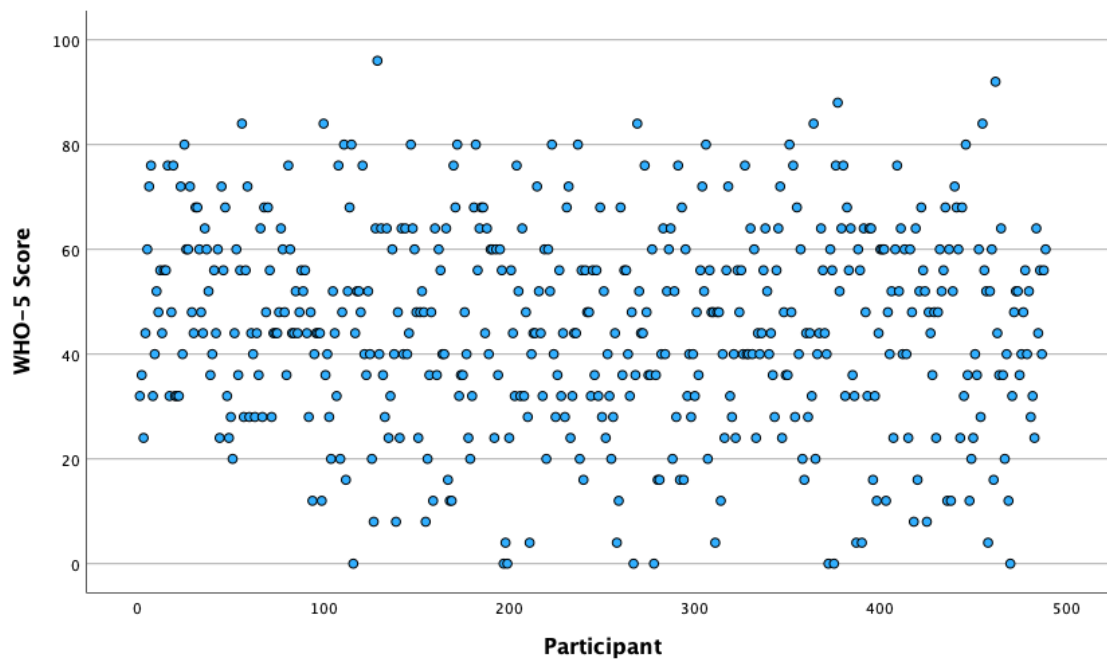
Self-assessed Well-being

A total of 489 participants completed the WHO-5 questionnaire. The overall mean score was 45.15 ($SD=19.11$; range=0-96) and figure 1 shows the distribution of scores across all participants. Over half of the participants ($n=289$, 59.1%) scored 50 or below and 102 participants (20.9%) scored 28 or below.

Figure 1

Distribution of participants' WHO-5 scores (N=489)

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Experience of Stress

Participants were asked if they felt stressed in the 2-week period prior to completing the survey. Data showed that 466 participants (95.3%) reported feeling stressed during this time. Fifteen participants (3.1%) stated that they did not feel stressed, seven (1.4%) were unsure, and one participant chose not to say (0.2%).

Analysis of the reasons for the stress experienced revealed the following themes, which are notably work related and consistent across participants scoring higher (29 and above) and lower (28 and below) on the WHO-5: 1) Burden of administration; 2) Overwhelming financial pressure; and 3) Staffing concerns. These themes are described below with supporting quotations.

Burden of administration

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Administrative duties were consistently cited by participants as a significant source of stress. One of the main contributing factors was paperwork “no time to do paperwork very behind in paperwork” (Participant 8). Other participants spoke about:

“Beauracy [sic] admin. Unreasonable demands the kids need our energy and are not worried about pristine policies [sic] abd [sic] paperwork they want to be seen and heard fully they wantstressed [sic] free adults who are fully present want to enjoy career with children.” (Participant 189)

“Demands of administrative work as a provider; no way of switching off work constant worry of finishing tasks.” (Participant 221)

Participants also experienced overwhelm related to “the fear of pobal and tusla inspectors at any moment unannounced.” (Participant 280). This pressure to comply with regulations from multiple different stakeholders, including Tusla, the Department of Education, and Pobal were frequently cited as a significant source of stress for participants.

“Tesla [sic] inspection from he'll [sic]. Never felt so interrogated as well as all my staff”. (Participant 487)

Keeping of top of accounting duties was another source of administrative stress reported by many participants:

“The core funding chart of accounts causes me stress & sleepless nights” (Participant 7)

“COA [chart of accounts] has caused lots of sleepless nights over the last number of weeks, primarily as to how I will afford it and have time to complete it.” (Participant 51)

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“The financial accounts work for my preschool I DO NOT KNOW HOW TO DO IT AND I DO NOT HZVE [sic] THE TIME TO DO IT” (Participant 125)

Overwhelming financial pressure

Many participants reported that “lack of funding” and “financial worries” were major factors in their experience of stress at the time that they took the survey. They wrote about “income not covering wages and overheads” (Participant 414), as well as “working 40hrs [sic] and no wages” (Participant 415). Some participants raised concerns about the financial viability of their settings:

“My main source of stress is financial worry... can I afford to stay open, and not eating to let all the families down and going into debt.” (Participant 259)

“To the most stressful the balancing of the books and all that goes with it now including the the [sic] core funding detailed returns. I believe also that being not paid myself has taken my rights away of being properly paid for providing such an incredible business for this government and their obligations to the children and their parents of this country. I keep this business going so hopefully this government will pay properly so I can finally get what I deserve for my retirement. All this time running this business successfully and there was not much money to put in a pension fund. I’m so stressed all the time and that’s for years. The joy is gone from everything in this business except the joy of the children and what I provide for them everyday. That at this stage isn’t enough for me going forward in my life. I’ve built this business up and gave it everything and to have so many worries for myself is a debilitating circumstance.” (Participant 398)

Staffing concerns

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Staff recruitment, retention, and absences were significant contributors to stress according to participants. One participant mentioned “staff leaving and no one to replace them” (Participant 172), while others mentioned issues with “filling staff when others are out” (Participant 129) and “getting cover for staff absence” (Participant 350). Although related to the previous theme, many participants were specifically concerned about “the ability to pay staff” (Participant 136):

“My main source of stress is financial worry, can I pay the staff.” (Participant 259)

“I am overdrawn and staff get paid more than I do” (Participant 388)

“How I’m going to continue to pay staff.” (Participant 430)

Discussion

In this study, we set out to explore the psychological well-being of early childhood providers in Ireland. With 102 (20.9%) participants scoring 28 or below on the WHO-5 questionnaire and 130 (26.5%) scoring between 29 and 50 (inclusive), it was clear that well-being is problematic for this group of professionals. According to Topp et al. (2015) a score of 29-50 is indicative of low mood and further assessment of depression is warranted. Scores of 28 or below strongly suggest depression and support should be sought. When participants asked if they felt stressed in the 2-week period prior to completing the survey, 466 (95.3%) indicated that they did and typically cited work-related issues as the source of this stress. Among the most frequently cited sources were the burden of administration, financial pressures, and staffing issues.

Our findings are consistent with previous research, showing that early childhood providers’ well-being is inextricably linked to their work environment (Cumming et al.,

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2021). Building high-quality, appropriate early years childcare requires more than building a suitably qualified workforce, underpinned by relevant quality assurance standards and infrastructure. High quality work environments are also needed to ensure that early childhood providers' can thrive in their leadership positions (Cumming et al., 2021). This is particularly important given the role that supervisor/superior behaviour (supportive and demeaning) plays in employee well-being across this sector (Cumming et al., 2021; Hagan-Haynes et al., 2024).

The interplay between job demands and job resources plays a significant role in the manifestation of occupational stress (Demerouti et al., 2001). Job demands are aspects of your professional role that entail intellectual, emotional, and physical effort and contribute to stress by depleting energy over time (Crawford et al., 2010; Schaufeli & Bakker, 2004). Job resources, on the other hand, enhance motivation, facilitate learning and growth, and strengthen job commitment (Bakker & Demerouti, 2007; Crawford et al., 2010). Maslach and Leiter (2008) identified the following six dimensions of job demands and resources, which they argue can contribute to occupational stress or growth: workload, rewards, values, community, job control, and fairness.

Through their responses, participants in our study spoke to the dimensions of workload and job control. Workload can be conceptualised as a situation when the resources available to an individual are insufficient to address the work-related responsibilities and demands that they face. The burden of administrative duties, in the form of limited time and expertise, was consistently raised by our participants as problematic, and this is consistent with previous research in the area (Schaack et al., 2020). For example, paperwork, time pressures, number of funding sources, and participation in accountability and educational reform activities were identified as sources of stress for early childhood providers across several international studies (Kelly & Berthelsen, 1995; Schaack & Le, 2017; Sutchter et al., 2016). Furthermore, in Ireland, most owner-managers also work with the children (Pobal,

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2023) and given that most early childhood services are open year-round, there is little time available for these professionals to recoup and reenergise.

In addition to the burden of administration, our findings highlighted themes centred around financial pressure and staffing issues, which can impact an individual's sense of job control. Job control refers to the extent to which someone feels that they have autonomy and the capacity to make decisions related to their professional life (Leiter & Maslach, 2003). It is clear from our participants' responses that they felt that they had limited control over the administrative demands linked to their work. This was further exacerbated by financial and staffing challenges. Several participants wrote about fears of not having the funds to pay staff wages, as well as concerns about staff recruitment and retention. This is consistent with previous studies that have shown significant relationships between pay and staff turnover in early childhood settings (e.g., Hale-Jinks et al., 2006; Whitebook et al., 2014). Due to the early years funding infrastructure in Ireland¹, early childhood providers have little influence over the financial benefits that they can offer future or existing employees. This compromises their ability to attract and retain the staff they want, while also compromising their ability to provide themselves with a viable wage (as highlighted by some participants). Given what we know about job control (Leiter & Maslach, 2003), this type of situation is highly likely to contribute to occupational stress and possible burnout (Maslach & Leiter, 2008).

Our study has highlighted significant systemic issues, which early childhood providers are facing, and these issues are not confined to the Irish context (e.g., Joen et al., 2018; Jones et al., 2020, Otten et al., 2019). Although referring to the Australian setting, Ng et al. (2023) accurately captured the conditions in Ireland when they stated, "these systems demand educators use much of their time proving they are providing quality education and care rather than doing just that" (p. 183). They argued that excessive time is spent on reporting, completing checklists and other managerial duties, and recommended that

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professionals regain time and space to interact with children and prioritise their own well-being. Early childhood providers need to experience consistent positive, psychological well-being to thrive in their roles and promote the growth and care of the staff and children in their services. However, existing managerial systems appear to impede this (Rogers, 2021).

Ideally, the system would change to alleviate excessive workplace pressure and policymakers need to work on addressing this by increasing resources, targeted training (e.g., basic accountancy) and relational supports, while reducing excessive requirement around data collection, reporting and compliance checks. However, in the absence of immediate systemic changes in this sector, the importance of providing pre- and in-service supports to early childhood professionals is emphasised (Hagan-Haynes et al., 2024; Tatalović Vorkapić & Velan, 2023). Based on their systematic review of the literature, Ng et al. (2023) identified several research-informed practices, including coaching, reflection, and counselling-based interventions, which could be used to lower stress and the risk of burnout among early childhood professionals. For example, Grant et al. (2019) found that educators with more developed coping and emotional regulation skills were in a better position to handle workplace stress and demands. Therefore, professional development that prioritises these skills could serve as a critical tool for well-being, effective leadership, and staff retention in this sector (Schaack et al., 2020).

Acceptance and Commitment Therapy (ACT) is an evidence-based, psychological therapy that teaches people to better manage thoughts and emotions and take effective action. Gloster et al. (2020) investigated the empirical status of ACT by conducting a review of 20 existing meta-analyses. These 20 meta-analyses reported 100 controlled effect sizes across 12,477 participants. Results demonstrated that ACT is efficacious across all conditions targeted, including depression and anxiety. ACT seeks to increase psychological flexibility and deal with experiences in a balanced way. It does not eliminate stress. Instead, it helps

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people to respond better to potentially stressful situations by teaching them new coping strategies, including mindfulness. ACT focuses less on reducing problematic symptoms and more on improving an individual's functioning and well-being (Hayes et al., 2012).

Therefore, given its emphasis on functioning and well-being, as well as the significant evidence-base supporting this approach (Gloster et al., 2020), we suggest that future research examine the feasibility, viability, and cost-effectiveness of introducing ACT, as part of professional development for early childhood professionals.

The main limitations of this study relate to recruitment. Only members of the Federation of Early Childhood Providers were targeted. As members of other groups were not the focus of recruitment, their perspectives are not represented in this study. In addition, because recruitment was driven by the Federation of Early Childhood Providers, participants may have been primed to highlight work-related stress when completing the survey. For example, 99% of participants were female but reference to home-related stressors was rare. Understanding the lived experience of stress across home and work would better inform policy and practice in the future. It must also be emphasised that the survey focused exclusively on early childhood providers. Early childhood educators, who did not own a service, were not represented and should be another area of focus for future research. Finally, due to financial and time constraints, the first author was the sole coder for the thematic analysis. While this was not ideal, the first author's limited experience with the mainstream early childhood sector supported a position of neutrality and the second author was not involved in data analysis or interpretation, to minimise personal bias and threats to neutrality. Furthermore, participant responses were largely concise and precise, and therefore readily interpretable.

Nationally and internationally, government agencies and policymakers are campaigning for high-quality early childhood services. Research demonstrates that staff well-

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being, including the well-being of those leading these services, is critical to high-quality service provision. The results of this study showed that the majority of participants are experiencing low mood, which at the very least could be indicative of depression.

Furthermore, almost all participants reported feeling stressed in the 2-week period prior to completing our survey, and work-related factors were the most frequently cited source of stressors. We have suggested a bottom-up and top-down approach to supporting this cohort's well-being. Pre- and in-service professional development could play a critical role in helping individual's learn coping and emotional regulation skills to effectively deal with inevitable workplace challenges in a healthy, proactive way (e.g., Joen et al. 2018). Concurrently, government agencies and policymakers need to review the work-related demands and resources, which are currently operating in this sector, with a view to establishing a better balance that promotes positive psychological well-being.

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Note

¹In Ireland, early childhood services are funded through a combination of public investment and parental fees. Public investment includes Core Funding, which is intended to support quality and sustainability, alongside improved public management relating to fees and cost transparency. Core Funding is allocated to providers based on the number of places they provide. Providers are not obliged to avail of Core Funding but access to other fundings streams is prohibited if they do not. Several conditions are also linked to Core Funding, including a fee freeze in line with what was charged in September 2021 and the provision of a specified pay scale for the early years sector (Early Childhood Ireland, 2022). Given these stipulations, providers have limited influence over the financial benefits that they can offer employees.

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