

DATE OF MEETING March 15, 2021

AUTHORED BY DAVID STEWART, SOCIAL PLANNER

SUBJECT MID-ISLAND REGION CHILD CARE ACTION PLAN

OVERVIEW

Purpose of Report

To present the Mid-Island Region Child Care Action Plan to Council and request that it be included as formal stakeholder input into the REIMAGINE NANAIMO process.

Recommendation

That Council:

1. receive the Mid-Island Region Child Care Action Plan;
2. endorse the child care space targets for the city of Nanaimo included in the report; and
3. include the Action Plan as formal stakeholder input into the REIMAGINE NANAIMO process.

BACKGROUND

In early 2019, the City of Nanaimo collaborated with the District of Lantzville, City of Parksville, Town of Qualicum Beach, and the Regional District of Nanaimo to study childcare needs in the region. The partnership received a \$125,000 grant from the Union of BC Municipalities (UBCM) to assess existing child care spaces and identify current and future demand for child care spaces in the mid-island region, of which \$108,360 was used to complete a Child Care Action Plan. Completion of a childcare needs assessment or plan is one of the eligibility requirements for school districts, local and First Nations governments, and non-profits to be considered for funding through the Child Care BC New Spaces Fund.

To guide and support the project, a working group of regional childcare stakeholders was formed. The Social Planning and Research Council of BC (SPARC BC) was hired to complete this work on behalf of the group. The result was the development of a Mid-Island Region Child Care Action Plan (the “Action Plan”) and supporting documents. Engagement on the project included feedback from child care providers, parents and caregivers, First Nations and Urban Indigenous groups, specific vulnerable and underserved populations (new immigrants, parents of children with special needs), and other key stakeholders (non-profits supporting children, chambers of commerce, etc.).

DISCUSSION

Role of Local Government in Supporting Child Care

While the Provincial and Federal Governments have the primary roles to play in the policy and funding of child care, local governments have authority over local planning and land use as well as the most in-depth understanding of local area needs. Local governments may also have the capacity to host third-party child care operators within municipal facilities or, in some cases, operate child care centres themselves.

Mid-Island Region Child Care Action Plan

The Action Plan (see Attachment A) identifies how many child care spaces currently exist and would be needed for each local government to keep pace with anticipated demand for the five local governments and three First Nation governments within the project area. The Action Plan establishes targets for each municipality and the entire region, and includes child care priorities and recommended actions within four priority areas:

1. Access to child care
2. Affordability
3. Quality
4. Collaboration and partnerships

The Action Plan also includes the following supporting information:

- An inventory of existing child care spaces;
- A community engagement report (Appendix C of the Action Plan);
- City of Nanaimo neighbourhood-level child care status maps (included within the City of Nanaimo portion of the Action Plan);
- Child care space target information for each jurisdiction; and
- Community profiles (Appendix D of the Action Plan).

The Plan includes recommended actions to increase child care spaces and improve the quality and accessibility of child care within the region. There are 49 recommended actions with associated timelines identified to achieve plan priorities. This includes 32 collaborative regional actions and 21 more specific recommendations for partner local governments. Of the 21 more specific recommendations, 7 are for the City of Nanaimo.

A summary of recommended actions involving the City and an analysis of implication for the City is included as Attachment B.

Space Targets and Recommendations

The Action Plan establishes targets for the region and each municipality in each child care age category (See Attachment C). There are no established Federal or Provincial standards or recommendations for child care space targets (number of child care spaces per capita). Subsequently, the Action Plan targets were developed using scans of other jurisdictions, population projections, local demographic and labour force data, and consultation with municipal representatives and key partners in the child care sector. It should be noted that it remains to

be seen what long-term impacts COVID-19 may have on demand for child care should there be a long-term increase in parents working from home after the pandemic.

In order to ensure child care opportunities are equitable throughout the region, the same targets were applied consistently for each local or regional government. Child care space targets were set at 50% coverage for children under age three, 75% coverage for children ages three to five not yet in school, and 50% coverage for school age children under age ten.

Due to its larger share of population in the region, the City of Nanaimo would require a higher number of child care spaces to meet its proportional share of the Action Plan's regional child care space targets. To reach the 2030 targets, the City of Nanaimo would need an estimated 3,410 new licensed spaces over the next ten years.

Nanaimo already has 475 new spaces under development, which could be increased to 741 should funding be approved for a further 266 spaces. This would result in achieving approximately 22% of the Action's Plan's ten-year target of 3,410 spaces for the city. Confirmed new spaces include 88 infant/toddler spaces, 182 preschooler-age spaces, and 205 school-age spaces. School District 68 (the "School District") has received funding for 140 spaces to be integrated within existing school sites. The School District is awaiting funding confirmation for the above-noted additional 266 spaces. If approved, the School District will be able to add 406 child care spaces within ten elementary schools. A summary of the School District's child care spaces is included as Attachment D. On 2019-DEC-12, the City of Nanaimo provided a letter of support for the School District's application.

Parent and Caregiver Engagement and Implications

As part of the engagement process, 905 parents and caregivers responded to a child care needs and preferences survey. Parents rated child care quality metrics (reputation of the program, quality of indoor play, activities for children, program licensing) well above cost and locational considerations. However, when asked about location preferences, parents indicated a greater desire for child care space to be located closer to their homes as opposed to near their work or child's school.

Attachment C of the Action Plan provides the City with a neighbourhood breakdown by number of children versus child care spaces. This shows that child care spaces in the city tend to be concentrated in areas with a lower portion of children under 14 and where more jobs are located, including in or near downtown, the university, and the hospital areas.

Comparatively, areas with a higher portion of children under 14, in central and northern Nanaimo, have proportionally less child care spaces than other areas of the city. This includes neighbourhoods such as Hammond Bay, Departure Bay, Long Lake, and Diver Lake. Increasing childcare spaces in these areas will require consideration of providing more child care spaces in residential areas.

There is an opportunity to use School District 68's capacity to meet a significant portion of existing and future child care needs at existing school sites in neighbourhoods. This is an important consideration when reviewing the implications of this research and recommendations as part of the REIMAGINE Nanaimo Strategic Policy Review process.]

OPTIONS

1. That Council:

1. receive the Mid-Island Region Child Care Action Plan;
2. endorse the child care space targets for the city of Nanaimo included in the report; and
3. include the Action Plan as formal stakeholder input into the REIMAGINE NANAIMO process.

- **Advantages:** Including the Action Plan as input into the REIMAGINE NANAIMO process will ensure child care needs are considered in the City's strategic policies related to land use and community facility planning. Endorsing child care space targets for the city will help support partnerships as well as the initiatives of other levels of government, including The School District, First Nations Governments, and other non-government agencies, to increase child care spaces.
- **Disadvantages:** The proposed space targets for Nanaimo are ambitious and may take considerable cooperation among stakeholders in order to meet the target goals. The targets may be impacted by permanent shifts in work from home for some parents following the end of the COVID-19 pandemic.
- **Financial Implications:** There are no direct financial implications with receiving the report; however, a number of the recommendations within the report include financial implications. The financial implications of individual recommendations are addressed within Attachment B of the report.

2. That Council:

1. receive the Mid-Island Region Child Care Action Plan; and
2. include the Action Plan as formal stakeholder input into the REIMAGINE NANAIMO process.

- **Advantages:** Including the Action Plan as input into the REIMAGINE NANAIMO process will ensure child care needs are considered as part of the City's strategic policies related to land use and community facility planning. However, beyond this, it will not require any further commitment by Staff or Council. The Action Plan would serve as a reference document for funding applications by the School District, the City, and other potential partners to create more child care spaces.
- **Disadvantages:** By not endorsing the child care space targets, Council may limit the City's ability to support actions to increase child care spaces within the city, including supporting funding applications.

3. That Council provide alternative direction.

SUMMARY POINTS

- The Mid-Island Region Child Care Action Plan provides an overview of existing and projected child care needs within the City of Nanaimo, Regional District of Nanaimo, District of Lantzville, City of Parksville and Town of Qualicum Beach.
- The Action Plan includes 32 regional recommendations and a total of 17 more specific recommendations for each local government, including 7 for the City of Nanaimo.
- The Action Plan includes specific child care space targets (number of child care spaces per capita) for the region and each municipality for different child care age categories.
- In order to meet the space targets for Nanaimo, the City of Nanaimo would have to add 3,410 new child care spaces by 2030; 475 child care spaces are currently in development.

ATTACHMENTS:

ATTACHMENT A: Mid-Island Region Child Care Action Plan
ATTACHMENT B: City of Nanaimo Recommendations Summary
ATTACHMENT C: Child Care Space Targets Summary
ATTACHMENT D: School District 68 Child Care Funding Spaces

Submitted by:

Lisa Bhopalsingh
Manager, Community Planning

Concurrence by:

Bill Corsan,
Director, Community Development

Richard Harding
General Manager, Parks, Recreation and
Culture

Dale Lindsay
General Manager, Development Services

ATTACHMENT A



Mid-Island Region Child Care Action Plan

December 18, 2020



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The Mid-Island Child Care Action Planning Project was completed by the Social Planning and Research Council of British Columbia (SPARC BC) in collaboration with Sandra Menzer, Barry Forer and John Foster, with funding provided by the Child Care Planning Grants Program from the Union of BC Municipalities.

Together with the five Project Partners we would like to thank all of the individuals and organizations who gave their time, expertise, input, insights, and ideas for the Action Plan.

In particular we thank the Project Working Group members and Dave Stewart from the City of Nanaimo for your guidance and advice. This work would not have been possible without your support and leadership.

Karen Love- Boys and Girls Club of Central Vancouver Island

Dominic Rockall- Nanaimo Childhood Development Centre

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Chris Beaton- Nanaimo Aboriginal Centre

Tim Davie- School District 68

Jane Carroll- School District 68

Lisa Thom- School District 68

Judi Malcolm- School District 69/ Early Learning and Childcare Council in Oceanside

Carol O'Connor- Early Learning and Childcare Council in Oceanside

Bill Preston- Early Learning and Childcare Council in Oceanside

Grace Bell- City of Nanaimo

Shelley McClure- Community Care and Licensing

Emmy Manson- Snuneymuxw First Nation

Eleanor Manson – Snuneymuxw First Nation

Marina White- Snuneymuxw First Nation

Jennifer Fowler- Central Vancouver Island Multicultural Society

Municipal Staff

Courtney Simpson- Regional District of Nanaimo

Kyle Young- District of Lantzville

Blaine Russell- City of Parksville

Luke Sales- Town of Qualicum Beach

Dave Stewart- City of Nanaimo

1.0 Executive Summary

High-quality, accessible, and affordable child care is essential to the well-being of children, their families, and the broader community. Child care plays a critical role in economic development, poverty reduction, gender equality, social inclusion, and healthy child development.

In recognition of this, the City of Nanaimo, the City of Parksville, the Town of Qualicum Beach, the District of Lantzville and the Regional District of Nanaimo partnered to develop a Child Care Action Plan for the Mid-Island Region.

All five jurisdictions collaborated in the engagement process and preparation of the Mid-Island's regional plan. These communities recognized not only that their child care systems are interconnected, but also that the existing partnerships and opportunities to work together on common child care objectives are often regional, rather than individual to each jurisdiction.

This report provides an overview of the key findings, analysis, and conclusions from the research and engagement work conducted for this project and makes concrete recommendations for actions by the local governments of the Mid-Island Region.

While the Provincial and Federal governments have primary roles in child care policy and funding, as local governments, the five partners have authority over local planning and land-use, as well as the most in-depth understanding of local context, needs, and economy. With a defined and coordinated plan, support from senior levels of government, and strong community and regional partnerships, significant progress in improving the accessibility, affordability, and quality of child care available to families across the Mid-Island can be made.

This Plan is informed by research and best practices in child care but is ultimately grounded in the unique needs and opportunities available to Mid-Island residents and communities. The recommendations are based on a review of research and promising practices from other jurisdictions; a review of current local planning frameworks; various community engagement activities (parent and caregiver survey, child care operator survey, interviews with key stakeholders including First Nations, engagement with underserved and more vulnerable populations, four virtual Child Care Solutions Workshop); and a synthesis of current demographic and child care service information. For more information about these research and engagement activities, please refer to Appendices C and D.

This Regional Action Plan is organized around four priorities, closely aligned with the Province's child care commitments:

- Increasing accessibility
- Improving affordability
- Focusing on quality
- Strengthening partnerships

Furthermore, the report is structured in two parts:

- information, data, recommendations and space targets for the Mid-Island region as a whole, and
- specific regulatory information and recommendations for each individual jurisdiction, along with detailed space target information for each.

Increasing Accessibility

Many families need but cannot access child care. While access to child care is a challenge for all families, underserved and more vulnerable populations often face additional barriers to accessing care.

Key Facts

- Across the entire Mid-Island region, there are 17,120 children aged birth to 12 and 4,998 child care spaces – 29 spaces for every 100 children.
- However, there are only 9 spaces per 100 children under three-years-old and only 15 spaces per 100 school age children.
- There are few options for families who work non-traditional hours, who are shift workers, or who require flexible hours of care.

Recommendations include:

- Develop a Mid-Island Region Child Care Policy, providing a consolidated statement of the Region's vision, goals, strategies and commitments to child care.
- Establish an on-going Child Care Action group.
- Increase the numbers of child care spaces to 50% coverage for infants and toddlers (50 spaces for every 100 children under 3), 75% coverage for preschooler age children (75 spaces for every 100 children 3 to 5 not yet in school), and 50% coverage for school age children (50 spaces for every 100 children kindergarten to age 9).
- Consider the opportunities for developing local government/Regional District-owned child care facilities, including accessing Provincial Capital funding to build child care spaces.
- Include consideration and provision of child care within strategies and projects for affordable housing, seniors' residents, and transit expansion/improvement.
- Explore and pilot, with providers, child care that offers longer, non-traditional and/or flexible hours.
- Consider child care as a desired amenity in return for bonus density, where applicable.
- Identify and further research changes necessary to local government processes and regulations to remove any barrier to creating new child care

Improving Affordability

High costs are a major barrier for many families who need child care. They limit access to child care, force families to rely on care arrangements that do not meet their child's needs and cause financial stress for families. High costs disproportionately impact low-income families and families with additional challenges.

Key Facts

- In 2016, 22% of children under 18 and 23% of children under six lived in low-income families.
- The median income for couple families with children under six was \$89,410, compared with \$27,824 for lone parent families.
- Child care for a two-year-old costs a minimum of \$12 000 per year.

Recommendations include:

- Create a grant program to assist not-for-profit child care centres with facility upgrades and maintenance or to help them offer extended hours.

- Lease or rent local government-owned facilities or land to not-for-profit child care providers at no cost or below-market rates.
- Advocate to senior governments to reduce the cost of child care.

Focusing on Quality

High quality child care is linked to positive outcomes for children, while poor quality care can have negative long-term effects. More generally, parents dropping off their children at a child care centre each working day want to feel secure knowing their children will receive safe, high-quality care.

Key Facts

- Research shows staff with higher levels of education and training, who are well supported and appreciated, are critical to high-quality care.
- Recruitment and retention of qualified Early Childhood Educators is a significant issue – 48% of the respondents to the Child Care Operator Survey reported staff turnover in the last year.
- While many for-profit child care providers offer very good service, research has shown that, on average, not-for-profit and publicly operated child care facilities offer better quality of care than for-profit facilities. Currently only 20% of the child care programs are delivered by not-for-profits or public agencies.

Recommendations include:

- Increase the number of licensed, not-for-profit, publicly funded child care operations.
- Explore the role of providing leadership for more and better-qualified ECE staff and additional training opportunities.
- Support the province in its *“Early Care and Learning Recruitment and Retention Strategy”* initiative.

Strengthening Partnerships

Child care involves many parties playing various roles, which means it requires intentional relationships and collaboration between and across jurisdictions. The value of collaboration was clearly identified, focusing in particular on partnerships between local government, child care providers and school districts and stronger ongoing relationships with First Nations and Indigenous peoples.

Recommendations include:

- Collaboration focused on the use of publicly owned land/facilities such as municipal, school district, and post-secondary institutions.
- Build supportive and learning relationships with Métis and First Nations. Support indigenous perspectives and history in child care.
- Pursue partnership opportunities with employers to provide spaces for child care facilities that serve their employees’ families and community.
- Advocate to senior governments to ensure the needs of Mid-Island children are a priority for new spaces in provincial planning and funding and to support recruitment, remuneration, and retention of Early Childhood Educators.

2.0 About the Mid-Island Child Care Action Plan

Rationale

Child care is a vital part of a community's social infrastructure; and *quality* child care is essential for healthy child development. Children who have a good start in life do better at school, enjoy improved physical and mental health, and experience long-term benefits throughout their lives.

Quality child care services are also critical for social and economic well-being and are a major component of creating a complete community. Research confirms the importance of child care to the economy, labour force participation, gender equality, social inclusion and poverty reduction.

Recognizing the importance of good quality child care that meets the needs of the community and looking at the Mid-Island area as an interconnected region, five jurisdictions partnered to develop a regional Mid-Island Child Care Action Plan. The jurisdictions working together are: the City of Nanaimo, the City of Parksville, the Town of Qualicum Beach, the District of Lantzville and the Regional District of Nanaimo, which in addition to the four communities listed previously, also includes the seven unincorporated Electoral Areas A, B, C, E, F, G, and H, as well as the Snuneymuxw, Snaw-Naw-As, and Qualicum First Nations. In addition to the unified regional action plan, this report also provides each jurisdiction with an overview of its unique policy context and related recommendations.

Scope and Purpose

This Plan presents concrete, evidence-based actions to improve access to high quality child care for the betterment of the Mid-Island community. It is a multi-year plan and includes goals and actions over the short term (2020-2023), medium term (2024-2026) and long term (2027-2030). It also identifies partnerships which need to be forged or strengthened in order to turn the recommended actions into reality.

Early learning and child care policy and funding is primarily a provincial responsibility, with some federal involvement. Local and regional governments do not have the mandate or resources to fully address the gaps in child care availability, affordability and quality, however, in working together, the Mid-Island Region strengthens the positions of each separate jurisdiction. It is also recognized that not only are the region's child care systems and supports interconnected but also existing partnerships and opportunities are often regional rather than individual to each jurisdiction. Strong partnerships to work together between all levels of government and local organizations, along with dedicated support from senior levels of government are needed to ensure the success of this Plan.

With a defined plan, and concerted and coordinated efforts, the Mid-Island Region can achieve its child care goals.

Process

The Plan was informed by a literature review on the components of quality child care systems and programs; a review of promising practices from other jurisdictions and a review of the current planning frameworks of each jurisdiction. Additionally, the Plan relied on a compilation of current demographics and child care service information.

The engagement provided key information about the needs and opportunities for child care. The process also served to build both knowledge and relationships within and across communities. The engagement methods are summarized both below and in Appendix C.

Table 1: Type of Engagement and Stakeholders Consulted for Mid-Island Region Child Care Action Plan

Engagement Method	Stakeholders
Surveys (online)	Parents and Caregivers - 905 parents representing 1,338 children birth to 12 years old
	Child care providers - 126 facilities
Interviews	Key stakeholders - 20 Individuals
	Child care providers - 10 child care providers
	Vulnerable and underserved populations - 43 people
	Snuneymuxw, Qualicum and Snaw-Naw-As First Nations
Solutions Workshops	Four virtual workshops for municipal staff, child care providers and community and public partners - 52 participants

The appendices to this Plan include: a summary of all recommendations, a glossary of child care types in BC, the Community Engagement Summary Report, and the Community Profile Report.

Provincial and Federal Policy Context

It is important to note that this Child Care Action Plan was finalized during several important periods of uncertainty, including the COVID 19 pandemic and several key announcements from senior government.

In 2018, the provincial government made a significant shift and commitment to provide new funding towards the building of a universal, high quality, publicly funded child care system for all families who need or want it. While details of the long-term plan to move child care away from the current market system are still unfolding, new policy directions were more recently confirmed. These include:

- Confirmation that child care will move to the Ministry of Education by 2023
- Work will begin on universal access to before and after school care, prioritized on school grounds
- Families will pay no more than \$10 per day for licensed child care (when the 10-year plan is implemented)
- New spaces will be expanded by developing a capital plan and modular strategy and by ensuring that whenever government builds a new school, hospital or other public project, child care is considered.
- The ECE Wage Enhancement Program will be expanded.

In addition, the Federal Government has committed to developing a Canada-wide early learning and care system.

Despite these positive developments, there are still serious challenges for families in local communities. This Plan identifies actions that will enable the Region to make a real difference within its resources and mandate as well as provide valuable information on local needs to the Province as they work to build a universal child care system.

3.0 Child Care Priorities and Recommended Actions

This Plan is organized around four priorities:

- Increasing accessibility;
- Improving affordability;
- Focusing on quality; and
- Strengthening partnerships.

The following sections outline the relevance and importance of each of the priorities, summarize what we have learned in the process of creating the Plan, and make a series of recommendations for the local government partners in Mid-Island. Many of the actions involve collaboration with others.

Priority 1: Increase Access to Child Care

Why does increasing access to child care matter?

- Families need to be able to find licensed child care spaces that meet their needs.
- Quality child care is good for the local economy and good for children.
- All families, especially underserved populations, should have their child care needs met.

Key Issues

There are four key issues regarding accessibility of child care in the Mid-Island Region:

- **Number of spaces.** As in other communities across the province, the number of available spaces generally falls far short of the demand. Respondents to the interviews and surveys variously referred to the state of child care in the Region as “desperate” or “in crisis”. The unmet need for child care spaces is particularly dire in the infant/toddler and school age children age groups.
- **Location of spaces.** Parents identified a need for child care spaces located close to home, school, and transit, all of which would make it easier for parents to access child care.
- **Spaces for underserved populations.** There are additional barriers to access for groups such as recent immigrants, lone parent families and families with children with special needs. Child care providers often do not take children with extra support needs, while at the same time there is a significant increase in these children in the Mid-Island Region. Immigrant families also sometimes experience overt discrimination from child care providers.

“My son was expelled from three daycares because they did not have the resources, staff capacity, or specialized skills needed to support his success.”

- **Spaces with non-traditional operating hours.** Options are limited for families who require child care outside of “regular” hours, such as evenings and weekends. 34% of parents and caregivers identified hours of operation as a barrier to accessing their preferred child care arrangement.

Current Child Care Availability

In the Mid-Island Region, there are 296 child care programs offering a total of 4,998 child care spaces licensed for children birth to age 12. The total number of children 12 and under is 17,120.

The following table shows child care spaces versus child population in each of the five jurisdictions in the Mid-Island Region.

Table 2: Current Child Care Spaces vs. Child Population by Jurisdiction in the Mid-Island Region

Jurisdiction	Number of Spaces	# of children	Spaces per 100
Nanaimo	3,334	11,395	29.3
Parksville	371	985	37.7
Qualicum Beach	224	485	46.2
Lantzville	250	425	58.8
Unincorporated areas in the Regional District (Electoral Areas A ,B,C,E,F, G, H)	819	3,830	21.4
Total	4,998	17,120	29.2

Source: Vancouver Island Health-Licensing, 2016 Census for child population

Forecasted Growth of the Child Population

Population projections supplied by the Regional District of Nanaimo were used in order to inform future child care space needs. Because licensed school age child care is typically better suited to younger school age children, the projections used for this Action Plan are only for the 0- to 9-year-old population, as this age group is most relevant for estimating future child care need.

Assuming a baseline growth scenario, the population of 0 to 9-year-olds in the Region is projected to increase 2.6% from 14,104 in 2020 to 14,467 in 2030.

Hours and Other Child Care Accessibility Factors

As a starting point, the number of child care spaces relative to child population is a useful indicator of child care accessibility. However, many families also face barriers to accessing the child care spaces that are available. Recent immigrant families, families with lower incomes, families led by single parents, and families with children with special needs often face additional challenges. Quality child care that is accessible to them in their neighbourhood and that offers additional family supports can make a marked difference in families’ lives.

To provide an example of accessibility challenges in child care, few facilities in the Mid-Island Region have non-traditional hours, which is difficult for parents – especially lone parents – who work non-standard business hours.

In addition, regional surveys indicated that waitlists for child care are common. This is particularly true for children under the age of three; a wait was required for 77% of these children. For children under three with parents in the lowest income category, 91% had been on a waitlist. Respondents to the Child Care Provider Survey reported waitlisted children for 82% of facilities. Of these, 55% had average wait times of more than 12 months.

Following are some regional statistics which illustrate the extent of some accessibility factors, particularly for children in lone parent families, families with lower than the median income, families with children with special needs, recent immigrants, and those families who identify Aboriginal ancestry.

- In 2016, 24.3% of all children aged 0 to 14 lived in lone parent families (4,850 children). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 1,925 children in lone parent families (28.6% of all children in this age range).
- In 2019/2020, the percentage of students in elementary schools with special needs was 7.4% in School district 68 (666 children of 8,998 total) and 8.4% in School district 69 (208 children of 2,481 total).
- Persons with Aboriginal identity¹ comprised 7.0% of the Regional District of Nanaimo's total population in 2016 (10,365 persons of Aboriginal identity).
- In 2016 in the Regional District of Nanaimo, 17.4% of residents were first generation Canadians, including 945 children under 15. 20.5% were second generation, including 3,535 children under 15.

"Most centres refused service or asked us to leave after one month because the centre and staff are incapable of handling a child with little to no verbal ability."

"Insane waitlists. We've been on a waitlist for more than four years. We expect he'll age out before we get a spot."

¹ According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Métis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.

Recommendations to Increase Accessibility

The jurisdictions in the Mid-Island Region have worked together to support the development of a regional Child Care Action Plan. To provide a policy framework to continue this collaboration and to provide strong guidance for moving forward, the first recommendation is that the Region develop a clear and consolidated strategy, outlining its child care commitments and vision.

This strategy should include, but not necessarily be limited to:

- A clear statement that child care development is a top priority for the Mid-Island Region;
- A commitment to increased accessibility, affordability, quality and partnerships;
- A clear commitment to support and encourage the not-for-profit child care sector in terms of collaboration with the different jurisdictions in the Region;
- The identification of space targets and other measurable goals;
- A general outline of resources which need to be identified;
- A commitment to inter-jurisdictional cooperation and partnerships;
- Clear direction regarding action priorities, monitoring and reporting;

Table 3: Policy and Planning Recommendations to Increase Accessibility in the Mid-Island Region

Recommendations to Increase Accessibility			
Policy and Planning			
	Action	Time Frame	External Partners
1	Develop a Mid-Island Region Child Care Policy for local governments, providing a consolidated statement of the Region's vision, goals, strategies and commitments to child care.	Short	Province, school districts, not-for-profit operators, community agencies
2	Establish an on-going Child Care Action group that would be comprised of representatives from child care providers and other service providers, the school districts and key staff from each of the Project Partner jurisdictions (Nanaimo, Parksville, Qualicum Beach, Lantzville and the Regional District) to ensure a consistent regional approach. This group would develop strategies to maximize the group's effectiveness for a systemic approach to child care in the Mid-Island Region.	Short/medium/long	Not-for-profit providers, school districts, service providers and Island Health Licensing
3	Develop an inter-jurisdictional staff position dedicated to child care. The position would focus on: <ul style="list-style-type: none"> Monitoring the progress of implementing the recommendations and meeting targets Reporting annually to Councils and the School districts Facilitating partnerships, and engaging with Provincial and community partners Identifying locations for new, not-for-profit and public quality child care Bringing child care providers and staff together for information sharing, joint training and education; and providing more information for parents about child care, how to access it and how the system works, especially targeting more vulnerable populations. 	Short/medium	Not-for-profit providers, Island Health, all Mid-Island jurisdictions, school districts
4	Bring community partners together to explore the feasibility of a centralized waitlist and centralized list of providers in the Region to remove barriers for families to access current child care spaces.	Medium	Child care providers, school districts, Island Health, Child Care Action Group
5	Consider the opportunities for developing local government/Regional District-owned child care facilities, including accessing Provincial Capital funding to build child care spaces.	Short/medium	Province, not-for-profit operators

6	<p>Develop and maintain an inventory of existing publicly owned spaces and properties that could be developed for child care that includes:</p> <ul style="list-style-type: none"> • Assets in the various jurisdictions (buildings and land) that are potential sites for capital redevelopment; • Underutilized or vacant spaces or land, including parks, that could be used for child care; and • Working with other public and not-for-profit partners to identify additional potential spaces and land. 	Short/medium/long	Island Health, School districts, not-for-profit child care providers, post-secondary institutions
7	Endorse the space targets identified in this report recognizing that partnerships and solutions outside of the mandate and resources of local governments are needed to deliver on these needs.	Short	Not-for-profit providers, school districts, Island Health
8	Develop building models/prototypes and high-level cost estimates to facilitate planning for new child care facilities on municipal sites.	Short	None
9	Where possible, prioritize spaces for age groups which are most underserved, like infant/toddler and school-age. Direct these new spaces to areas of the Region with lower access rates, growing population, and priority locations such as public facilities and parks, new residential and commercial developments, along transit corridors and on school properties. (See Appendix E)	Short/medium/long	Child Care providers, school districts, Island Health, Regional District Transit System
10	Include consideration and provision of child care within strategies and projects for affordable housing, seniors' residents and transit expansion/improvement.	Short/medium/long	BC Housing, Regional Transit System, Island Health
11	Bring partners together to explore and pilot, with providers, child care that offers longer, non-traditional and/or flexible hours.	Medium	Child Care Action Group, Province, Island Health, not-for-profit providers, school district
12	Engage in ongoing dialogue with First Nations and Métis, focusing on meeting the needs of Indigenous families/children and supporting high quality and culturally rooted programming.	Medium	Indigenous Communities

Table 4: Regulatory and Development Process Recommendations to Increase Accessibility in the Mid-Island Region

Recommendations to Increase Accessibility			
Regulations and Development Processes			
	Action	Time Frame	External Partners
13	Consider child care as a desired amenity in return for bonus density, where applicable.	Short/medium/long	None
14	Identify and consider changes to municipal processes and regulations to better facilitate creation of new child care spaces. Include a review of fees charged. Where appropriate, changes should align with Island Health.	Short/medium	Island Health, applicants, not-for-profit child care providers
15	Put not-for-profit child care applications at the front of the permitting queue, when/if the size of the queue is causing delays in approval.	Ongoing	None
16	Join or co-host Island Health child care information meetings for potential child care providers who are interested in opening child care centres to describe the various 'licensing' roles and processes for each jurisdiction.	Short/medium	Island Health
17	Add comprehensive information on all municipal websites regarding child care. This should include information for families seeking child care (e.g. links to the Pacific Care Child Care Resource and Referral and the BC Child Care Map) and particularly, should include zoning, processing, financial and related information for operators wanting to develop a child care facility. Information should align with Island Health where appropriate.	Medium	Not-for-profit child care providers, Island Health

Priority 2: Make Child Care More Affordable

Why does affordable child care matter?

- The cost of child care is not sustainable or affordable for many families. This is stressful, causes financial strain and keeps parents from participating in the labour force.
- Unaffordable child care has disproportionate negative impacts on low income and vulnerable families who are in need of the most support.

Child care is expensive and for many (if not most) families, the cost of child care is the driving factor in the choices they make regarding which child care operation their children will attend, or whether they consider other alternatives (e.g. relatives caring for children full time). In the Mid-Island Region, cost was reported in the Parent and Caregiver Survey as the number one barrier to parents being able to use their preferred child care arrangement.

“The cost of having two children in after school care and one in daycare makes it so I work all day with zero extra income. Everything I make goes to child care.”

Even though there are now more financial supports provided by the Province of BC to parents than ever, families are still struggling with affordability. In addition, child care providers suggested that many parents accept lower quality spaces because of a lack of affordable child care options.

Affordability challenges are exacerbated for families who face additional challenges accessing care, including low income families, families with multiple children, lone parents, recent immigrants,

families with children with special needs, foster families and families in which parents work non-regular hours. For instance, child care for a two-year-old costs a minimum of \$12,000 per year, while the median income of lone parent families in the Region, with a child under six, is \$27,824.

Local and regional governments have limited opportunities to directly reduce the cost of child care for families; key tools and responsibility rest with senior governments. However, local and regional governments can provide some supports to not-for-profit operators to help make their child care operations feasible, so they can, in turn, offer affordable child care to families.

“It costs less to stay home than to have three kids in care, at separate centres, with long waitlists.”

Recommendations to Improve Affordability

Table 5: Recommendations to Improve Affordability in the Mid-Island Region

Recommendations to Improve Affordability			
	Action	Time Frame	External Partners
1	Create a grant program for not-for-profit child care centres to assist with facility upgrades and maintenance or to offer extended hours.	Short/medium	Not-for-profit providers
2	Lease or rent local government-owned facilities or land to not-for-profit child care providers at no cost or below-market rates.	On-going	Not-for-profit providers
3	Reduce application fees for permits.	Short	None
4	Advocate to senior governments to reduce the cost of child care and increase compensation for child care facility staff.	Short/medium/long	Senior governments, School district

Priority 3: Focus on Quality

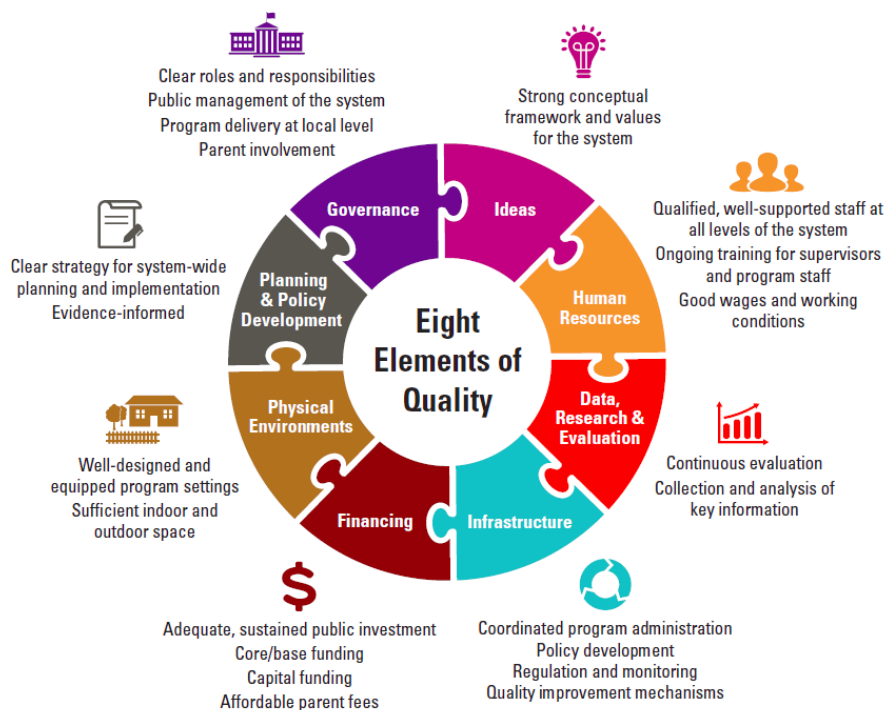
Why does focusing on child care quality matter?

- The research is clear that high quality child care is linked to positive outcomes for children, while poor quality care can have negative long-term effects.
- Parents dropping their children off at a child care centre each working day want to feel secure knowing their children will receive safe, high-quality care.

Quality Child Care Systems

While the direct mandate and authority to build, monitor and assess a quality child care system is within the Provincial government's scope, local governments can ensure that actions and investment decisions are aligned with what research has identified as eight commonly accepted, interconnected elements of a quality child care system, graphically presented below. Strong public policy is required to provide the foundation for a quality child care system that incorporates all eight components.

Figure 1: Eight Elements of Quality Child Care



(Source: Martha Friendly and Jane Beach, (2005). Elements of a high quality early learning and child care system. Childcare Resource and Research Unit.)

Quality Child Care Programs

At the program level, positive relationships between families and providers, among colleagues and between children and staff is strongly indicative of quality care.

Additionally, when staff have higher levels of education and training, feel appreciated, and are well-supported, the quality of care increases. Planned programming and a strong curriculum that is tailored

to meet the diverse needs of children further enhances quality. There is also ample evidence that a well-designed indoor/outdoor space is critical to supporting the development of children under five.

Comments from respondents to the regional Child Care Provider survey suggest that recruiting and maintaining qualified Early Childhood Education (“ECE”) staff is the most significant barrier to developing and sustaining quality child care programs. Operators have difficulty attracting qualified staff; they are often not able to pay benefits or competitive wages (32% of operators offer no health or pay-related benefits). Forty-eight percent (48%) of respondents to the Child Care Provider Survey reported high staff turnover in the past year, with 90% of those identifying that the resulting vacant positions were “difficult to fill”.

“We wish there was less turnover of staff.”

In order to address the quality criteria identified, special attention should be paid to the following considerations regarding staff:

- Staff should have ECE training;
- There should be some staff with special needs and cultural/English as an additional language skill if required;
- Wages should be decent and commensurate with the level of training; and
- There should be written policies and formal procedures, which give staff a feeling of worth and certainty, such as: job descriptions, contracts, salary schedule, performance reviews and a staff manual.

“I am only able to work on weekends, because of the lack of affordable, trustworthy childcare. Our family gets no time together.”

Auspice

Child care auspice (who operates and manages the services), is critically important to the quality of child care programs. In BC (and Canada), three types of auspices exist:

- Not-for-profit child care services;
- For-profit child care services, including Family Child Care and In Home Multi Age; and
- Publicly operated child care services (i.e. services directly operated by a public entity such as a municipal government or school district).

The Mid-Island jurisdictional governments value and recognize that many for-profit child care centres provide high quality, reliable care and a strong commitment to families and the community. From a broader research perspective, however, findings regarding auspice have consistently demonstrated that, on average, not-for-profit and publicly operated centres perform better on global evaluation scales compared to for-profit centres. British Columbia studies find that the reliability of not-for-profit centres is much higher: not-for-profit centres are 97% more likely than for-profit centres to continue long term operation.

Studies also show that for-profit centres provide less teaching support, lower salaries, fewer staff policies, limited job performance appraisals and limited grievance procedures, compared to not-for-profit centres. These factors can contribute to lower workplace morale and high staff turnover, negatively affecting quality of care. In response to the research, the province has prioritized funding for public and not-for-profit child care.

Across British Columbia, about 50% of the child care facilities are operated on a not-for-profit or public basis. In the Mid-Island Region, family and in-home multi-age care account for 34% of all *programs* (101 programs) and 15% of child care *spaces* (737 spaces). For-profit care accounts for 46% of all *programs* (135 programs) and 56% of all *spaces* (2,799 spaces). Not-for-profit and public care accounts for only 20% of all *programs* (60) and 29% of *spaces* (1464 spaces).

Following is a summary of the number of programs and spaces offered by service type and auspice:

Table 6: Summary of Programs and Spaces by Service Type and Auspice in the Mid-Island Region

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	101	34%	737	15%
Group and multi-age: for-profit	135	46%	2,799	56%
Group and multi-age: not-for-profit	50	17%	1247	25%
Indigenous government/public sector	10	3%	215	4%
Total	296	100%	4,998	100%

**Source: UBCM/MCFD Project Inventory*

By engaging with public and community partners, Mid-Island jurisdictional governments can create policy and make commitments that contribute to quality, including supporting operators. However, the mandate and authority to monitor and assess a quality child care system is within the provincial government's scope.

Recommendations to Promote and Influence the Quality of Child Care

Table 7: Recommendations to Promote and Influence the Quality of Child Care in the Mid-Island Region

Recommendations to Promote and Influence Quality			
	Action	Time Frame	External Partners
1	When and if considering the development of local government-owned child care spaces (as in Recommendation #4 under Accessibility), ensure that: <ul style="list-style-type: none"> • Partners are not-for-profit and/or public child care providers • Local government policy expectations are met • Local/regional governments consider the efficacy of developing facility design guidelines (see note below) that are based on what the research states is best practice for child care (i.e. square footage for indoor and outdoor space that exceed the minimum Provincial Licensing Requirements.) 	Short	Not-for-profit providers, School districts
2	Support the province in its <i>“Early Care and Learning Recruitment and Retention Strategy”</i> initiative through joint advocacy.	Short	School districts, Not-for-profit providers,
3	Explore the role of providing leadership for more and better-qualified ECE staff and additional training opportunities such as workshops, online seminars, professional education, etc.	Short	VIU, not-for-profit operators
4	Increase the number of licensed, not-for-profit, publicly funded child care operations, including consideration of strategies to recruit not-for-profit operators to move into the Mid-Island Region.	Long	Province, not-for-profit providers, School districts, Parks, Island Health
<p>Note: Design guidelines: a municipality can have a set of standards for child care design which are based on research and best practice, that can be applied when building their own child care spaces in/on public assets or if they negotiate child care as part of a CAC or rezoning. These standards can exceed the minimum Provincial licensing requirements. Generally, they cannot be ‘required’ for child care builds that are being done by others. There are two municipalities in the Province that have developed both design guidelines and technical building guidelines, Richmond and Vancouver.</p> <ul style="list-style-type: none"> • City of Richmond Child Care Design Guidelines • City of Vancouver Child Care Design Guidelines and City of Vancouver Child Care Technical Guides 			

Priority 4: Develop Collaboration and Partnerships

Why does developing collaborative relationship-building matter?

The child care system involves many parties playing various roles, which requires intentional relationships and collaboration amongst and across jurisdictions.

In the engagement process for this Plan, the theme of *partnerships* was raised time and again as a key approach to increasing the quality, affordability and accessibility of child care in the Region.

- The value of collaboration was clearly identified, focusing in particular on partnerships between local government, child care providers and school districts;
- Ideas regarding partnerships included joint hiring of child care staff (e.g. School districts and recreation centres) in order to create full-time jobs with decent wages and benefits; child care in seniors' centres and hospitals; and working with the corporate sector to identify further opportunities;
- The continuation of this Project's Task Group (see Recommendation #2 under Accessibility) was mentioned as a vehicle for planning and better coordination;
- The value of stronger ongoing relationships with the First Nations and Indigenous peoples was recognized;
- Opportunities for collaboration focused on the use of publicly owned land/facilities such as city, schools and post-secondary institutions.

The following actions will help to bring focus and attention to the essential relationships and partnerships for a coordinated quality child care system that meets families' needs across the Mid-Island Region.

Recommendations to Develop Collaboration and Partnerships

Table 8: Recommendations to Develop Collaboration and Partnerships in the Mid-Island Region

Recommendations to Develop Collaboration and Partnership			
	Action	Time Frame	External Partners
1	Build supportive and learning relationships with Métis and First Nations. Support indigenous perspectives and history in child care.	Ongoing	Métis and First Nations
2	Build a partnership and joint planning protocol with the school districts around child care to: <ul style="list-style-type: none">• Ensure child care is part of all new school facilities and renovated school spaces where possible;• Facilitate the use of school spaces and grounds for school age care operations, where possible;• Structure regular and ongoing communication between the local governments and School districts;	Short/medium	School districts, not-for-profit providers

	<ul style="list-style-type: none"> • Support the provincial direction of universal school age care and the commitment to move child care to the Ministry of Education; • Explore the use of empty, surplus school spaces for child care (e.g. Rutherford school in Nanaimo); and • Work with the school districts to ensure that child care providers have access to school facilities during holidays and professional development days. 		
3	Work with not-for-profit child care providers on collaborations that support their existing service and potential expansion.	Short/medium/long	Not-for-profit child care providers
4	Pursue partnership opportunities with employers in the corporate sector to provide spaces for child care facilities that serve their employees' families and community. These could be joint projects with the involvement of several employers and not-for-profit child care providers.	Short/medium/long	Local employers, Chamber of Commerce
5	With Parks departments, community service providers and others, explore the possibilities of providing more after-school activities for 10-12 year olds as the needs of this population are generally not met in licensed child care programs.	Medium/long	Parks (Community Centres), other community facilities such as a Boys and Girls Club.
6	<p>Advocate to senior governments to provide support to the child care sector and families in the following areas and other priorities that may arise:</p> <ul style="list-style-type: none"> • Ensuring the needs of Mid-Island children are a priority for new spaces in provincial planning and funding • Recruitment, remuneration and retention of ECE's; • Increased resources to support children with additional needs through Supported Child Development • Lower fees for families; and • Funding to support non-traditional hours of care. 	Short/medium	School districts
7	Continue to support and collaborate with the Early Learning and Child Care Council ("ELCO").	Ongoing	ELCO

4.0 Child Care Space Targets

Purpose of Targets

Targets for additional child care spaces assist with planning and prioritization to meet community needs over the coming years. Additionally, the provincial government has requested local governments to identify targets as part of the scope of project work that was funded by the child care planning grant.

It is well recognized that local governments do not hold the mandate and resources to address child care needs alone. Local governments require support from senior levels of government, community partners, and others to address gaps in child care service. Currently, the senior governments have committed capital funding to support space creation, but if this funding support declines, then space creation could be expected to slow. Community agencies and public institutions are already creating new child care spaces that work toward meeting the overall targets for the Mid-Island Region. Two recent examples are the 75 spaces being created by Vancouver Island University and the 334 spaces being created by School District 68.

Process of Creating Targets

There are no federal or provincial standards or recommendations for the number of child care spaces per capita. Therefore, space targets for the Mid-Island Region were informed by scans on other jurisdictions, local demographic and labour force data, and consultation with municipal representatives and key partners in the child care sector.

Examples from other jurisdictions with publicly funded child care included the European Union, where the target is 33 spaces per 100 children under the age of 3, (Mid-Island is 9/100); and 90 spaces per 100 children from 3 years to school age, (Mid-Island is 39/100). In Quebec, the only publicly funded child care system in Canada, there is an average of 55 spaces per 100 children 12 and younger.

Targets also take into account projected population growth and employment rates for families, which both drive need for child care. Also, the targets focus on significantly increasing the two age groups with the largest gaps in access in the Region: infant/toddlers and school age children while recognizing the need for affordable services for preschool aged children as well.

Through engagement with municipal representatives and key stakeholders, there was strong emphasis on a consistent regional approach to space targets. As such, each jurisdiction has the same targeted coverage rates for each age group.

The space targets for the Mid-Island Region are based on the following assumptions:

- The focus is on full-time, group, centre-based child care programs (See Appendix B for a glossary of child care types in BC).
- Space targets for 2030 are based on estimated child population for 2030. These estimates are based on Census 2016 and population projections prepared by Vann Struth Consulting Group for the Regional District of Nanaimo in November 2019. Child population for 2020 is also based on these projections. As requested, population projections were not used for the District of Lantzville.
- Population projections were available for the 0 to 14-year-old population in each municipality and electoral area, except for the District of Lantzville, for 2020, 2021, 2026, and 2041. We have

assumed a linear, constant rate of change in child population between 2020 and 2021 and between 2026 and 2041 to estimate child populations in 2020 and in 2030.

- In the absence of other data, we also assume the overall demographic trend for the 0 to 14-year-old population is the same for each age sub-group (e.g. the under 3 population following the same trend as the school age population).
- Because licensed school age child care is typically better suited to younger school age children, these targets are focused only on the 5 to 9-year-old population.
- The current number of spaces refers to group child care only, as the municipalities and School districts have a greater ability to facilitate development of group child care than family child care. Furthermore, family child care has high rates of turnover which creates uncertainty when factored into long-term planning.
- Licensing regulations (i.e., group sizes) were used to estimate that each infant/toddler program has 12 spaces, each preschooler age program has 25 spaces, and each school age program has 24 spaces. This is used to estimate the number of new programs needed to reach each target.

Using the learnings and insight gained from the need's assessment, the community engagements and the solution workshops it is recommended that the local governments consider setting child care space targets for the Mid-island Region at 50% coverage for children under 3, 75% coverage for children 3 to 5 not yet in school, and 50% coverage for school age child under 10.

What are the targets?

The table below identifies the current situation and the child care situation in 2030 assuming no new child care spaces are added, given projected population changes for children 0 to 9.

Table 9: Current Child Care Spaces, 2020 vs 2030 Child Population, Mid-Island Region

Age Group	Current Situation			Projected 2030 Population (with no new Spaces added)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Space per 100 children
0 to 2 years	3,879	342	9	4,001	9
3 to 4 years (and half of all 5-year-olds)	3,515	1,377	39	3,600	38
6 to 9 years (and half of all 5-year-olds)	6,710	1,590	24	6,866	23

To reach the 2030 targets, the Mid-Island Region will need 4,872 new licensed spaces over the next ten years.

Table 10: Spaces Targets for Mid-Island Region, 2020-2030

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	9 spaces per 100 children	50 spaces per 100 children	1,658 new spaces
3 to 4 years (and half of all 5-year-olds)	39 spaces per 100 children	75 spaces per 100 children	1,371 new spaces ²
6 to 9 years (and half of all 5-year-olds)	24 spaces per 100 children	50 spaces per 100 children	1,843 new spaces

For reference, Table 11 shows the number of new spaces needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030 for the entire region; as well as what this means in terms of approximate number of new programs³.

Table 11: 20%, 33%, 50%, and 75% coverage targets by 2030 in Mid-Island Region

Age Group	20 Spaces per 100 by 2030		33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	458	38	978	82	1,658	138	2,659	222
3 to 4 years (and half of all 5-year-olds)	-	-	-	-	423	17	1,371	55
6 to 9 years (and half of all 5-year-olds)	-	-	676	28	1,843	77	3,560	148

² This number is based on the sum of new spaces needed in each jurisdiction, which differs slightly from 75% coverage across the entire region because Lantzville has already significantly exceeded the 75% target for this age group.

³ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

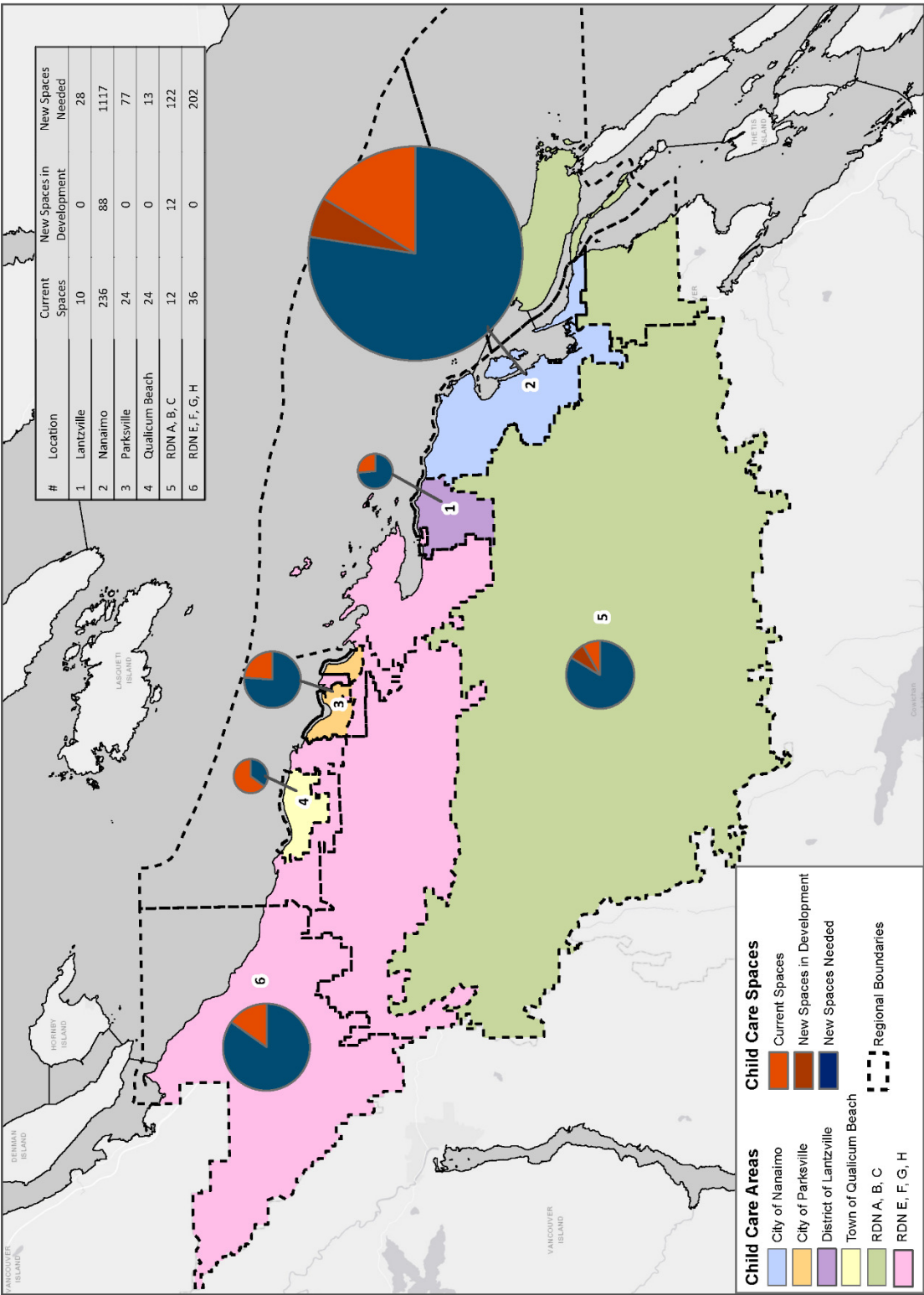
Table 12 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time, taking into account those spaces already in development.

Table 12: Short, medium, long term space targets for Mid-Island Region

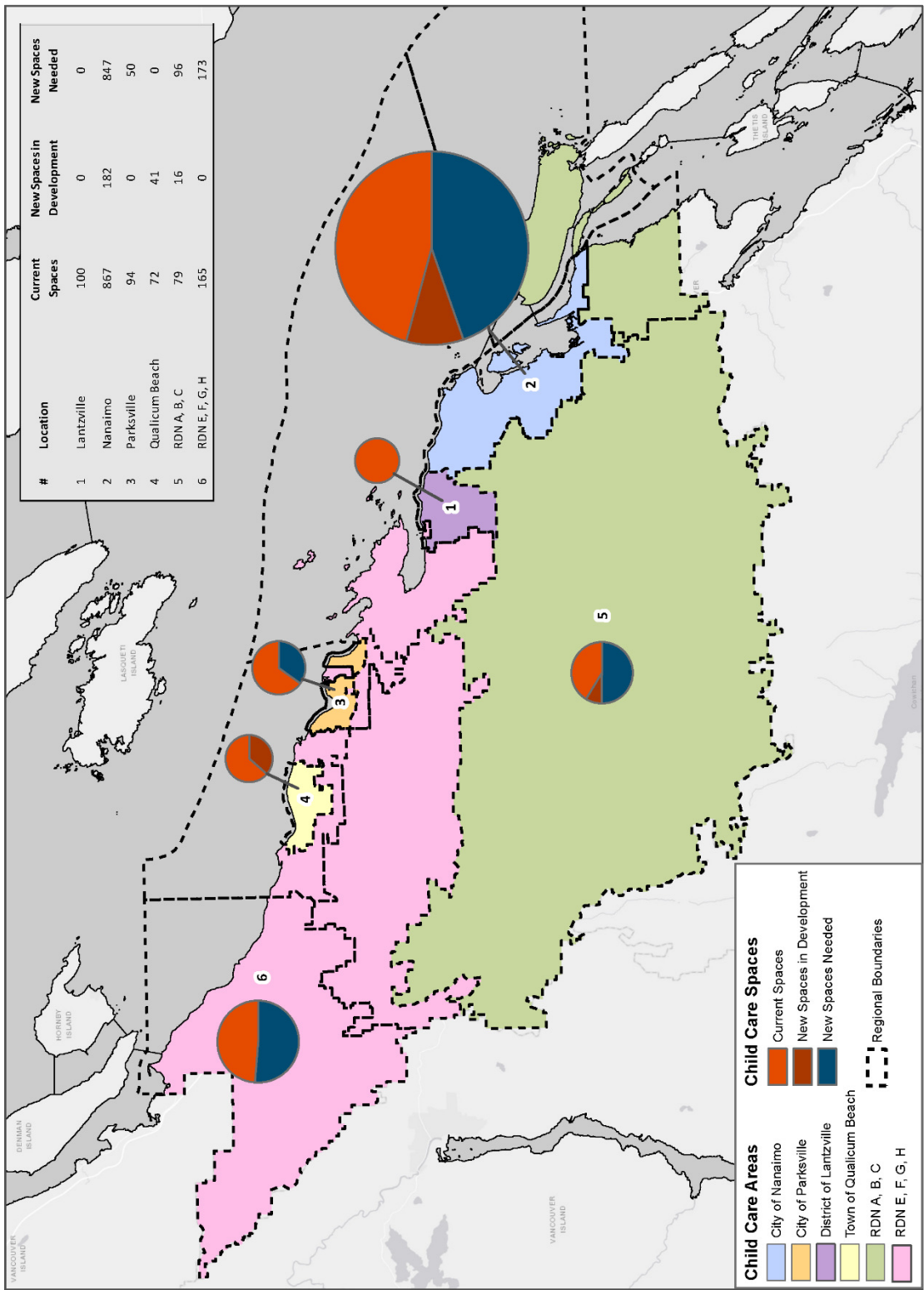
Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	1,658	137	100	490	519	648
3 to 4 years (and half of all 5-year-olds)	1,371	53	198	410	437	530
6 to 9 years (and half of all 5-year-olds)	1,843	77	252	548	594	710

Section 7 shows the space targets, including suggested new spaces in the short, medium, and long-term, for each of the partner municipalities and for the unincorporated electoral areas.

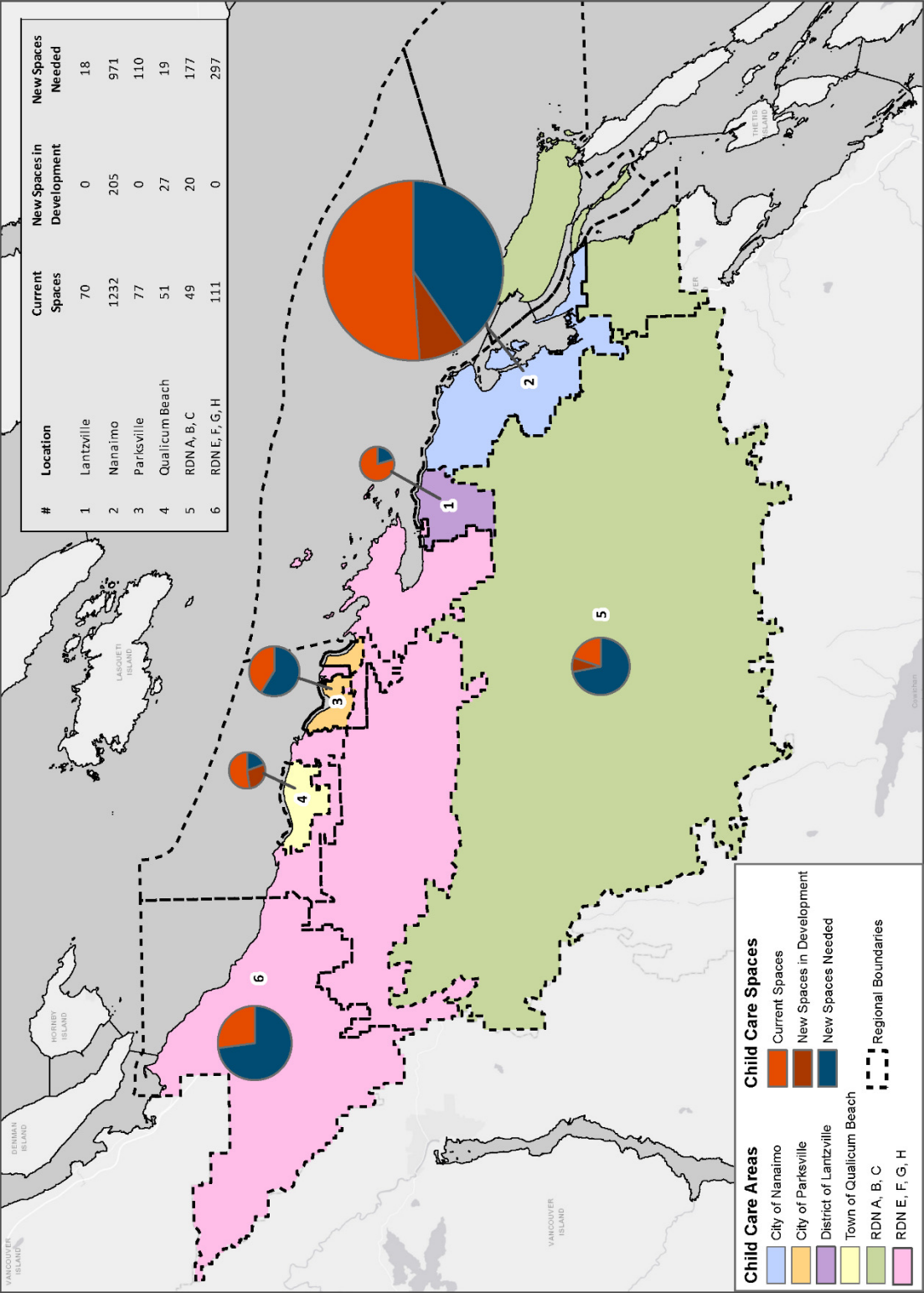
Mid-Island Region Child Care Spaces, Group Under 3 Years Target: 50 Spaces per 100 Children by 2030



Mid-Island Region Child Care Spaces, Group 2.5 Years to School Age Target: 75 Spaces per 100 Children by 2030



Mid-Island Region Child Care Spaces, Group School Age– Priority 5 to 9 Years Target: 50 Spaces per 100 Children by 2030



5.0 Implementation, Monitoring and Reporting

On an annual basis, the jurisdictions should work with the recommended regional Child Care Action Group (Recommendation #1 under “Coordinated Child Care Services”), repeated below:

Establish an on-going Child Care Action group that would be comprised of representatives from child care providers and other service providers, the School districts and key staff from each of the Project Partner jurisdictions (Nanaimo, Parksville, Qualicum Beach, Lantzville and the Regional District). Develop strategies to maximize the group’s effectiveness for a systemic approach to child care in the Mid-Island Region.

This group would, among other tasks, monitor progress toward the actions in this Plan and child care space creation targets.

This Plan also recommends a cross-jurisdictional staff position (school districts/municipalities) which would also provide some monitoring capacity.

Annual progress reports to elected officials will document successes, challenges, and learnings, with recommendations for necessary changes. These reports may be used to support annual budget requests needed to implement many of the recommended actions in this Plan.

After the jurisdictions receive the annual Progress Report, staff should share it widely with their municipal partners, the child care provider community and other levels of government.

6.0 Conclusion

Quality child care is a vital part of the social network and positively affects the overall health and well-being of all communities. The Mid-Island Action Plan builds on the goal of increasing access to affordable, quality child care services in the Region. The Plan’s four goal areas of increasing access to child care, making child care more affordable, focusing on quality, and strengthening collaborations and partnerships all contribute towards enhancing the provision of child care services over the next 10 years. Ongoing monitoring and reporting on the implementation of this plan will allow the ability to assess progress towards achieving the goals and to identify opportunities to modify the plan as needs change over time.

7.0 Unique Recommendations and Customized Space Targets for Each Local Government

The following sections provide information specific to each of the jurisdictions participating in this regional Plan: the City of Nanaimo, City of Parksville, Town of Qualicum Beach, District of Lantzville and the Regional District of Nanaimo (unincorporated electoral areas A, B, C, E, F, G and H). Each section includes the three same subsections: the first is a description of the unique characteristics of the local government's policy and planning framework, the second is commensurate, custom recommendations; and the third is information on a number of space targets.

Along with the unique recommendations for each jurisdiction, the 32 'regional' recommendations noted in Section 3: Child Care Priorities and Recommended Actions also apply to each of the five jurisdictions.

City of Nanaimo

City Policies and Regulations

Nanaimo's policy and regulatory tools support child care both directly (Zoning Bylaw and 2004 Social Development Strategy) and indirectly (child care being eligible for grants and permissive property tax exemptions).

- **Official Community Plan ("OCP"):** The Nanaimo OCP has a chapter on Encouraging Social Enrichment. While providing a framework supportive of child care, the chapter does not specifically mention child care and the OCP does not identify mechanisms for pursuing child care in the community.
- **Zoning Bylaw:** The Nanaimo Zoning Bylaw contains a definition for "day care facility". Two types of child care (day care) facilities are recognized in the City of Nanaimo: home-based and commercial. Home based facilities are permitted in all residential and agricultural rural residential zones and can accommodate a maximum of 16 children. Commercial child care is a permitted use in approximately 26 zoning districts. The bylaw does not specify a maximum capacity for commercial child care operations. The zoning bylaw also has a Schedule D which identifies a comprehensive set of criteria for a development to achieve additional density. Child care is identified in the "site selection" category. A developer would receive one point for locating within 400m of an existing child care facility or if a child care facility were included in the development.
- **Supportive Policies:** The City has a few policies in place that are, or could be, supportive of child care:
 1. The 2004 *Social Development Strategy* defines a social vision for Nanaimo, goals to achieve the vision and strategies to achieve the goals. One of its suggested strategies was to "locate new child care centres, public schools and senior serving facilities in close proximity to each other and promote joint programming and volunteer opportunities".
 2. *Social Response Grants* are intended for initiatives and projects of a significant scope. The annual budget for these grants is \$60,000 and applications up to that amount are accepted.
 3. *Community Vitality Grants* are available for smaller projects. The annual budget is \$25,000 and applications up to \$10,000 will be accepted.

4. *Permissive Property Tax exemptions* are authorized by the Community Charter, allowing municipalities to grant tax exemptions providing certain conditions are met. Nanaimo has a program for exemptions and not-for-profit child care facilities would be eligible to apply.

Recommendations to Improve Accessibility – Nanaimo Regulations and Processes

The following recommendations are in addition to the 32 regional recommendations presented in Section 3.

Table 13: Unique Recommendations to Improve Accessibility in the City of Nanaimo

Recommendation for the City of Nanaimo			
	Action	Time Frame	External Partners
1	Review Schedule D of the Zoning Bylaw and allocate a much higher point value for including child care in a development.	Short	None
2	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, not-for-profit child care providers, community as a whole, through OCP consultation
3	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole, through OCP consultation
4	Amend the terminology in the Zoning Bylaw, updating the definition section and replacing references to "day care facility" with "child care facility".	Short	None
5	Review the Zoning Bylaw with the aim of increasing the number of zoning districts in which child care facilities could be accommodated as a permitted use.	Medium	Not-for-profit child care providers; Island Health Licensing (to help identify locational priorities)
6	Promote the permissive tax exemptions to not-for-profit child care providers, where applicable.	On-going	Not-for-profit child care providers
7	Include child care in the City's next Strategic Plan (2023-2027) and identify child care as a priority for the Strategic Infrastructure Reserve (enacted January 2020).	Medium	None

Space Targets for Nanaimo

Table 14 shows the number of children by age group in 2020, current number of spaces, and current spaces per 100 children by age group. It also shows projected child population for 2030, and spaces per 100 in 2030 assuming no new child care spaces are built.

Since the number of children in Nanaimo is projected to increase by 2030, if the number of child care spaces were unchanged in 2030, coverage rates would decrease for all age groups.

Table 14: Current Child Care Spaces, 2020 vs 2030 Child Population, City of Nanaimo

Age Group	Current Situation			Projected 2030 Population (with no new Spaces added)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Space per 100 children
0 to 2 years	2,734	236	9	2,883	8
3 to 4 years (and half of all 5-year-olds)	2,397	867	36	2,528	34
6 to 9 years (and half of all 5-year-olds)	4,567	1,232	27	4,815	26

Because the City of Nanaimo has a larger population than other Mid-Island municipalities, it would require a significantly larger number of spaces and associated staff to reach the regional coverage rate targets. To reach the 2030 targets, the City of Nanaimo would need 3,410 new licensed spaces over the next ten years.

Table 15: Overview of Space Targets, City of Nanaimo

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	9 spaces per 100 children	50 spaces per 100 children	1,205 new spaces
3 to 4 years (and half of all 5-year-olds)	36 spaces per 100 children	75 spaces per 100 children	1,029 new spaces
6 to 9 years (and half of all 5-year-olds)	27 spaces per 100 children	50 spaces per 100 children	1,176 new spaces

For reference, Table 16 shows the number of new spaces needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁴.

Table 16: New Spaces/Programs Needed to Reach 20%, 33%, 50%, and 75% Coverage by Age Group, City of Nanaimo

Age Group	20 Spaces per 100 by 2030		33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	341	28	715	60	1,205	100	1,926	161
3 to 4 years (and half of all 5-year-olds)	-	-	-	-	397	16	1,029	41
6 to 9 years (and half of all 5-year-olds)	-	-	357	15	1,176	49	2,380	99

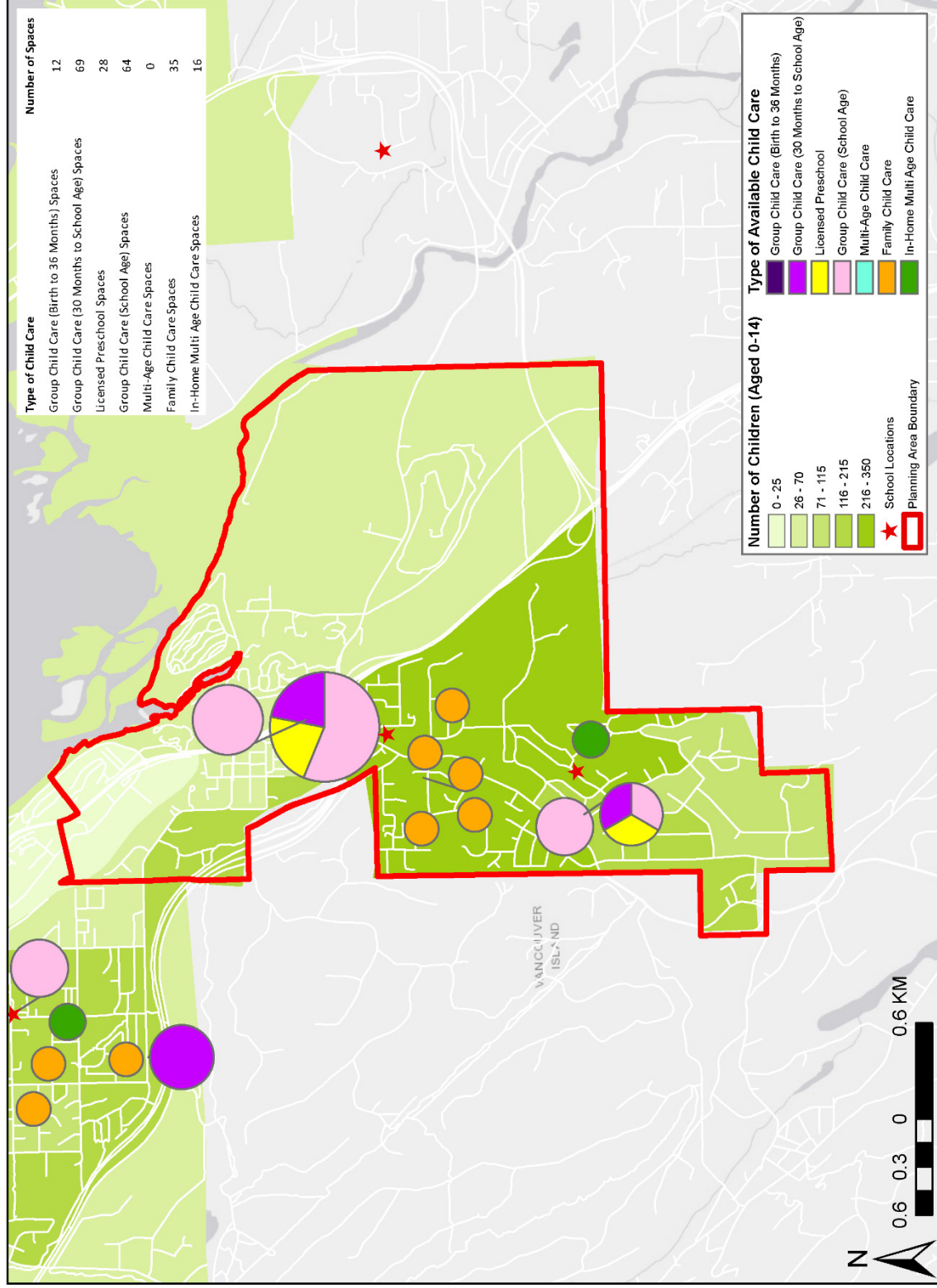
Table 17 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time, taking into account those spaces already in development. Nanaimo already has in development 88 infant/toddler spaces, 182 preschooler age spaces and 205 school age spaces, which will contribute to reaching these targets.

Table 17: Space Targets for City of Nanaimo - Short, Medium, Long Term

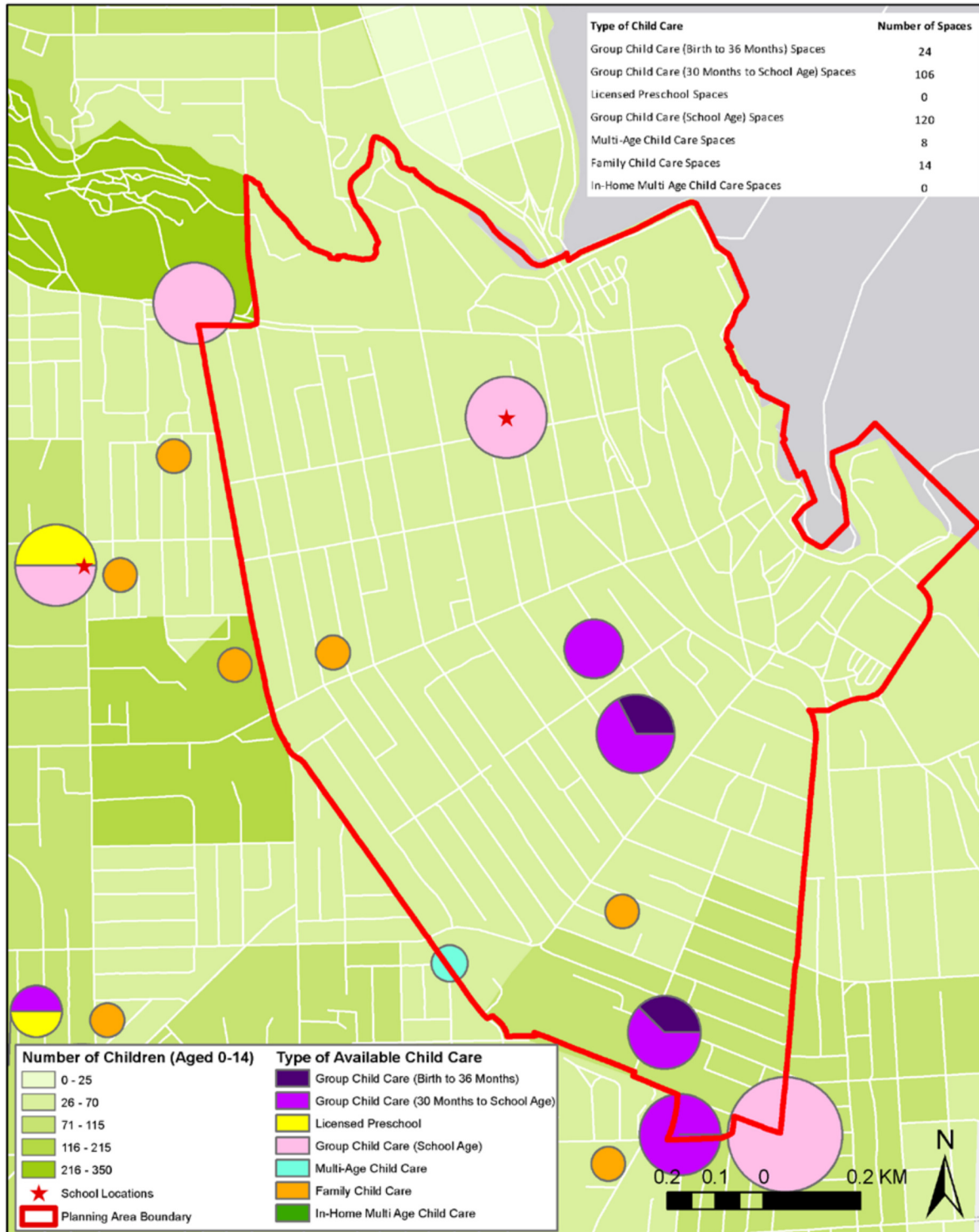
Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	1,205	100	88	360	360	485
3 to 4 years (and half of all 5-year-olds)	1,029	41	182	300	300	430
6 to 9 years (and half of all 5-year-olds)	1,176	49	205	360	360	456

⁴ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

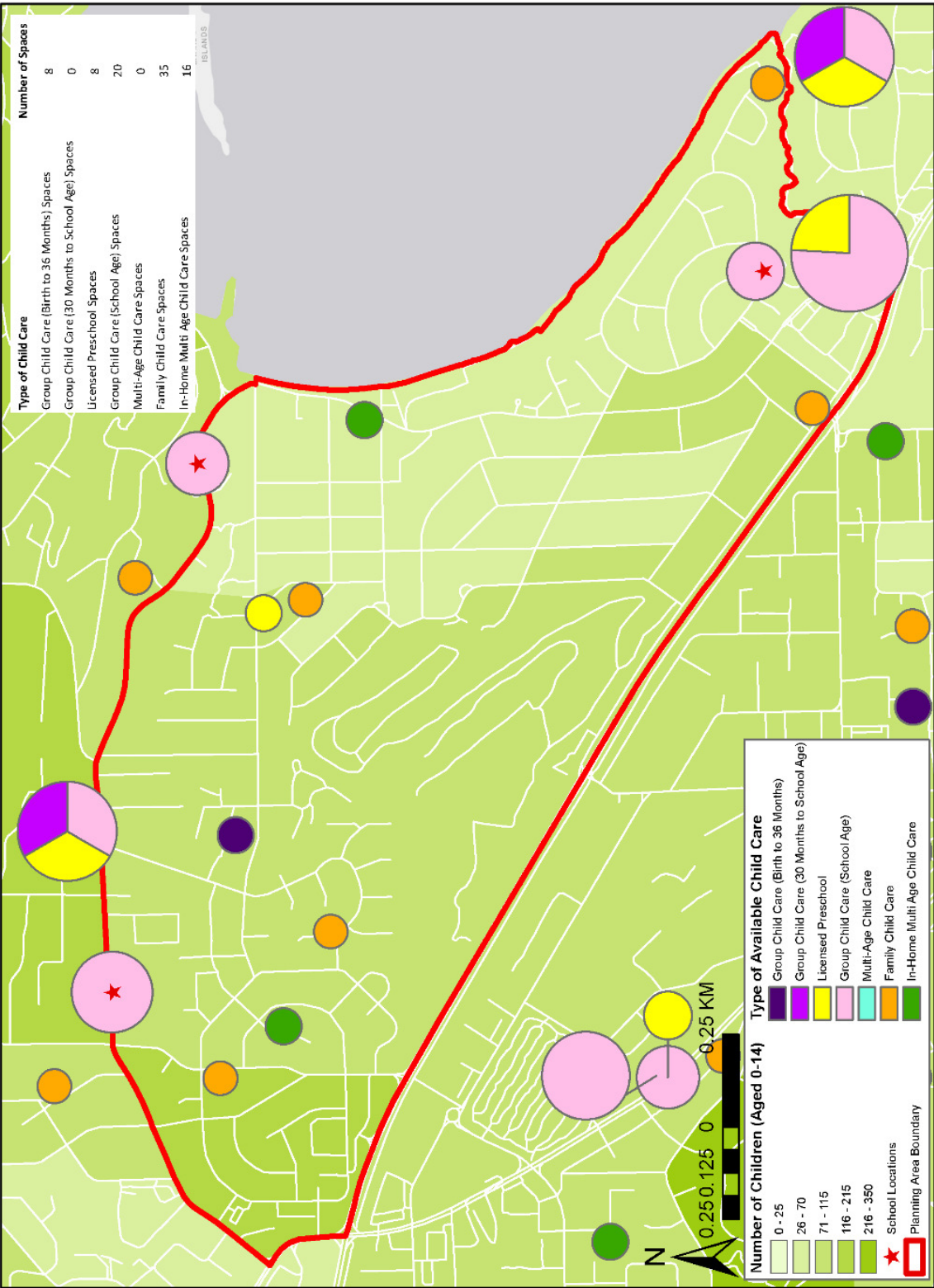
Child Care Facilities and Spaces: Nanaimo, Chase River Planning Area, 2020



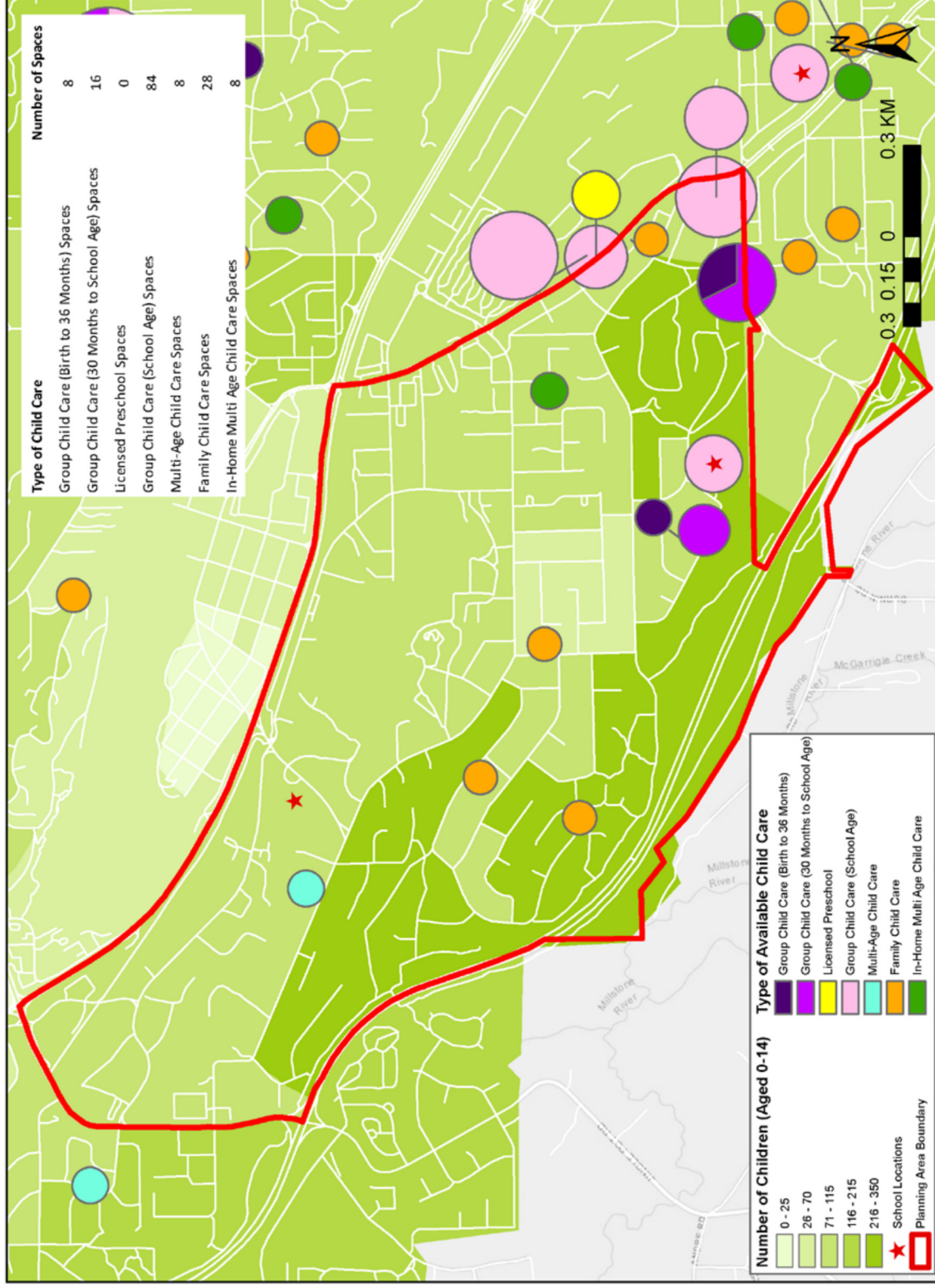
Child Care Facilities and Spaces: Nanaimo, City Center/ Protection Island Planning Area, 2020



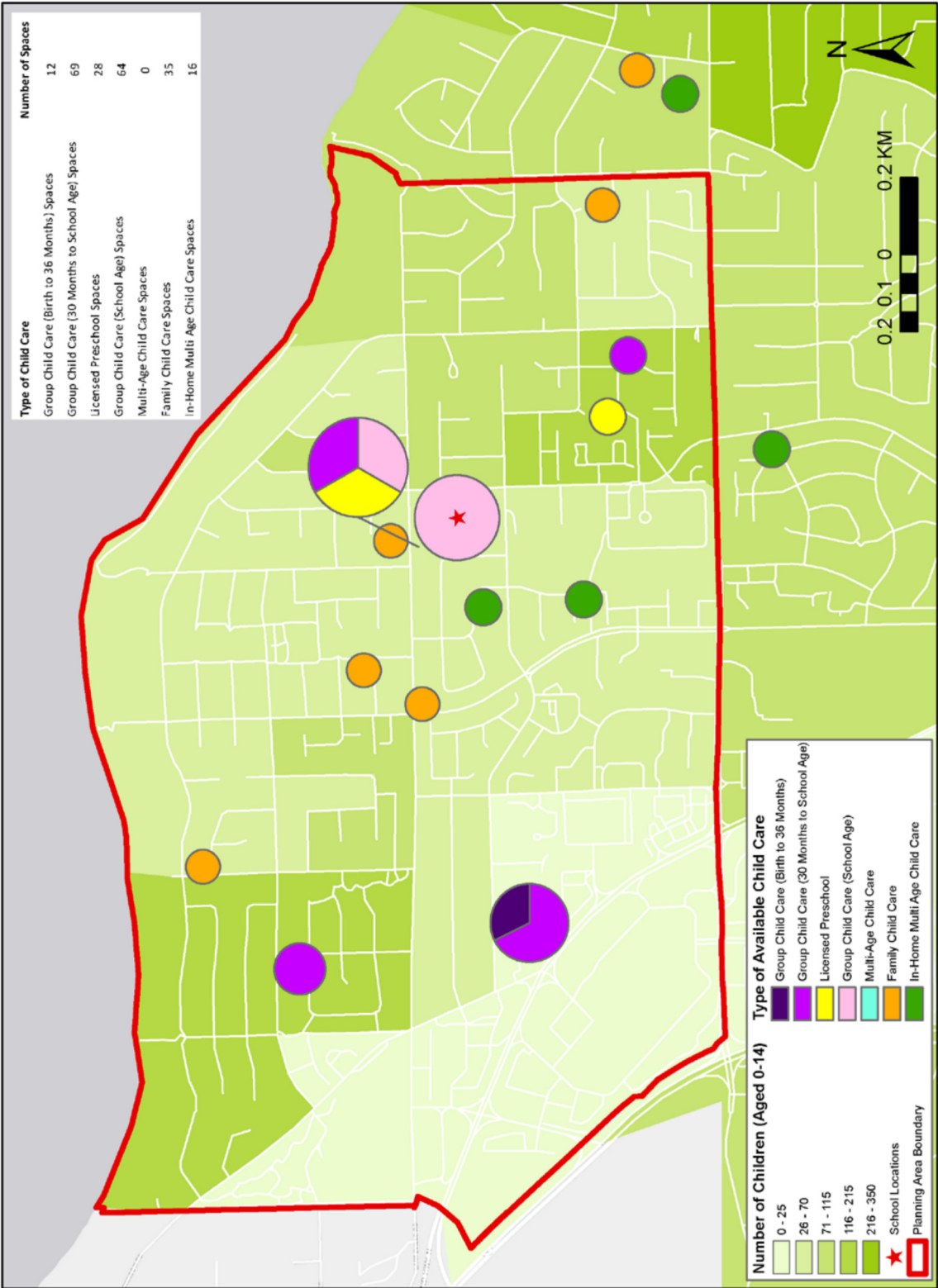
Child Care Facilities and Spaces: Nanaimo, Departure Bay Planning Area, 2020



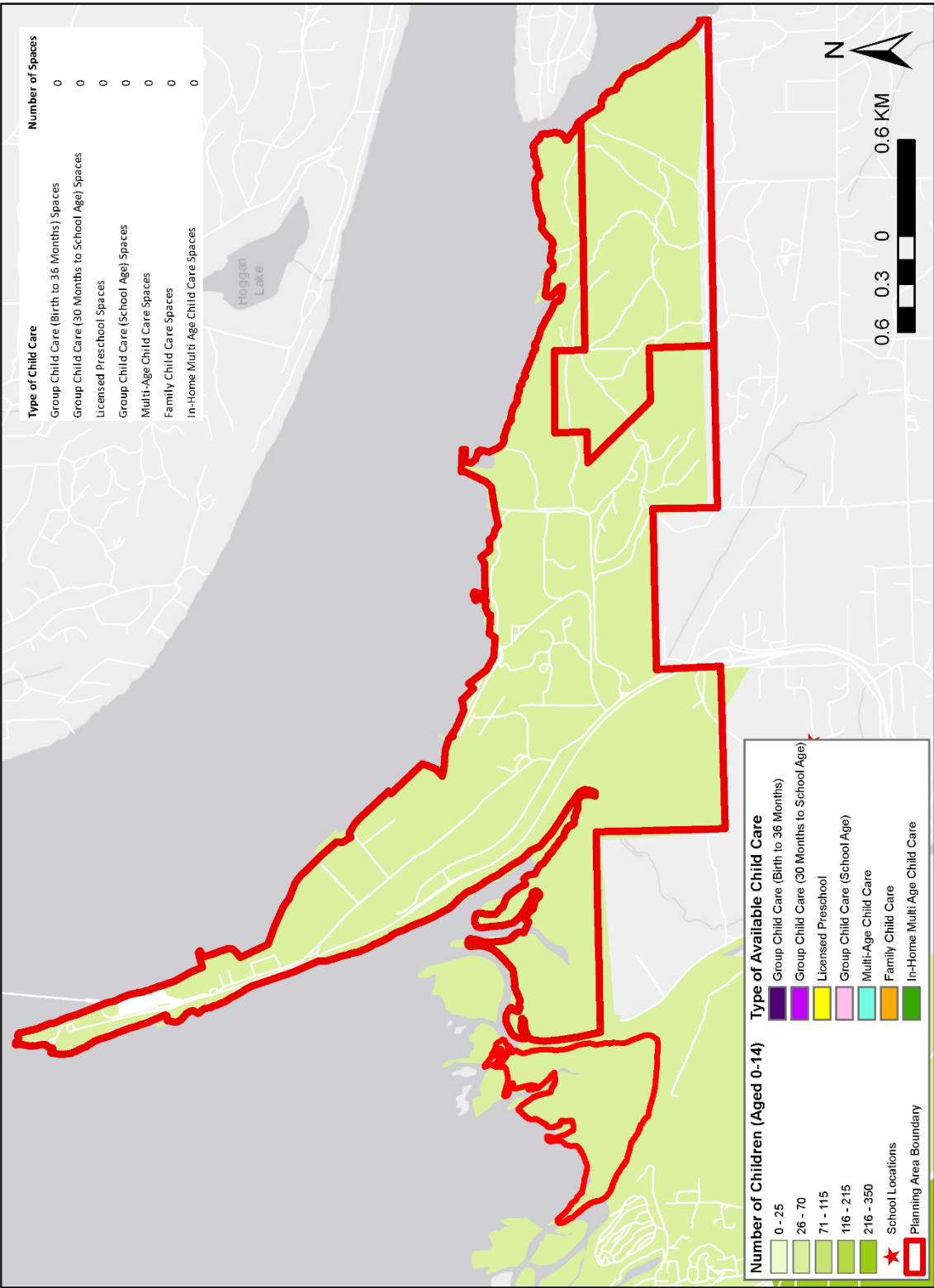
Child Care Facilities and Spaces: Nanaimo, Diver Lake Planning Area, 2020



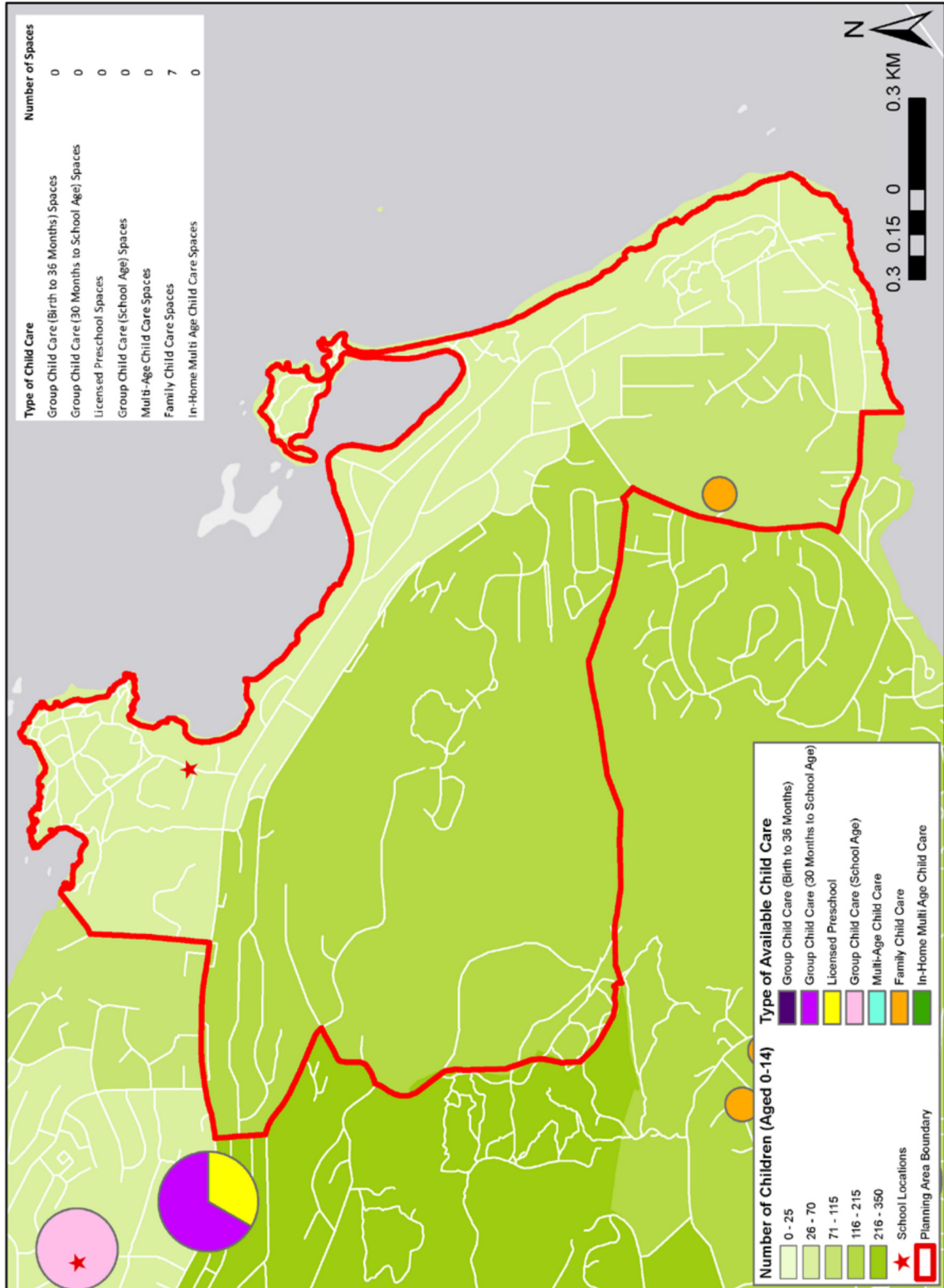
Child Care Facilities and Spaces: Nanaimo, Dover Planning Area, 2020



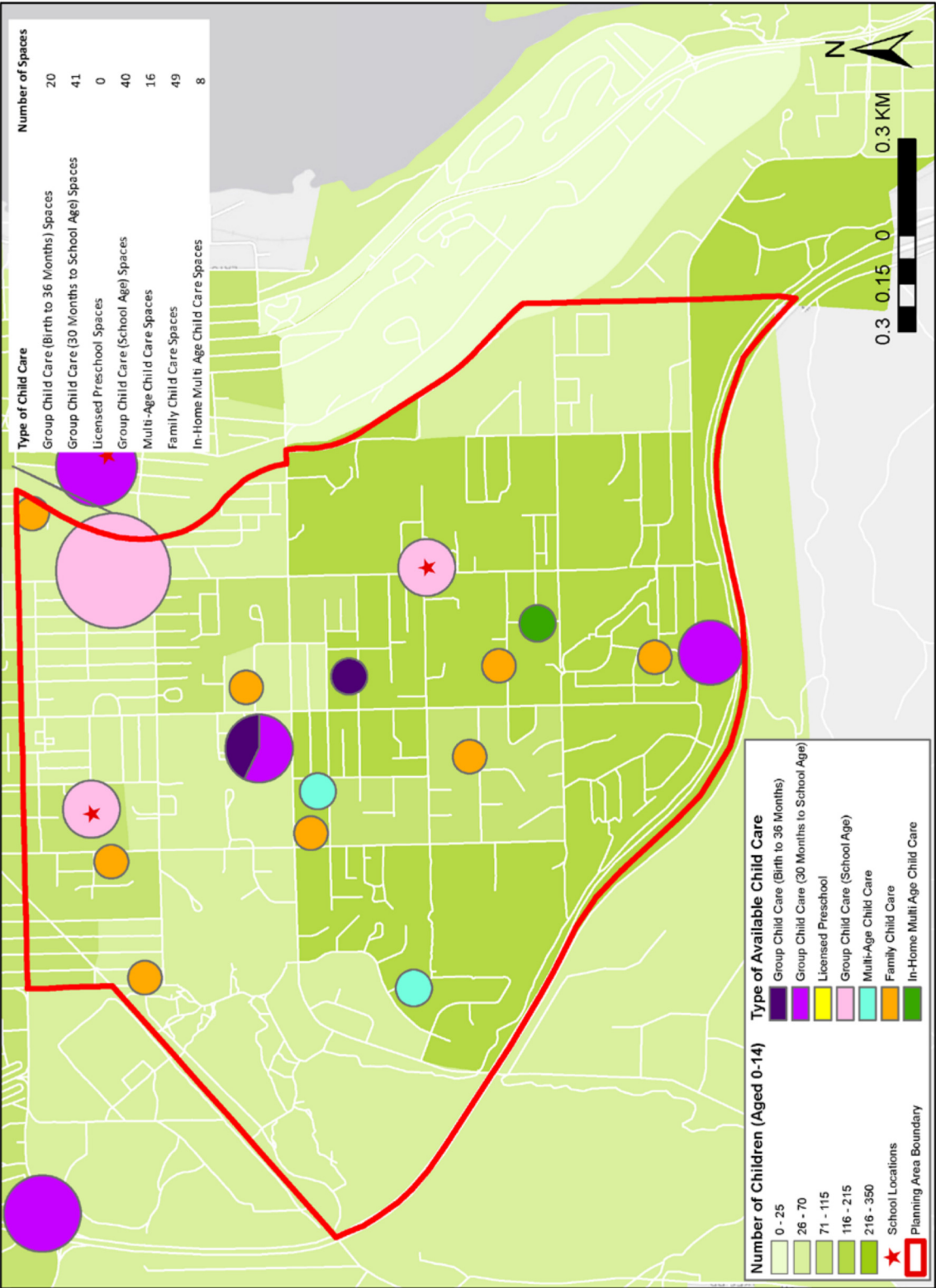
Child Care Facilities and Spaces: Nanaimo, Duke Point/ Ocean View, 2020



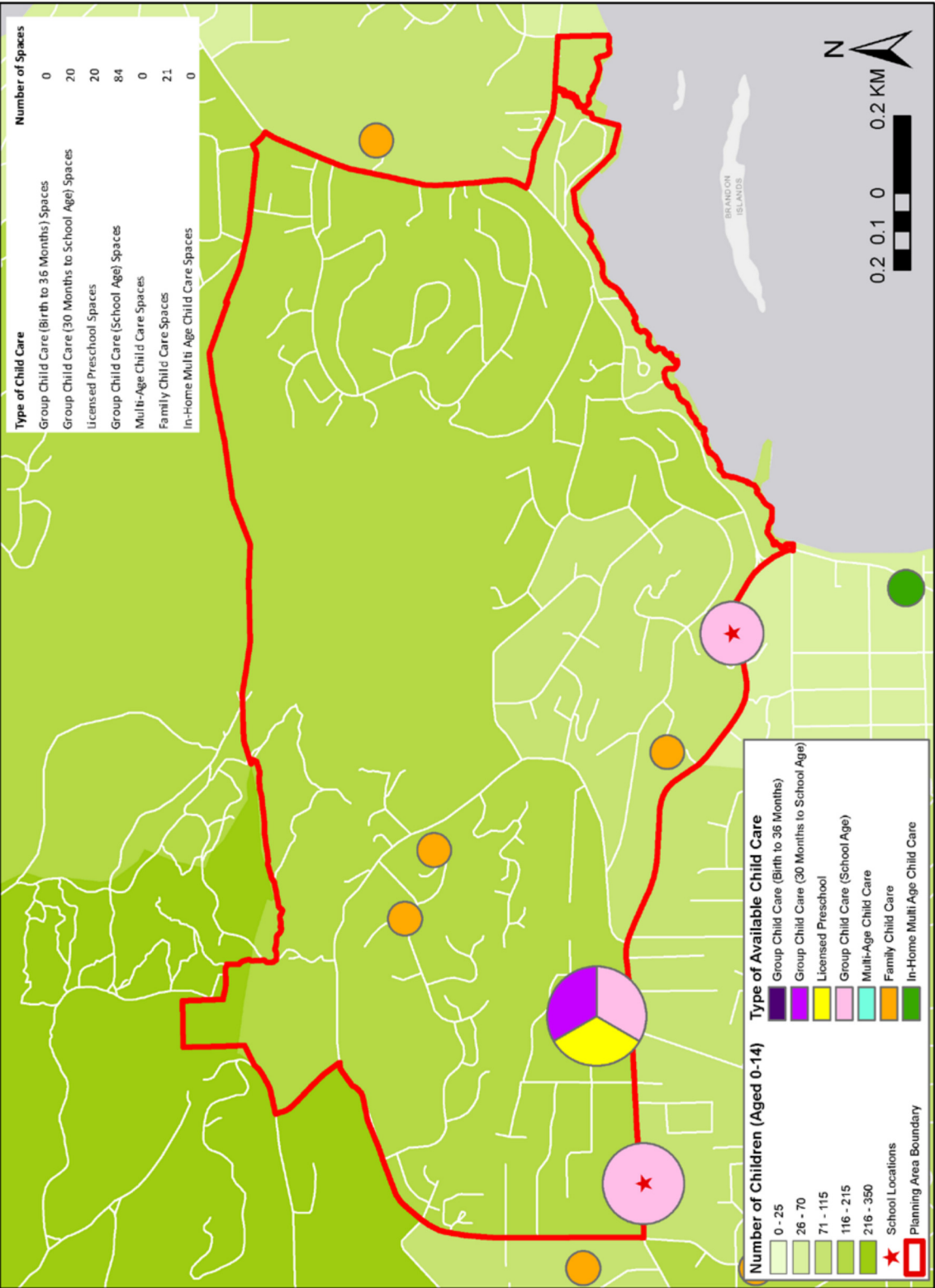
Child Care Facilities and Spaces: Nanaimo, Hammond Bay Planning Area, 2020



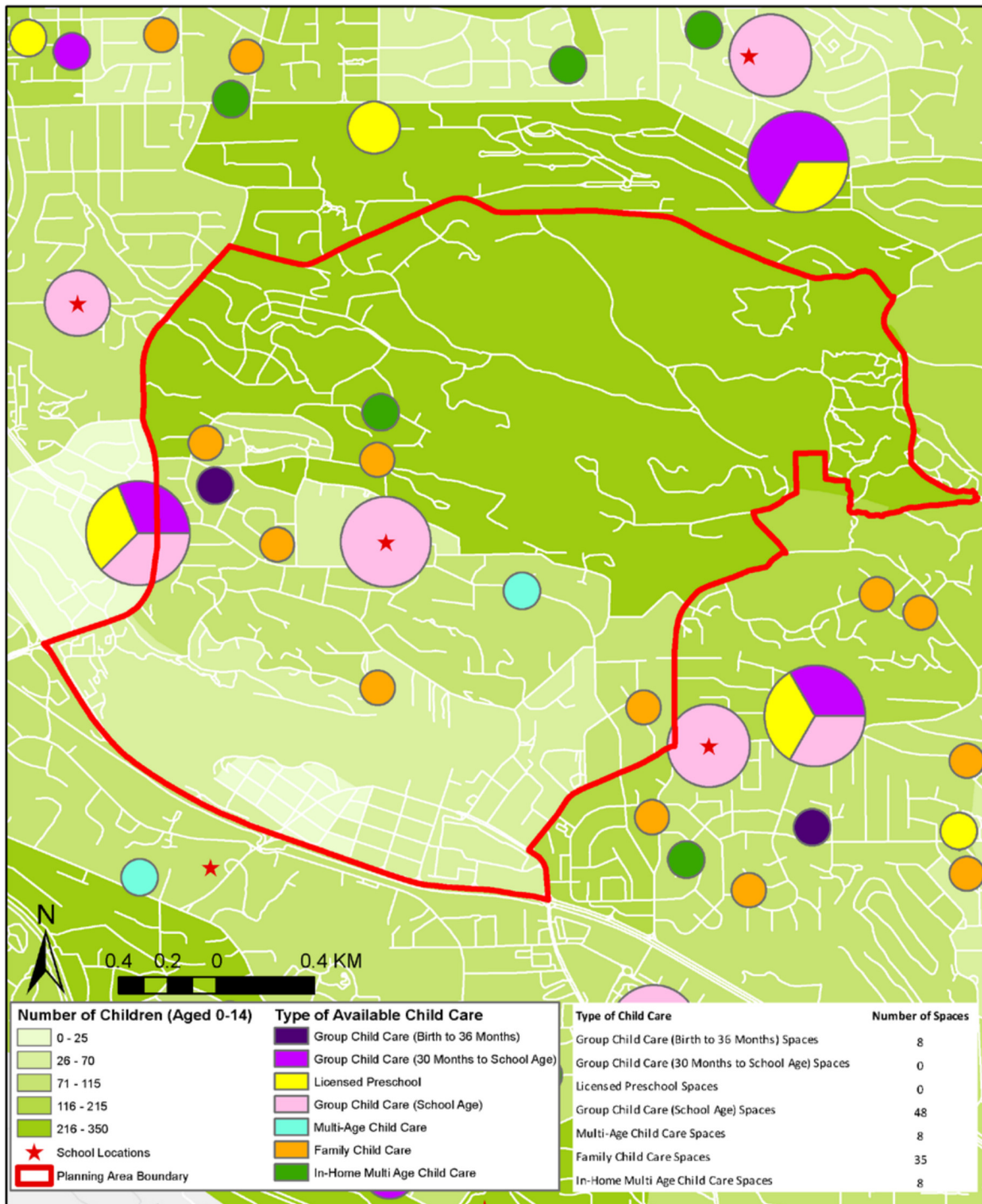
Child Care Facilities and Spaces: Nanaimo, Harewood Planning Area, 2020



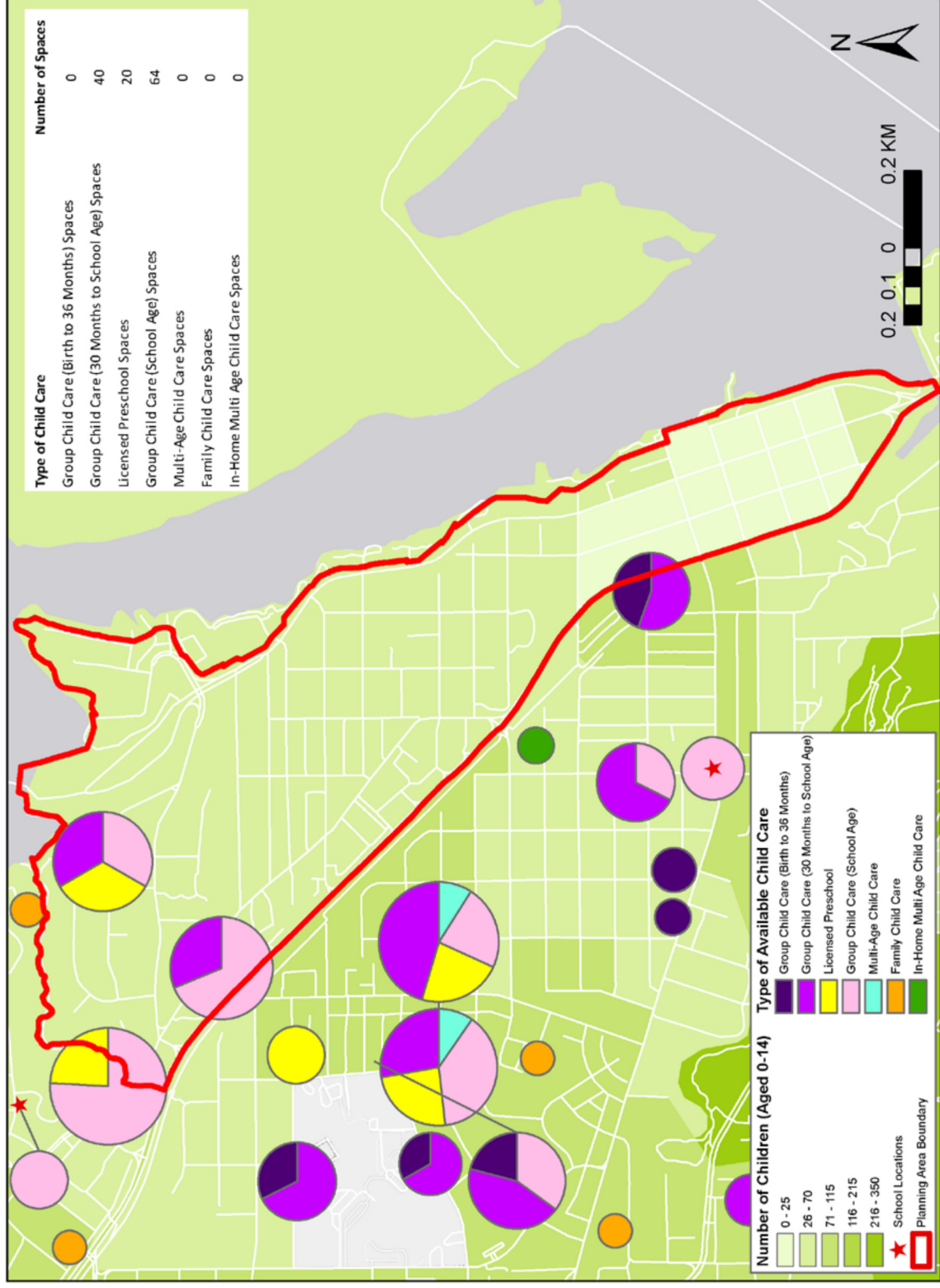
Child Care Facilities and Spaces: Nanaimo, Linley Valley Planning Area, 2020



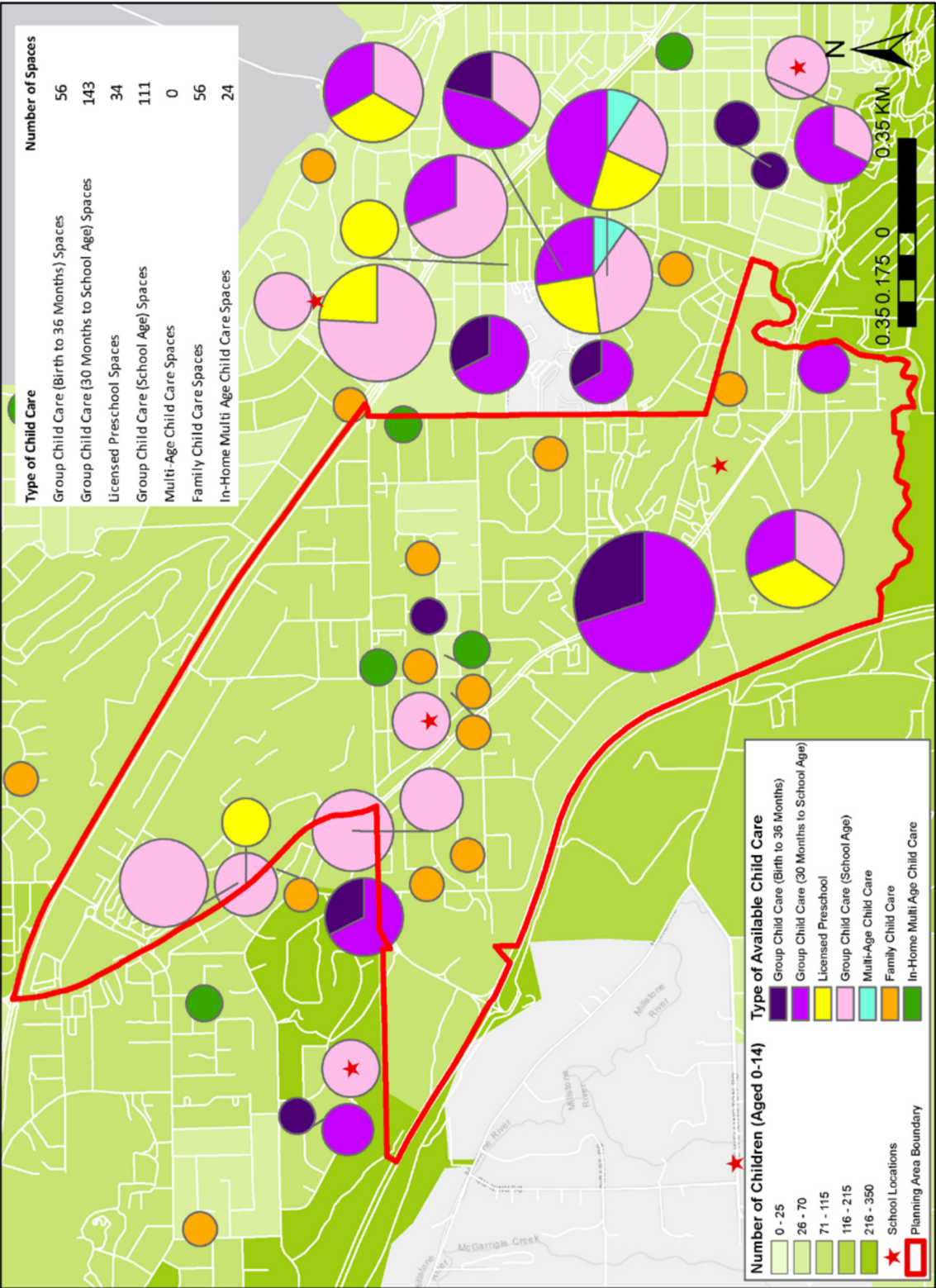
Child Care Facilities and Spaces: Nanaimo, Long Lake Planning Area, 2020



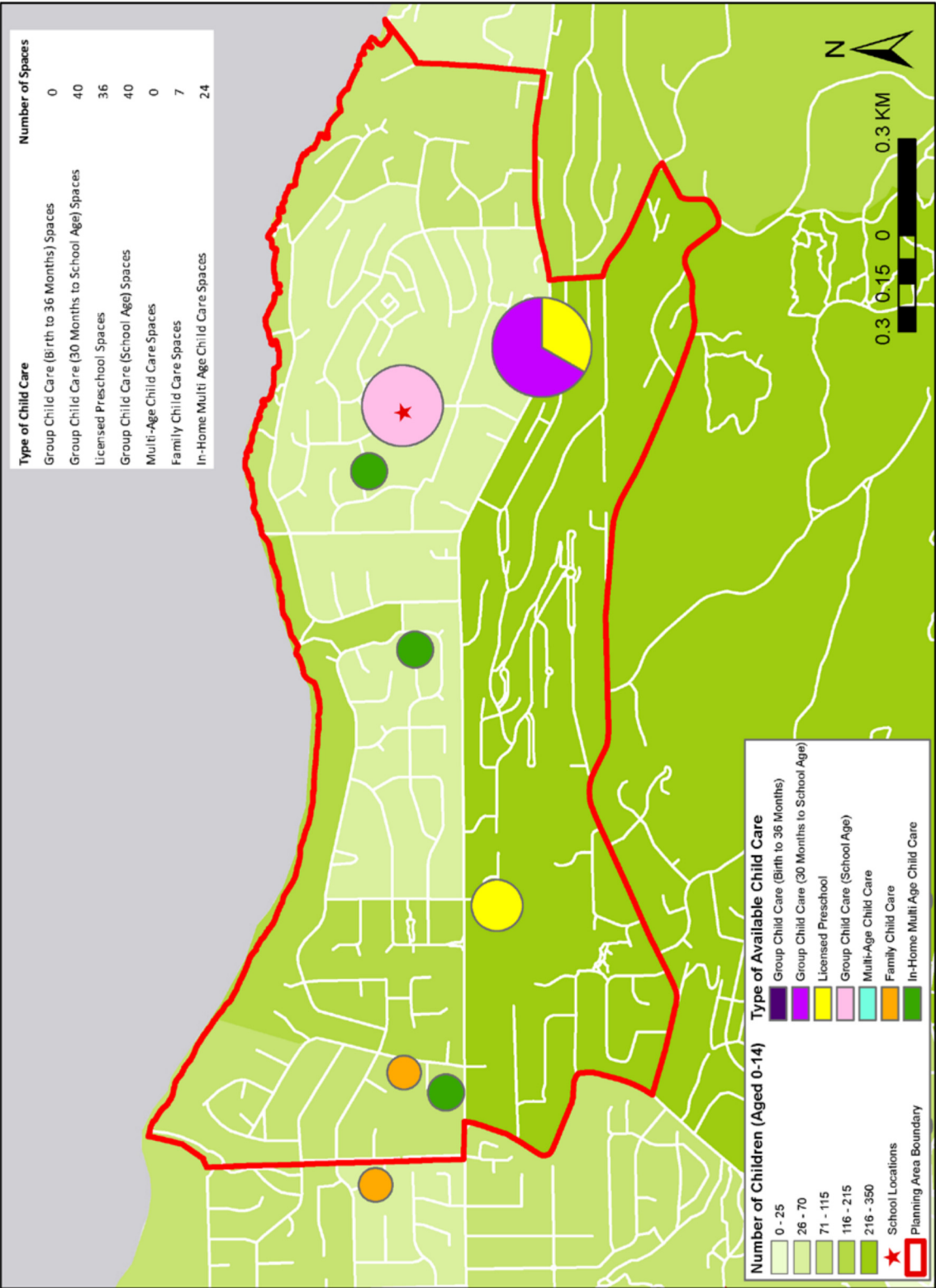
Child Care Facilities and Spaces: Nanaimo, Newcastle Planning Area, 2020



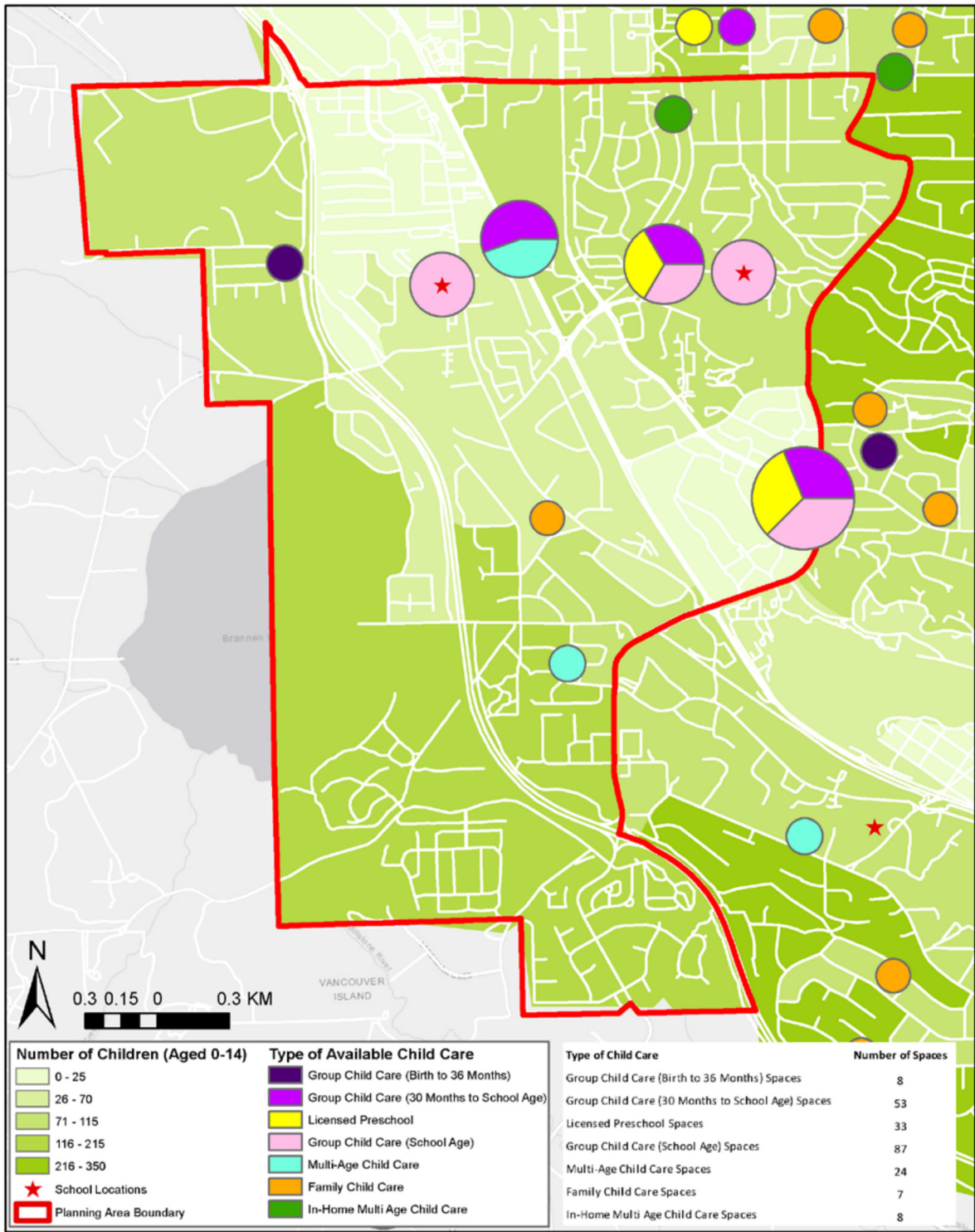
Child Care Facilities and Spaces: Nanaimo, Northfield Planning Area, 2020



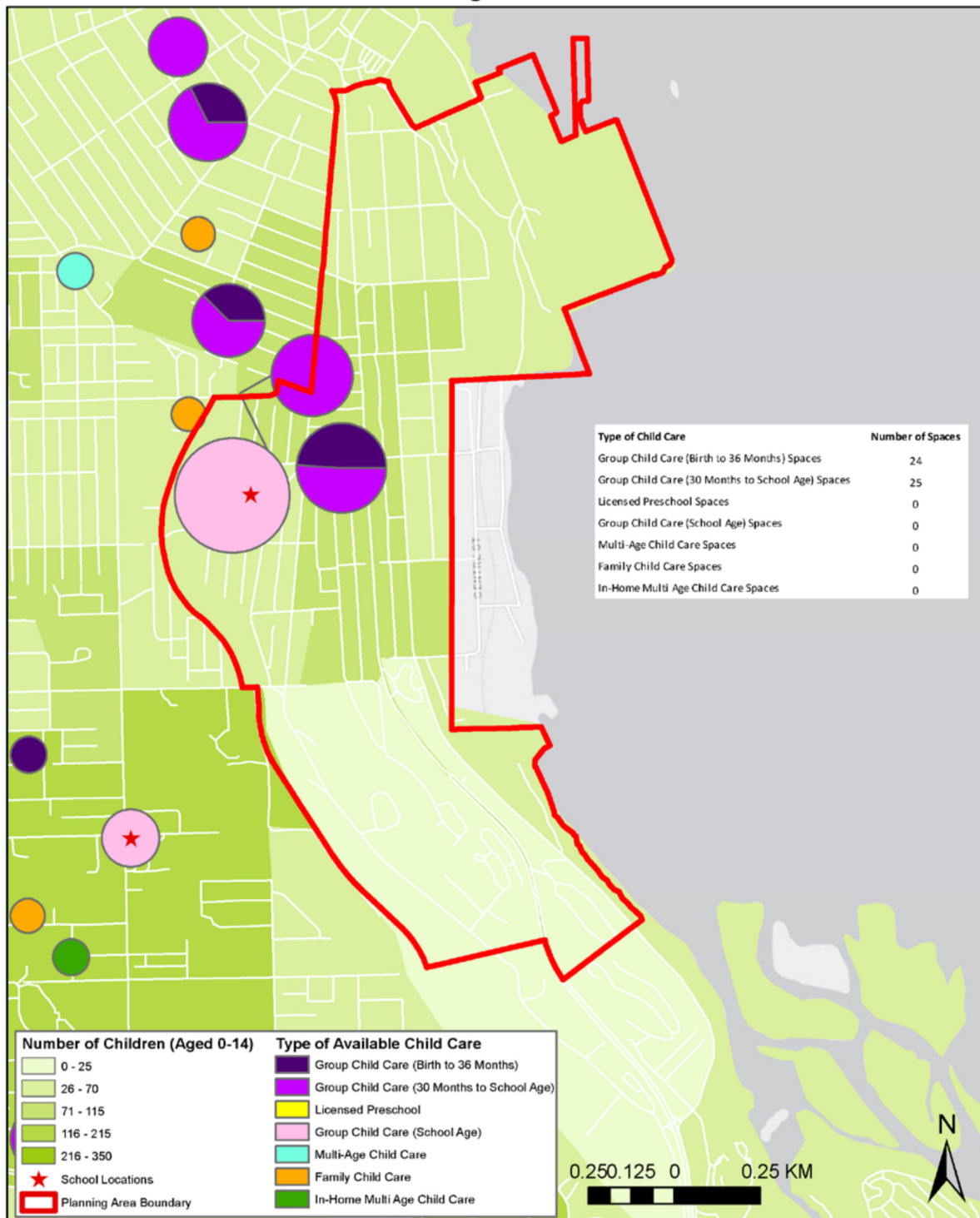
Child Care Facilities and Spaces: Nanaimo, North Slope Planning Area, 2020



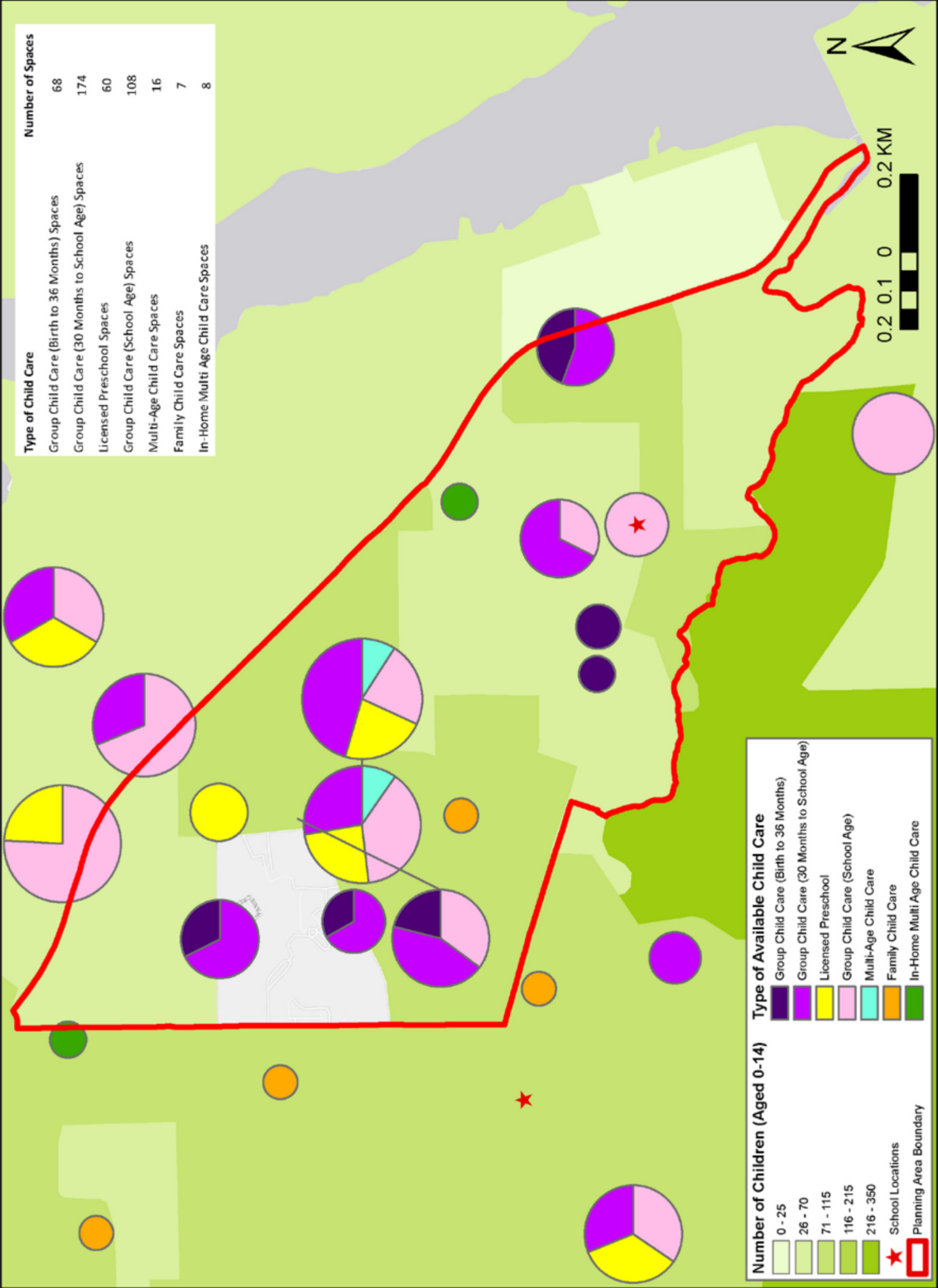
Child Care Facilities and Spaces: Nanaimo, Pleasant Valley, 2020



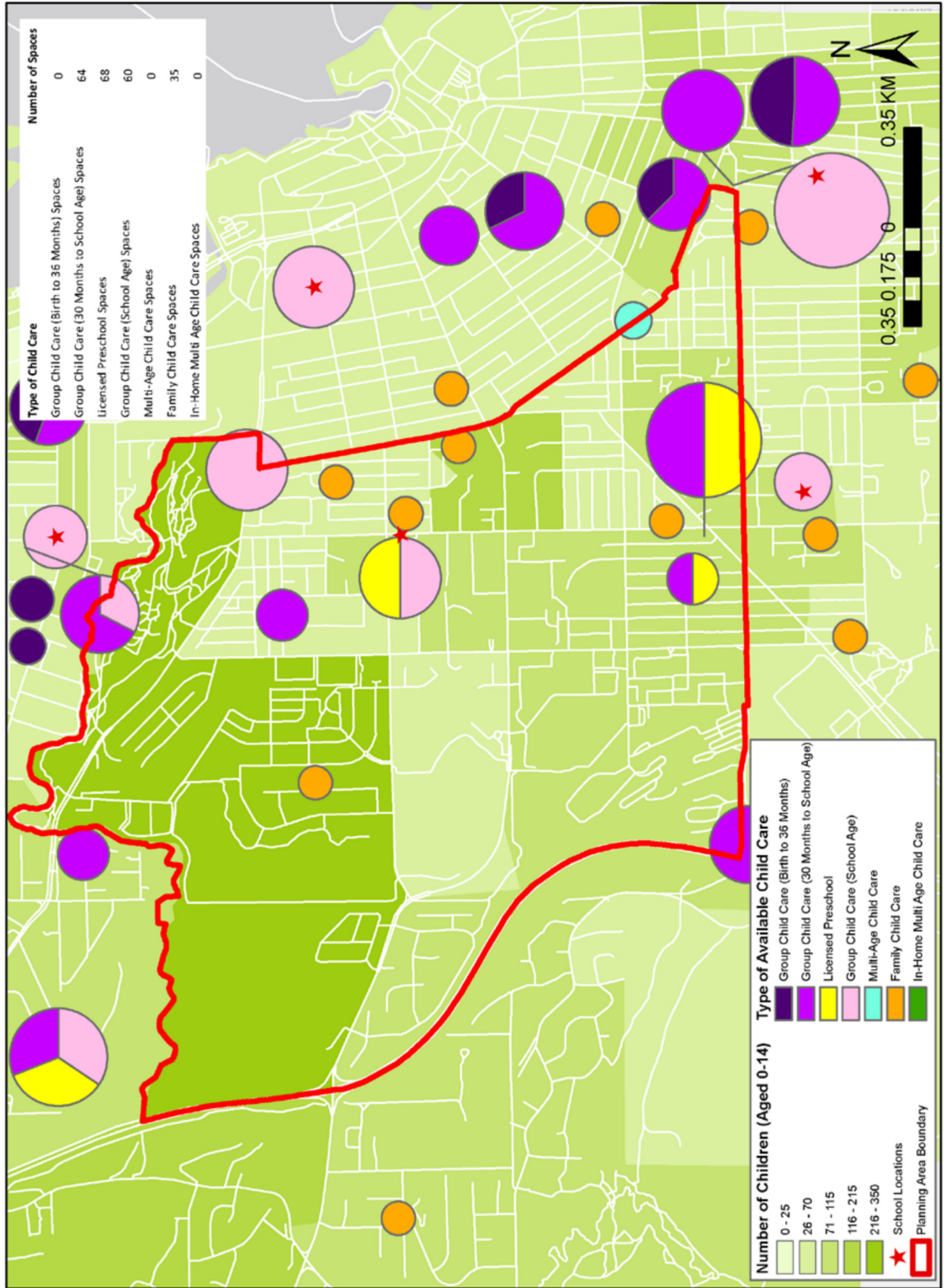
Child Care Facilities and Spaces: Nanaimo, Southend Planning Area, 2020



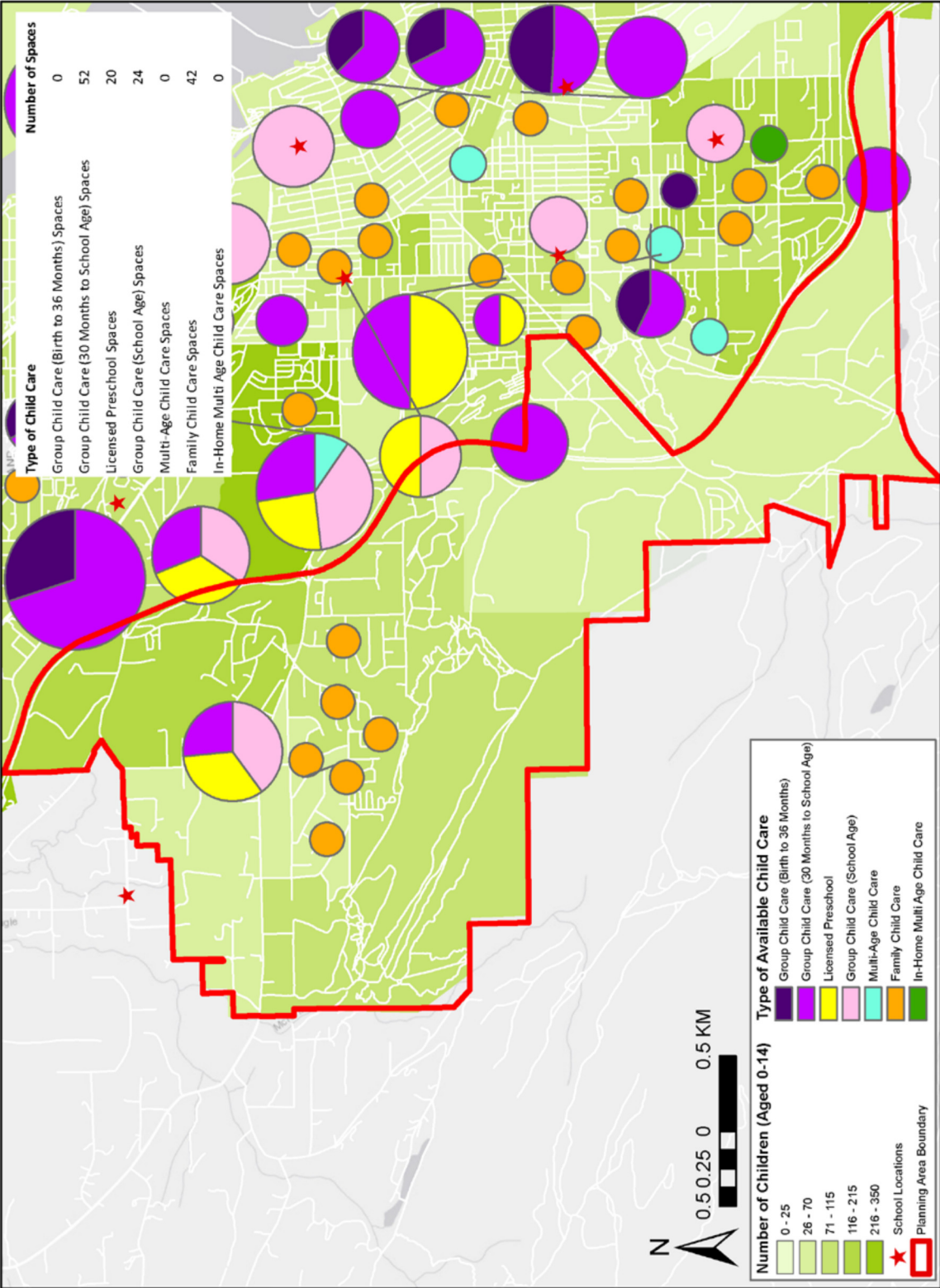
Child Care Facilities and Spaces: Nanaimo, Townsite Planning Area, 2020



Child Care Facilities and Spaces: Nanaimo, Vancouver Island University Planning Area, 2020



Child Care Facilities and Spaces: Nanaimo, Westwood Planning Area, 2020



City of Parksville

City Policies and Regulations

The City of Parksville has a number of policy and regulatory tools that support child care:

- **OCP:** The Parksville OCP contains several statements that are supportive of or complementary to child care:
 - There is a Community Use designation which provides information on a zoning district intended to accommodate community land uses, including child care.
 - There's a Community Values section which references children's recreation facilities.
 - The Land Use policies section contains various policies indicating support for day care and pre-school uses.
 - In "Complete Community Policies", the indication is that child care uses would be supported through the Caring Cities section.
 - The OCP also has a section on Community Services, however it is generic and does not specifically reference child care.
- **Zoning:** The City of Parksville Zoning Bylaw has the following definition for "Child Care Program":

"Child Care Program means family day care, group day care, specialized day care, nursery school, child-minding and out-of-school care, established pursuant to the Community Care Facility Act and having a maximum capacity of eight (8) children, and which uses do not indicate from the exterior that the building is being utilized for any purpose other than residential."

The Zoning Bylaw also has four additional definitions that pertain to child care uses:

"Community Care Facility means the use of a facility providing for the care of persons in premises licensed pursuant to the Community Care Facility Act and amendments thereto."

"Community Use means the use of a building for the provision of programs for adults and children, including child care, established by the Community Care Facility Act, amendments thereto, and other relevant provincial enactments."

Supportive Policies:

"Private School means a privately sponsored school, kindergarten, or preschool."

"Home Based Business means an occupation, profession or handicraft conducted as a secondary use to a residential use in accordance with Division 300 of this Bylaw but specifically excludes cannabis trade."

Despite having a definition for "child care program", the Zoning Bylaw does not specifically cite such programs as a permitted use in any zoning district. However, under various zoning provisions, child care – as defined in any of the four options above - can be accommodated in many zones in Parksville.

Recommendations to Improve Accessibility – Parksville Regulations and Processes

The following recommendations are in addition to the 32 regional recommendations presented in Section 3.

Table 18: Unique Recommendations to Improve Accessibility in the City of Parksville

Recommendations for the City of Parksville			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall quality of life.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Amend the Zoning Bylaw by: <ul style="list-style-type: none"> Updating the definition section to be more consistent in the use of "child care" terminology. Specifically, remove references to "day care" and "pre-school". Clearly indicate in which zoning districts child care is a permitted use; Making Child Care a permitted use in as many zones as possible. 	Short/medium	None

Space Targets for Parksville

Table 19 shows the number of children by age group in 2020, current number of spaces, and current spaces per 100 children by age group. It also shows projected child population for 2030, and spaces per 100 in 2030 assuming no new child care spaces are built. The number of children in Parksville is projected to remain steady between 2020 and 2030.

Table 19: Current Child Care Spaces, 2020 vs 2030 Child Population, City of Parksville

Age Group	Current Situation			Projected 2030 Population (with no new Spaces added)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Space per 100 children
0 to 2 years	202	24	12	202	12
3 to 4 years (and half of all 5-year-olds)	192	94	49	192	49
6 to 9 years (and half of all 5-year-olds)	373	77	21	373	21

To reach the 2030 targets, the City of Parkville will need 237 new licensed spaces over the next ten years.

Table 20: Overview of Space Targets for the City of Parkville

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	12 spaces per 100 children	50 spaces per 100 children	77 new spaces
3 to 4 years (and half of all 5-year-olds)	49 spaces per 100 children	75 spaces per 100 children	50 new spaces
6 to 9 years (and half of all 5-year-olds)	21 spaces per 100 children	50 spaces per 100 children	110 new spaces

For reference, Table 21 shows the number of new spaces/programs needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁵.

Table 21: New Spaces/Programs Needed to Reach 33%, 50%, and 75% Coverage by Age Group, City of Parkville

Age Group	33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	43	4	77	6	128	11
3 to 4 years (and half of all 5-year-olds)	-	-	2	0	50	2
6 to 9 years (and half of all 5-year-olds)	46	2	110	5	203	8

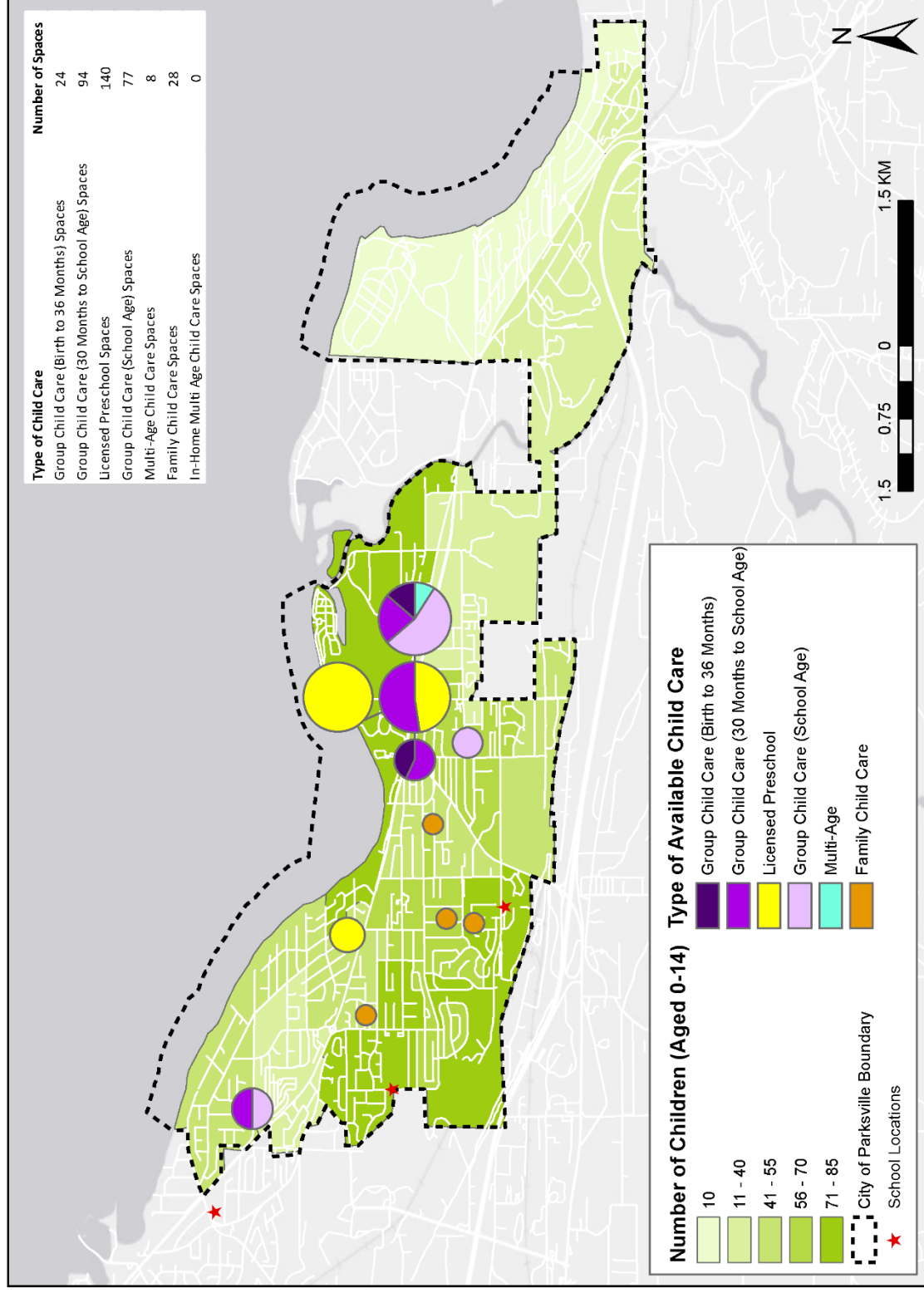
⁵ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

Table 22 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time. The City of Parksville had no new spaces currently in development.

Table 22: Space Targets for City of Parksville - Short, Medium, and Long Term

Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	77	6	0	25	25	25
3 to 4 years (and half of all 5-year-olds)	50	2	0	25	25	0
6 to 9 years (and half of all 5-year-olds)	110	5	0	20	42	48

Child Care Facilities & Spaces: Parksville, 2020



Town of Qualicum Beach

Town Policies and Regulations

The Town of Qualicum Beach has some tools that support child care:

- **OCP:** The Qualicum Beach OCP has a chapter on Community Health and Wellbeing, which contains various objectives and policies that could be broadly interpreted to be supportive of child care (e.g. Policy 1 for Community Health and Wellbeing states that “the Town is committed to retaining and engaging youth and young families in Qualicum Beach for the purpose of supporting local schools, diversifying the community’s demographics and creating economic prosperity.”

The OCP also contains the following brief statement on Community Amenity Contributions (CACs): “the Town shall develop a Community Amenity Contribution Policy to guide the Town in evaluating rezoning proposals and voluntary developer contributions for community amenities.” A CAC Policy was subsequently adopted in 2019. The potential amenities cited for the CACs were affordable housing, multi-doctor clinics or other health care facilities, parkland and environmental conservation, and waterfront walkways. No mention was made of securing child care facilities through CACs.

- **Zoning:** The Qualicum Beach Land Use and Subdivision Consolidation Bylaw does not contain a definition of child care or day care. The Bylaw does indicate that child care would be permitted as a secondary use in institutional zones, and staff advise that child care could also be accommodated in Commercial zones.
- **Supportive Policies:** Qualicum Beach does not have a Grant in Aid program. Indeed, the Town has a policy (Policy # 3000-6) to not provide such grants: “It is the policy of the Town of Qualicum Beach not to provide grants in aid except to the Chamber of Commerce, Policing/Protective Services, Affordable Housing and in-kind contributions.”

Recommendations to Improve Accessibility – Qualicum Beach Regulations and Processes

The following recommendations are in addition to the 32 regional recommendations presented in Section 3.

Table 23: Unique Recommendations to Improve Accessibility in the Town of Qualicum Beach

Recommendations for the Town of Qualicum Beach			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Amend the Land Use and Subdivision Consolidation Bylaw by: <ul style="list-style-type: none"> Updating the definition section to include a definition of child care; Making child care a permitted use in as many zones as possible. 	Short	None

Space Targets for the Town of Qualicum Beach

Table 24 shows the number of children by age group in 2020, current number of spaces, and current spaces per 100 children by age group. It also shows projected child population for 2030, and spaces per 100 in 2030 assuming no new child care spaces are built.

Since the number of children in Qualicum Beach is projected to decrease by 2030, if number of child care spaces were unchanged in 2030, coverage rates would increase for all age groups.

Table 24: Current Child Care Spaces, 2020 vs 2030 Child Population, Town of Qualicum Beach

Age Group	Current Situation			Projected 2030 Population (with no new Spaces added)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Spaces per 100 children
0 to 2 years	79	24	30	73	33
3 to 4 years (and half of all 5-year-olds)	113	72	64	105	69
6 to 9 years (and half of all 5-year-olds)	208	51	24	194	26

To reach the 2030 targets, the Town of Qualicum Beach will need 66 new licensed spaces over the next ten years.

Table 25: Overview of Space Targets for Town of Qualicum Beach

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	30 spaces per 100 children	50 spaces per 100 children	13 new spaces
3 to 4 years (and half of all 5-year-olds)	64 spaces per 100 children	75 spaces per 100 children	7 new spaces
6 to 9 years (and half of all 5-year-olds)	24 spaces per 100 children	50 spaces per 100 children	46 new spaces

For reference, Table 26 shows the number of new spaces needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁶.

Table 26: New Spaces/Programs Needed to Reach 33%, 50%, and 75% Coverage by Age Group, Town of Qualicum Beach

Age Group	33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	-	-	13	1	31	3
3 to 4 years (and half of all 5-year-olds)	-	-	-	-	7	0
6 to 9 years (and half of all 5-year-olds)	13	1	46	2	94	4

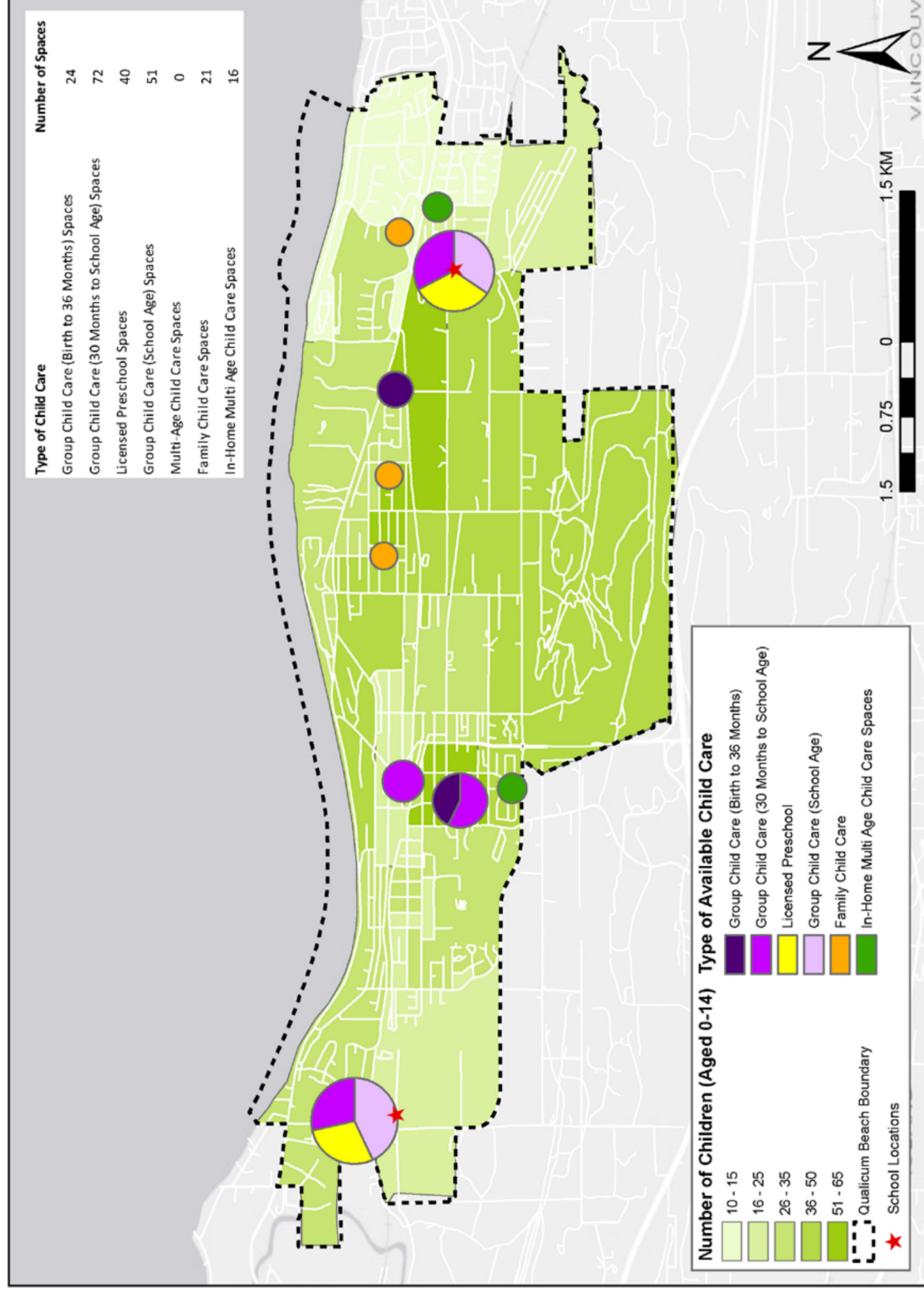
⁶ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

Table 27 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time, taking into account those spaces already in development.

Table 27: Space Targets for Qualicum Beach - Short, Medium, Long Term

Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	13	1	0	13	0	0
3 to 4 years (and half of all 5-year-olds)	7	0	0	10	0	0
6 to 9 years (and half of all 5-year-olds)	46	2	27	24	24	0

Child Care Facilities and Spaces: Qualicum Beach, 2020



District of Lantzville

District Policies and Regulations

The District of Lantzville has some policy and regulatory tools that support child care:

- **OCP:** The Lantzville OCP has a brief section on Community Services, but no mention is made of child care. The OCP also contains provisions for density bonusing and Community Amenity Contributions (CAC's); however, child care facilities are not cited as an amenity to be pursued through these vehicles. The only specific reference to child care in the OCP is in the Lantzville East Special Plan Area guidelines, which cite child care as an allowable use in the area.
- **Zoning:** The District of Lantzville recently adopted a new Zoning Bylaw which contains the following definition of child care: "the provincially-licensed care of children who require supervision during the day". With respect to locations, the Bylaw indicates that child care for up to eight children is permitted as a home occupation in residential zones and as a secondary use within Community Service zones.
- **Supportive Policies:** Lantzville has a Grants in Aid program designed to assist not-for-profit organizations with projects, special activities, or to allow them to take advantage of opportunities and events to develop their organization.

Recommendations to Improve Accessibility – Lantzville Regulations and Processes

The following recommendations are in addition to the 32 regional recommendations presented in Section 3.

Table 28: Unique Recommendations to Improve Accessibility in the District of Lantzville

Recommendations for the District of Lantzville			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Identify child care as an amenity to be considered for development through Bonus Density and CACs.	Short	Developers (consultation); not-for-profit child care providers.
4	Amend the Zoning Bylaw to make child care a permitted use in as many zones as possible. Allow for group care (25 children) in the definition of child care in the Bylaw.	Short	None

Space Targets for the District of Lantzville

Table 29 shows the number of children by age group in 2016, current number of spaces, and current spaces per 100 children by age group. Population projections are not available for the District of Lantzville.

Table 29: Current Child Care Spaces, 2020 Child Population, District of Lantzville

Age Group	Current Situation		
	Number of Children (2016)	Number of Spaces	Current Spaces per 100
0 to 2 years	75	10	13
3 to 4 years (and half of all 5-year-olds)	70	100	143
6 to 9 years (and half of all 5-year-olds)	175	70	40

To reach the 2030 targets, the District of Lantzville will need 46 new licensed spaces over the next ten years.

Table 30: Overview of Space Targets for the District of Lantzville

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	13 spaces per 100 children	50 spaces per 100 children	28 new spaces
3 to 4 years (and half of all 5-year-olds)	143 spaces per 100 children	Already exceeded	None needed
6 to 9 years (and half of all 5-year-olds)	40 spaces per 100 children	50 spaces per 100 children	18 new spaces

For reference, Table 31 shows the number of new spaces needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁷.

Table 31: New Spaces/Programs Needed to Reach 33%, 50%, and 75% Coverage by Age Group, District of Lantzville

Age Group	33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	15	1	28	2	46	4
3 to 4 years (and half of all 5-year-olds)	-	-	-	-	-	-
6 to 9 years (and half of all 5-year-olds)	-	-	18	1	61	3

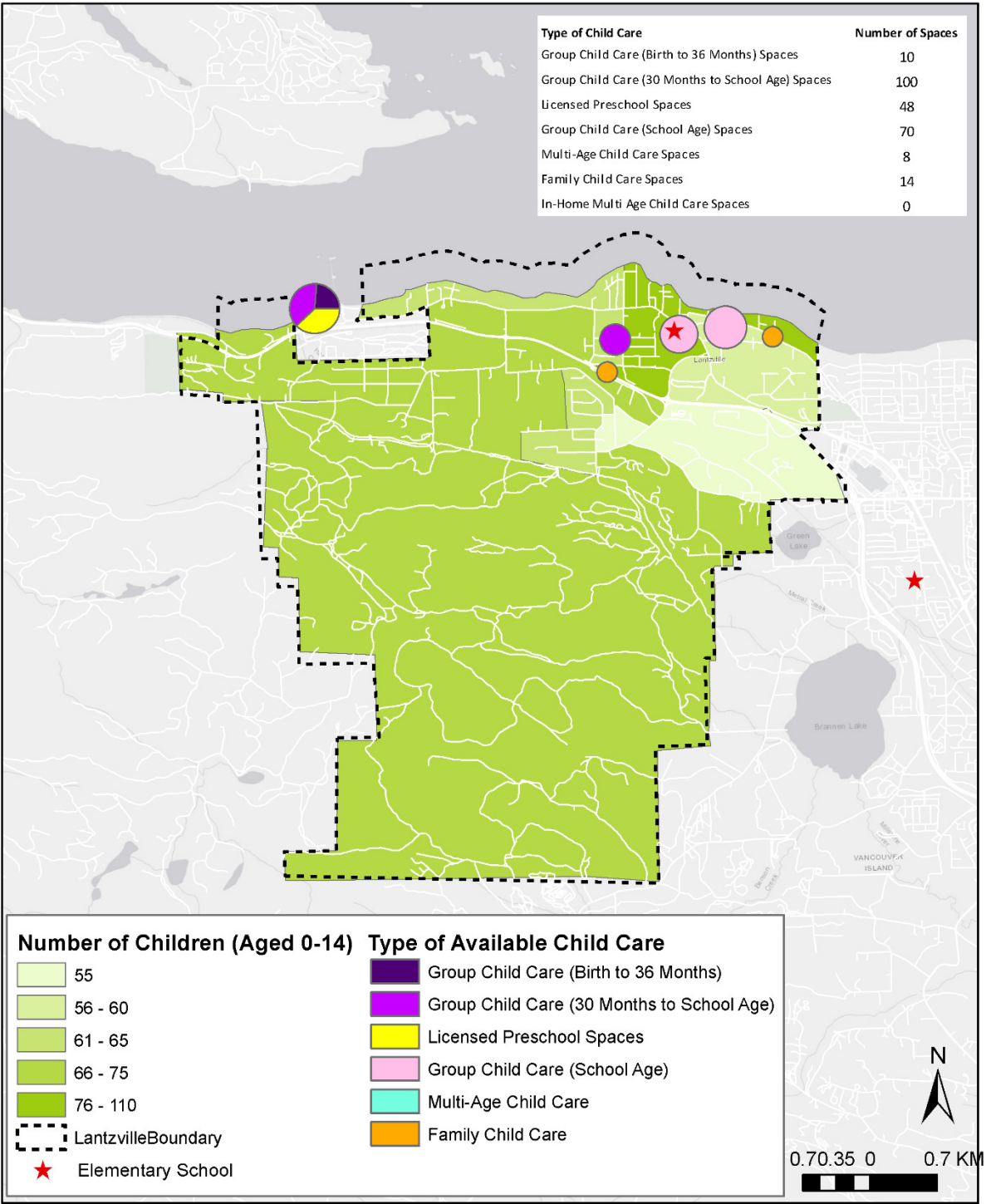
Table 32 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time.

Table 32: Space Targets for the District of Lantzville - Short, Medium, Long Term

Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	28	2	0	14	14	0
3 to 4 years (and half of all 5-year-olds)	NA	NA	0	NA	NA	NA
6 to 9 years (and half of all 5-year-olds)	18	1	0	24	0	0

⁷ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

Child Care Facilities & Spaces: Lantzville, 2020



Regional District of Nanaimo – Unincorporated Electoral Areas A, B, C, E, F, G, and H

District Policies and Regulations

The Regional District of Nanaimo ("RDN") has some policies and regulations supportive of child care:

- **OCP:** The RDN has seven OCP bylaws:
 - Electoral Area A
 - Electoral Area C
 - Arrowsmith Benson – Cranberry Bright
 - East Wellington/Pleasant Valley
 - Electoral Area E
 - Electoral Area F
 - Electoral Area G
 - Electoral Area H

Each OCP is distinct. However, considered collectively, they contain broad statements about complete communities, community well-being, and encouragement of community facilities. In the OCPs for Areas A and G, "daycare" is included in list of amenities that could be pursued through density bonusing negotiations for new developments. All other OCPs in the RDN are silent on the value of or pursuit of child care.

- **Zoning:** There are three zoning bylaws in the RDN:
 - Bylaw 500 – consolidated (applies to all plan areas, except Area F and the Lakes District and Schooner Cove – Area E)
 - Bylaw 500 – 2014 (applies to the Lakes District and Schooner Cove - Area E only)
 - Bylaw 1285 (applies to Area F only, Errington, Coombs, Whiskey Creek, and Hilliers).

None of the bylaws contain definitions for child care. In Bylaws 500 and 500-2014, however, child care would be subsumed under the definition of Personal Care: "personal care means a community care facility developed in accordance with the Community Care Facility Act and amendments thereto, or a hospital developed in accordance with the Hospital Act and amendments thereto."

In Bylaw 1285, child care would be subsumed under the definition of Care Services: "a use providing for the care of people, other than a public hospital and includes daycares, pre-schools, private hospitals, assisted living units, nursing homes, and group homes pursuant to the *Community Care Facility Act* as applicable."

With respect to locations, under Bylaws 500 and 500-2014, child care (personal care) uses would be permitted in Public 1 (PU1) and Neighbourhood Mixed Use (CD44-MU) zones. Under Bylaw 1285, child care (care services) would be permitted in Commercial 1 (C1), Commercial 3 (C3), Village Residential 3 (R3), Institutional/community Facility 1 (T1) zones.

- **Supportive Policies:** The RDN provides community grant funding to assist registered not-for-profit organizations to provide social programs and services that serve a local community or provide a regional benefit. To be eligible for funding, the organization must provide a social enrichment service and demonstrate that the service fills a need in the community.

Recommendations to Improve Accessibility

The following recommendations are in addition to the 32 regional recommendations presented in Section 3.

Table 33: Unique Recommendations to Improve Accessibility in the Regional District of Nanaimo

Recommendations for the Regional District of Nanaimo			
	Action	Time Frame	External Partners
1	Amend the OCPs to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, school district, community as a whole through OCP consultation
2	Incorporate specific goals, policies, and strategies in the various RDN OCPs for facilitating development of child care (e.g. citing child care facilities as an amenity to be pursued through density bonusing or CACs).	Short	Developers (consultation); not-for-profit child care providers.
3	Amend the two RDN Zoning Bylaws to include a definition for "child care", specifying the zoning districts in which child care facilities are allowed.	Short	None
4	Review the Zoning Bylaws with the aim of increasing the number of zoning districts in which child care facilities could be accommodated as a permitted use.	Short	None

Space Targets for the Regional District of Nanaimo – Electoral Areas A, B, and C

Table 34 shows the number of children by age group in 2020, current number of spaces, and current spaces per 100 children by age group. It also shows total projected child population for 2030, and spaces per 100 in 2030 assuming no new child care spaces are built.

Overall, the total number of children in Electoral Areas A, B, and C is expected to decrease by 2030, which means even if the number of child care spaces were unchanged in 2030, coverage rates would increase slightly for the preschooler and school age groups.

Table 34: Current Child Care Spaces, 2020 vs 2030 Child Population, RDN A, B, C

Age Group	Current Situation			Projected 2030 Population (No Change in Spaces)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Space per 100 children
0 to 2 years	299	12	4	292	4
3 to 4 years (and half of all 5-year-olds)	264	79	30	254	31
6 to 9 years (and half of all 5-year-olds)	509	49	10	492	10

To reach the 2030 targets, the Electoral Areas A, B, C would need 443 new licensed spaces over the next ten years.

Table 35: Overview of Space Targets for RDN A, B, C

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	4 spaces per 100 children	50 spaces per 100 children	134 new spaces
3 to 4 years (and half of all 5-year-olds)	30 spaces per 100 children	75 spaces per 100 children	112 new spaces
6 to 9 years (and half of all 5-year-olds)	10 spaces per 100 children	50 spaces per 100 children	197 new spaces

For reference, Table 36 shows the number of new spaces/programs needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁸.

Table 36: New Spaces/Programs Needed to Reach 33%, 50%, and 75% Coverage by Age Group, RDN A, B, C

Age Group	20 Spaces per 100 by 2030		33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	46	4	84	7	134	11	207	17
3 to 4 years (and half of all 5-year-olds)	-	-	5	0	48	2	112	4
6 to 9 years (and half of all 5-year-olds)	49	2	113	5	197	8	320	13

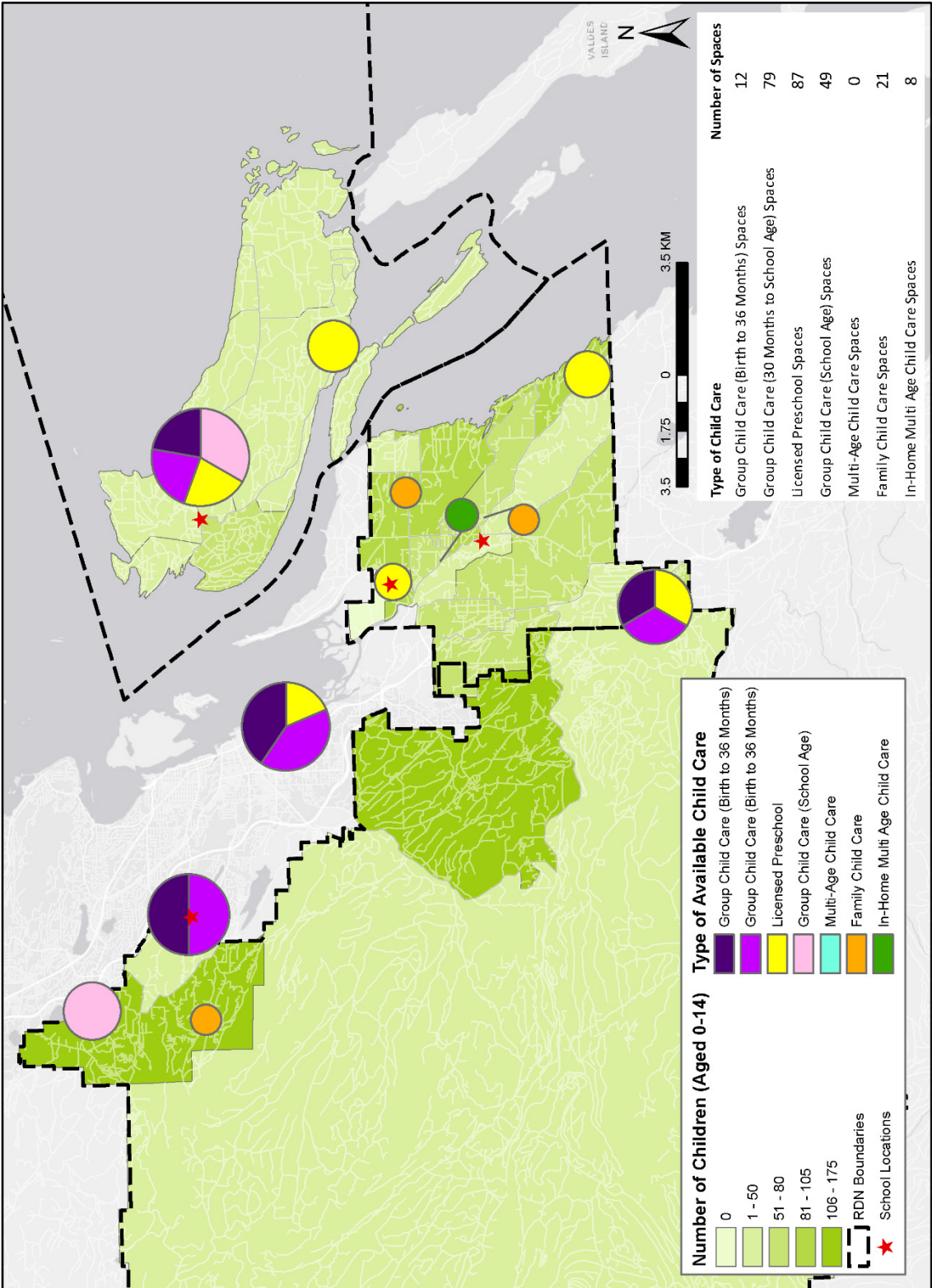
⁸ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

Table 37 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time, taking into account those spaces already in development. This includes 12 infant-toddler, 16 group (30 month the school age), and 20 group (school age) spaces.

Table 37: Space Targets for RDN A, B, C - Short, Medium, Long Term

Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	134	11	12	38	48	48
3 to 4 years (and half of all 5-year-olds)	112	4	16	25	62	25
6 to 9 years (and half of all 5-year-olds)	197	8	20	48	72	76

Child Care Facilities & Spaces: RDN A, B, C, 2020



Space Targets for Nanaimo Regional District – Electoral Areas E, F, G, and H

Table 38 shows the number of children by age group in 2020, current number of spaces, and current spaces per 100 children by age group. It also shows projected child population for 2030, and spaces per 100 in 2030 assuming no new child care spaces are built.

Since the total number of children in these electoral areas is projected to decrease by 2030, if the number of child care spaces were unchanged in 2030, coverage rates would increase for all age groups.

Table 38: Current Child Care Spaces, 2020 vs 2030 Child Population, RDN E, F, G, H

Age Group	Current Situation			Projected 2030 Population (with no new Spaces added)	
	Number of Children (2020)	Number of Spaces	Current Spaces per 100	Number of Children (2030)	Space per 100 children
0 to 2 years	490	36	7	476	8
3 to 4 years (and half of all 5-year-olds)	479	165	34	451	37
6 to 9 years (and half of all 5-year-olds)	878	111	13	817	14

To reach the 2030 targets, Electoral Areas E, F, G, H would need 673 new licensed spaces over the next ten years.

Table 39: Overview of Space Targets for RDN E, F, G, H

Age Group	Current Coverage Rate	Target Rate by 2030	Number of New Spaces Needed to Meet 2030 Target
0 to 2 years	7 spaces per 100 children	50 spaces per 100 children	202 new spaces
3 to 4 years (and half of all 5-year-olds)	34 spaces per 100 children	75 spaces per 100 children	173 new spaces
6 to 9 years (and half of all 5-year-olds)	13 spaces per 100 children	50 spaces per 100 children	298 new spaces

For reference, Table 40 shows the number of new spaces needed to reach targets of 20%, 33%, 50%, and 75% coverage for each age category by 2030, as well as what this means in terms of approximate number of new programs⁹.

Table 40: New Spaces/Programs Needed to Reach 20%, 33%, 50%, and 75% Coverage by Age Group, RDN E, F, G, H

Age Group	20 Spaces per 100 by 2030		33 Spaces per 100 by 2030		50 Spaces per 100 by 2030		75 Spaces per 100 by 2030	
	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed	New Spaces Needed	New Programs Needed
0 to 2 years	59	5	121	10	202	17	321	27
3 to 4 years (and half of all 5-year-olds)	-	-	-	-	60	2	173	7
6 to 9 years (and half of all 5-year-olds)	52	2	158	7	297	12	501	21

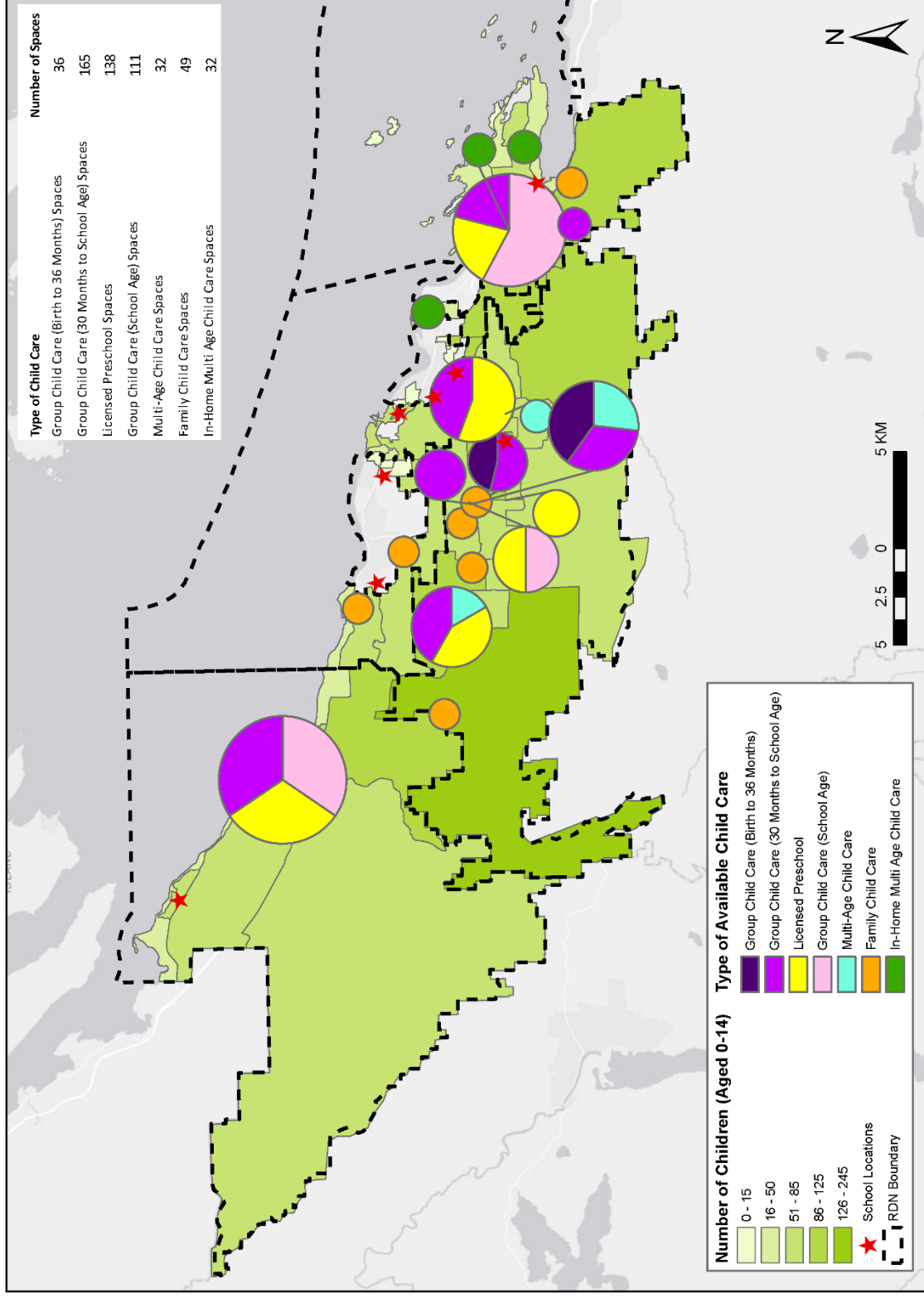
Table 41 shows suggested number of spaces to be created in the short (by 2023), medium (2024 – 2026), and long term (2027- 2030) based on an even distribution of new spaces to be built over time.

Table 41: Space Targets for RDN E, F, G, H - Short, Medium, Long Term

Age Group	New Spaces Needed	Approx. New Programs Needed	Spaces in Development	New Spaces (Short)	New Spaces (Medium)	New Spaces (Long)
0 to 2 years	202	17	0	40	72	90
3 to 4 years (and half of all 5-year-olds)	173	7	0	50	50	75
6 to 9 years (and half of all 5-year-olds)	298	12	0	72	96	130

⁹ Approximate numbers of new programs needed are estimated based on licensing regulations (group sizes) : infant/toddler program -12 spaces; preschooler age program - 25 spaces; each school age program - 24 spaces.

Child Care Facilities & Spaces: RDN E, F, G, H, 2020



Appendix A – Tables of Recommendations

Mid-Island Regional Recommendations

Recommendations to Increase Accessibility			
	Action	Policy and Planning	Time Frame
			External Partners
1	Develop a Mid-Island Region Child Care Policy for local governments, providing a consolidated statement of the Region's vision, goals, strategies and commitments to child care.		Province, school districts, not-for-profit operators, community agencies
2	Establish an on-going Child Care Action group that would be comprised of representatives from child care providers and other service providers, the school districts and key staff from each of the Project Partner jurisdictions (Nanaimo, Parksville, Qualicum Beach, Lantzville and the Regional District) to ensure a consistent regional approach. This group would develop strategies to maximize the group's effectiveness for a systemic approach to child care in the Mid-Island Region.		Not-for-profit providers, school districts, service providers and Island Health Licensing
3	Develop an inter-jurisdictional staff position dedicated to child care. The position would focus on: <ul style="list-style-type: none"> • Monitoring the progress of implementing the recommendations and meeting targets • Reporting annually to Councils and the School districts • Facilitating partnerships, and engaging with Provincial and community partners • Identifying locations for new, not-for-profit and public quality child care • Bringing child care providers and staff together for information sharing, joint training and education; and providing more information for parents about child care, how to access it and how the system works, especially targeting more vulnerable populations. 	Short/medium	Not-for-profit providers, Island Health, all Mid-Island jurisdictions, school districts

4	Bring community partners together to explore the feasibility of a centralized waitlist and centralized list of providers in the Region to remove barriers for families to access current child care spaces.	Medium	Child care providers, school districts, Island Health, Child Care Action Group
5	Consider the opportunities for developing local government/Regional District-owned child care facilities, including accessing Provincial Capital funding to build child care spaces.	Short/medium	Province, not-for-profit operators
6	Develop and maintain an inventory of existing publicly owned spaces and properties that could be developed for child care that includes: <ul style="list-style-type: none"> Assets in the various jurisdictions (buildings and land) that are potential sites for capital redevelopment; Underutilized or vacant spaces or land, including parks, that could be used for child care; and Working with other public and not-for-profit partners to identify additional potential spaces and land. 	Short/medium/long	Island Health, School districts, not-for-profit child care providers, post-secondary institutions
7	Endorse the space targets identified in this report recognizing that partnerships and solutions outside of the mandate and resources of local governments are needed to deliver on these needs.	Short	Not-for-profit providers, school districts, Island Health
8	Develop building models/prototypes and high-level cost estimates to facilitate planning for new child care facilities on municipal sites.	Short	None
9	Where possible, prioritize spaces for age groups which are most underserved, like infant/toddler and school-age. Direct these new spaces to areas of the Region with lower access rates, growing population, and priority locations such as public facilities and parks, new residential and commercial developments, along transit corridors and on school properties. (See Appendix E)	Short/medium/long	Child Care providers, school districts, Island Health, Regional District Transit System
10	Include consideration and provision of child care within strategies and projects for affordable housing, seniors' residents and transit expansion/improvement.	Short/medium/long	BC Housing, Regional Transit System, Island Health
11	Bring partners together to explore and pilot, with providers, child care that offers longer, non-traditional and/or flexible hours.	Medium	Child Care Action Group, Province, Island Health, not-for-profit providers, school district

12	Engage in ongoing dialogue with First Nations and Métis, focusing on meeting the needs of Indigenous families/children and supporting high quality and culturally rooted programming.	Medium	Indigenous Communities
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Recommendations to Increase Accessibility			
Regulations and Development Processes			
	Action	Time Frame	External Partners
13	Consider child care as a desired amenity in return for bonus density, where applicable.	Short/medium/long	None
14	Identify and consider changes to municipal processes and regulations to better facilitate creation of new child care spaces. Include a review of fees charged. Where appropriate, changes should align with Island Health.	Short/medium	Island Health, applicants, not-for-profit child care providers
15	Put not-for-profit child care applications at the front of the permitting queue, when/if the size of the queue is causing delays in approval.	Ongoing	None
16	Join or co-host Island Health child care information meetings for potential child care providers who are interested in opening child care centres to describe the various 'licensing' roles and processes for each jurisdiction.	Short/medium	Island Health
17	Add comprehensive information on all municipal websites regarding child care. This should include information for families seeking child care (e.g. links to the Pacific Care Child Care Resource and Referral and the BC Child Care Map) and particularly, should include zoning, processing, financial and related information for operators wanting to develop a child care facility. Information should align with Island Health where appropriate.	Medium	Not-for-profit child care providers, Island Health

Recommendations to Improve Affordability			
	Action	Time Frame	External Partners
1	Create a grant program for not-for-profit child care centres to assist with facility upgrades and maintenance or to offer extended hours.	Short/medium	Not-for-profit providers
2	Lease or rent local government-owned facilities or land to not-for-profit child care providers at no cost or below-market rates.	On-going	Not-for-profit providers
3	Reduce application fees for permits.	Short	None
4	Advocate to senior governments to reduce the cost of child care and increase compensation for child care facility staff.	Short/medium/long	Senior governments, School district

Recommendations to Promote and Influence Quality			
	Action	Time Frame	External Partners
1	When and if considering the development of local government-owned child care spaces (as in Recommendation #4 under Accessibility), ensure that: <ul style="list-style-type: none"> Partners are not-for-profit and/or public child care providers Local government policy expectations are met Local/regional governments consider the efficacy of developing facility design guidelines that are based on what the research states is best practice for child care (i.e. square footage for indoor and outdoor space that exceed the minimum Provincial Licensing Requirements. 	Short	Not-for-profit providers, School districts
2	Support the province in its <i>“Early Care and Learning Recruitment and Retention Strategy”</i> initiative through joint advocacy.	Short	School districts, Not-for-profit providers,
3	Explore the role of providing leadership for more and better-qualified ECE staff and additional training opportunities such as workshops, online seminars, professional education, etc.	Short	VIU, not-for-profit operators
4	Increase the number of licensed, not-for-profit, publicly funded child care operations, including consideration of strategies to recruit not-for-profit operators to move into the Mid-Island Region.	Long	Province, not-for-profit providers, School districts, Parks, Island Health

Recommendations to Develop Collaboration and Partnership			
	Action	Time Frame	External Partners
1	Build supportive and learning relationships with Métis and First Nations. Support indigenous perspectives and history in child care.	Ongoing	Métis and First Nations
2	<p>Build a partnership and joint planning protocol with the school districts around child care to:</p> <ul style="list-style-type: none"> • Ensure child care is part of all new school facilities and renovated school spaces where possible; • Facilitate the use of school spaces and grounds for school age care operations, where possible; • Structure regular and ongoing communication between the local governments and School districts; • Support the provincial direction of universal school age care and the commitment to move child care to the Ministry of Education; • Explore the use of empty, surplus school spaces for child care (e.g. Rutherford school in Nanaimo); and • Work with the school districts to ensure that child care providers have access to school facilities during holidays and professional development days. 	Short/medium	School districts, not-for-profit providers
3	Work with not-for-profit child care providers on collaborations that support their existing service and potential expansion.	Short/medium/long	Not-for-profit child care providers
4	Pursue partnership opportunities with employers in the corporate sector to provide spaces for child care facilities that serve their employees' families and community. These could be joint projects with the involvement of several employers and not-for-profit child care providers.	Short/medium/long	Local employers, Chamber of Commerce
5	With Parks departments, community service providers and others, explore the possibilities of providing more after-school activities for 10-12 year olds as the needs of this population are generally not met in licensed child care programs.	Medium/long	Parks (Community Centres), other community facilities such as a Boys and Girls Club.
6	Advocate to senior governments to provide support to the child care sector and families in the following areas and other priorities that may arise:	Short/medium	School districts

	<ul style="list-style-type: none"> Ensuring the needs of Mid-Island children are a priority for new spaces in provincial planning and funding Recruitment, remuneration and retention of ECE's; Increased resources to support children with additional needs through Supported Child Development Lower fees for families; and Funding to support non-traditional hours of care. 		
7	Continue to support and collaborate with the Early Learning and Child Care Council ("ELCO").	Ongoing	ELCO

Recommendations Unique to Each Local Government

Recommendation for the City of Nanaimo			
	Action	Time Frame	External Partners
1	Review Schedule D of the Zoning Bylaw and allocate a much higher point value for including child care in a development.	Short	None
2	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, not-for-profit child care providers, community as a whole, through OCP consultation
3	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole, through OCP consultation
4	Amend the terminology in the Zoning Bylaw, updating the definition section and replacing references to "day care facility" with "child care facility".	Short	None
5	Review the Zoning Bylaw with the aim of increasing the number of zoning districts in which child care facilities could be accommodated as a permitted use.	Medium	Not-for-profit child care providers; Island Health Licensing (to help identify locational priorities)
6	Promote the permissive tax exemptions to not-for-profit child care providers, where applicable.	On-going	Not-for-profit child care providers

7	Include child care in the City's next Strategic Plan (2023-2027) and identify child care as a priority for the Strategic Infrastructure Reserve (enacted January 2020).	Medium	None
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Recommendations for the City of Parksville			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall quality of life.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Amend the Zoning Bylaw by: <ul style="list-style-type: none"> • Updating the definition section to be more consistent in the use of "child care" terminology. Specifically, remove references to "day care" and "pre-school". • Clearly indicate in which zoning districts child care is a permitted use; • Making Child Care a permitted use in as many zones as possible. 	Short/medium	None

Recommendations for the Town of Qualicum Beach			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Amend the Land Use and Subdivision Consolidation Bylaw by: <ul style="list-style-type: none"> • Updating the definition section to include a definition of child care; • Making child care a permitted use in as many zones as possible. 	Short	None

Recommendations for the District of Lantzville			
	Action	Time Frame	External Partners
1	Amend the OCP to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, community as a whole through OCP consultation
2	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole through OCP consultation
3	Identify child care as an amenity to be considered for development through Bonus Density and CACs.	Short	Developers (consultation); not-for-profit child care providers.
4	Amend the Zoning Bylaw to make child care a permitted use in as many zones as possible. Allow for group care (25 children) in the definition of child care in the Bylaw.	Short	None

Recommendations for the Regional District of Nanaimo			
	Action	Time Frame	External Partners
1	Amend the OCPs to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, school district, community as a whole through OCP consultation
2	Incorporate specific goals, policies, and strategies in the various RDN OCPs for facilitating development of child care (e.g. citing child care facilities as an amenity to be pursued through density bonusing or CACs).	Short	Developers (consultation); not-for-profit child care providers.
3	Amend the two RDN Zoning Bylaws to include a definition for "child care", specifying the zoning districts in which child care facilities are allowed.	Short	None
4	Review the Zoning Bylaws with the aim of increasing the number of zoning districts in which child care facilities could be accommodated as a permitted use.	Short	None

Appendix B – Glossary of Child Care Types in BC

Child Care Type		Ages	Max Group Size
<div>LICENSED CHILD CARE</div> <div>Licensed child care facilities are monitored and regularly inspected by regional health authorities. They must meet specific requirements for health and safety, staffing qualifications, record keeping, space and equipment, child-to-staff ratios, and programming.</div>	Group child care – under 3 years	From birth to 36 months	12 children
	Group child care – 2.5 years old to school age	From 30 months to school age (Kindergarten)	25 children
	Group child care – school age (before-and-after school care)	School age (Kindergarten and up)	24 children from Kindergarten and Grade 1 or 30 children from Grade 2 and older with no Kindergarten or Grade 1 children present
	Multi-age child care	From birth to 12 years old	8 children, having no more than 3 children younger than 36 months old and, of those 3, no more than one child younger than 12 months old or having no more than 3 children younger than 36 months old
	In-home multi-age child care	From birth to 12 years old	8 children, having no more than 3 children under 36 months old and, of those 3, no more than one child younger than 12 months old; or having no more than 3 children younger than 36 months old
	Family child care	From birth to 12 years old	7 children, having no more than 3 children younger than 48 months old and, of those 3, no more than one child younger than 12 months old; or having no more than 4 children younger than 48 months old and, of those 4, no more than 2 children younger than 24 months old
	Preschool – 2.5 years old to school age	From 30 months to school age (Kindergarten)	20 children
	Occasional child care	18 months old and up	16 children if children under 36 months are present or 20 children if children under 36 months are not present

<p>REGISTERED LICENSE-NOT-REQUIRED CHILD CARE</p> <p>These are unlicensed care providers. They must have registered with a Child Care Resource and Referral Centre. To register, operators must have completed: criminal record checks (for everyone over age 12 living in the home), character references, a home safety assessment, first aid training, and child care training courses or workshops.</p>	<p>From birth to 12 years</p>	<p>Only 2 children or a sibling group who are not related to them</p>
<p>LICENSE-NOT-REQUIRED CHILD CARE</p> <p>These child care providers can operate legally in B.C. They are not registered or licensed and are not monitored or inspected. Unlicensed child care providers do not have to meet health or safety standards. Parents and guardians are responsible for overseeing the care and safety of their children in these care arrangements.</p>	<p>From birth to any age</p>	<p>Only two children or a sibling group who are not related to them</p>
<p>IN-CHILD’S-OWN-HOME CARE</p> <p>This unlicensed care is when parents arrange for child care at home – like a nanny or a baby-sitter. Children from other families cannot be included in this care. The care provider cannot be a relative who lives in the home. It is not legally required to monitor this care. No specific qualifications are required for the child care provider. Parents or guardians must decide how to screen and hire the child care provider who becomes their employee.</p>	<p>N/A</p>	<p>Children from other families cannot be included in this care.</p>

Appendix C – Community Engagement Report

This report can be found on the following page.



Mid Island Region Child Care Planning:

Community Engagement Report

*Prepared by the Social Planning and Research Council of BC
In collaboration with Sandra Menzer*

Last updated: November 30, 2020

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Introduction

This report summarizes findings from four key community engagement activities for the Mid-Island Child Care Planning Project. Two other activities, the online surveys (one of parents and caregivers and one of child care providers), are presented in separate reports. Specifically, this report comprises:

- Interviews with key stakeholders;
- Interviews with child care providers;
- Interviews and an online survey with more vulnerable and underserved populations; and
- Engagement with Snuneymuxw, Qualicum and Snaw-Naw-As First Nations.

The input gathered through these engagement activities is intended to inform Mid-Island Region's child care planning processes, to ensure the child care strategy best reflects and responds to local community need.

Mid-Island Child Care Key Stakeholders Interviews

Background

To better understand the local child care context, the consulting team interviewed 20 individuals from 17 organizations that were identified as 'key informants' i.e. individuals with experience, knowledge, and organizational perspectives that would allow them to speak to the child care needs of families and children in their community. The interviews included staff from Vancouver Island Health Community Care Licensing, Ministry of Child and Family Development (MCFD), Vancouver Island University, School Districts 68 and 69, Chambers of Commerce for Nanaimo and Qualicum Beach, and several non-profit social service providers, many directly involved in providing child care services. A full list of the individuals interviewed and the organizations they represent is available in Appendix A.

Roles of each organization in child care and in supporting children and families

Vancouver Island Health Community Care Licensing holds all responsibilities for licensing child care programs in Mid-Island. MCFD funds programs for children with special needs as well as other early years programs. Both School Districts rent child care space to for-profit and not-for-profit operators and have applied for capital funding to create new child care spaces. Vancouver Island University offers an Early Childhood Education diploma program and supports research and professional networks in the sector and has plans to develop child care spaces. The Child Care Resource & Referral, hosted by Pacific Care Family Enrichment Society, provides information and referrals to families looking for child care and training to child care providers.

As part of this engagement work, key informants from several not-for-profit organizations were interviewed. Oceanside Building Together Society, Boys and Girls Club of Central Vancouver Island, Central Island Multicultural Society, Tillicum Lelum, Nanaimo Aboriginal Centre, Nanaimo Child Development Centre, and Sources Community Resource Centre all provide a range of services to families across the region and some also directly provide child care.

In addition, we spoke to key informants with less direct involvement in child care, including a key informant from the Nanaimo Early Years Healthy Start Fair, which is an outreach fair where families can learn about different resources and connect with services providers; Mount Arrowsmith Teachers Association, which is the local teachers' union of School District 69; and the Nanaimo and Qualicum Beach Chambers of Commerce.

Greatest organizational successes

Many key informants cited strong partnerships with other organizations and between their organization and child care providers and/or families as their greatest success. Vancouver Island Licensing, the Child Care Resource & Referral, Vancouver Island University, the Supported Child Care Development and Infant Development Programs and the Nanaimo Child Development Centre all play important roles in increasing capacity in the child care sector. Key informants from the not-for-profit organizations offering child care services were proud of their affordable, high-quality child care programs. In particular, the two Aboriginal Head Start programs in Nanaimo, offered through Tillicum Lelum and the Nanaimo Aboriginal Centre, are significant community assets. The preschool program at Nanaimo Child Development Centre is another unique community resource as it offers high levels of support and integrated therapy for children with special needs, with higher staff-child ratios than other centres.

In addition, the School Districts, Vancouver Island University, and many of the not-for-profits agencies are actively working to create more child care spaces. In late July, Vancouver Island University successfully applied for capital funding to build 75 spaces and School District 68 (Nanaimo-Ladysmith) received funding for 406 spaces at 10 schools. The Central Island Multicultural Society, Nanaimo Aboriginal Centre, and Metis Nation have also partnered to apply for funding to build and operate a 25-space centre.

Greatest organizational challenges

Several key informants reported the need for additional funding: to train more Early Childhood Educators (ECEs), to facilitate the expanded role of the School Districts in child care, and to meet rising and increasingly complex demand for programs for children with special needs. Organizations that provide child care face many of the same challenges as other operators in the sector across BC; in particular, many struggle to recruit and retain qualified staff. Those interviewed also noted that COVID-19 has had a profound impact on their service delivery and it is unclear what the future looks like.

The state of child care in the community

These stakeholders described the child care situation in their communities as a “crisis”. There are not enough programs available to meet the needs of families, with a particular lack of infant-toddler care. Many families find it difficult to afford child care, though recent government programs (e.g. the Child Care Fee Reduction Initiative, Affordable Child Care Benefit, etc.) have reduced costs for parents.

Key informants report there are few services available with non-traditional operating hours. Families with multiple children face additional challenges finding care and when they are offered spaces, the total cost is often prohibitive. Newcomer families sometimes experience overt discrimination from operators. Many of those interviewed also report that operators do not take children with extra support needs while at the same time, they note a significant increase in the number of children with extra support needs and/or more complex behavioural issues. Long waitlists for Supported Child Development funding sometimes mean “children are not getting what they need when there are delays in development”.

Overall, while child care is described as a “huge stressor” for families in the region, it is the families and children who are already vulnerable that are most negatively impacted by the overall dearth of high-quality, affordable care.

Changes over the past 3 years

Key informants welcome the provincial government's commitment to a universal child care system and the associated increases in funding for child care over the past three years. Stakeholders also noted positive institutional changes associated with this commitment, including the creation of the position Minister of State for Child Care, new links between the Ministry of Education and the Ministry of Children and Family Development, and a larger role for School Districts in child care. Key informants believe that more operators are interested in opening child care facilities and more families can access care because of these initiatives. The importance of child care is also more publicly recognized; as one key informant shared, "just recently child care seems to be getting the profile that it deserves".

It was noted that parents have more information about the quality of care since licensing inspections and complaints of facilities are now publicly posted on the Government websites. Key informants suggested that because of this change, along with the increased information about child care in the public realm, as well as strengthening of partnerships between Licensing and operators, more parents prefer licensed care.

Key informants also noted that requests for supports for children with additional needs, such as the Supported Child Development program, have increased significantly over the past few years.

Key challenges and success for parents

While some families are able to access high-quality programming, including the \$10-a-day prototype centres and zero-fee Aboriginal Head Start programs, most key informants were hard-pressed to identify what is working well overall for parents.

Key stakeholders identified a number of challenges for families. There is not enough child care available for all of the children who need it, especially infant-toddler and school age care. The process of finding care is complicated and stressful for many parents. Families without the resources and knowledge to "call everyone to get on all the waitlists and follow up over and over again" are further disadvantaged. Navigating the system and finding suitable care is especially difficult for newcomer families and for families with children with additional needs.

Many parents find it difficult to find child care with operating hours that match their work schedules and that accommodate necessary commuting time as there are few options for parents who work non-standard hours. Because the region is large and car-centric, transportation of school age children from school to school age care programs or other after-school activities is also a challenge for working parents. Finding conveniently located care is especially difficult for families in rural areas.

While recent government initiatives such as the Affordable Child Care Benefit, Child Care Fee Reduction Initiative, and \$10-a-day prototype sites have helped lower child care costs, many families are still struggling to afford child care. For lower income families, the cost of child care is often prohibitive. In general, families with existing vulnerabilities are too often left behind in a child care system with few options and high fees. When families cannot find or afford licensed child care, they may be forced to fill in the gaps with informal operations, which may not meet standards of safety and quality.

Families in the community generally find out about child care through social media, especially Facebook, and through word of mouth. The Child Care Resource & Referral is also a common source of information.

Key challenges and successes for operators

Key informants reported strong partnerships between child care operators and Licensing, the municipalities, and schools. There are also strong relationships between operators and families and children.

However, key informants also highlighted many challenges for child care operators. Virtually every key informant stated that the greatest challenge for operators is recruiting and retaining qualified staff. There are no clear pathways for career progression for ECEs and other certifications offer more diverse work options. Compensation tends to be poor, though even not-for-profits offering relatively high wages still struggle to find suitable, qualified staff. The results of these staffing challenges include high staff turnover, high staff burn out, reliance on licensing exemptions, and even closure of programs when operators are unable to find staff.

Child care operators also have difficulties finding affordable and suitable facility space, especially with access to outdoor space. While facility space on school grounds offer many advantages, this can be challenging to accommodate when schools need classroom space. In general, many operators find licensing and municipal building permit processes confusing, complicated, inconsistent, and time-consuming. As one key informant shared, “child care providers don’t have the money or the education to be planners or developers so it’s hard to meet the requirements”. In general, many child care operators struggle with financial viability and sustainability.

Key stakeholders were asked to suggest actions or initiatives that various groups could undertake to facilitate or support child care in the Mid-Island region.

Local Municipalities

- **Facilitate creation of more child care spaces.**
 - Provide public land and building space to operators
 - Facilitate creation of child care facilities in public parks
 - Apply for capital funding
 - Allow developers to increase density in return for child care (density bonusing, CACs)
 - Change bylaws so that child care must be included when new housing is developed – or more generally, link together child care planning and housing strategy
 - Amend zoning requirements and bylaws (e.g. around traffic, parking) to facilitate creation of more spaces
 - Streamline processes for building permits and partnership approval for child care
 - Improve coordination with licensing for inspections
 - Directly operate child care centres
- **Co-ordinate local agencies and facilitate partnerships.**
 - Play a coordination role – larger child care planning table that facilitates collaboration and partnership between organizations – keeping planning table going
 - Facilitate connections between child care providers and “ensure they are part of the conversation”
 - Continue to partner with child care operators
 - Develop centralized waitlist
- **Advocacy and planning.**
 - Develop municipal child care strategy

- Advocate to senior levels of government based on local needs
- Advocate for nature programs to be licensed

School District

- Work towards goal of providing continuum of education and care for children of all ages on school grounds at every school – requires additional funding to fulfill this mandate
- Create more child care on-site with modular buildings
- Use vacant facilities to create child care
- Prioritize collaboration and full partnerships with not-for-profit operators to create more spaces on school grounds
- Continue collaborating on applications for capital funding
- Support quality programming through training and curriculum support
- Fix playgrounds to meet licensing standards – on-site child care should be able to use playground structures
- Advocate for nature programs to be licensed
- After school care for children with special needs up to age 19
- Play advocacy role to senior levels of government based on local need
- Advocate for more flexible licensing around facility space on school grounds

Senior Levels of Government

- Increase fee subsidy for parents
- Continue to support enhanced wages
- Increased funding for bursaries to access initial and ongoing training
- Increase funding to post-secondary institutions to offer programs for ECEs
- Increase training requirements for ECEs
- Conversely – create a registry to allow for ‘laddered education’ so people can start working with minimum requirements
- Accelerate education to get infant-toddler certification
- Centralized substitute list for operators to access
- Support relaxation of certain licensing rules for older children
- Support some flexibility in staff qualification requirements for licensing
- Streamline bureaucratic work required to open and operate child care facilities
- Increased funding for inclusion of children who have additional needs, especially school age
- Continue to provide capital funding
- Allow multiple non-profit partnerships to apply for capital funding for one location
- Incorporate child care in new hospitals and public spaces
- Incorporate child care in senior residential care centres
- Increase supports for most vulnerable families
- Continue to expand \$10 a day prototype sites
- Implement universal, publicly funded child care – every child should have a right to quality, accessible care – prioritize this for funding and process
- Continued investment in child care, even if running deficits
- Increased federal funding
- Support community initiatives and partnerships

- Increase collaboration between ministries currently responsible for child care and move toward child care responsibility under a single ministry, ideally Ministry of Education

Community Agencies and Child Care Operators

- Increase coordination and collaboration between providers
- Create permanent group to coordinate efforts, include School District
- Partner with others to provide more spaces
- Contribute expertise, experience, knowledge, and ideas
- Provide full orientation for newcomer families so parents know what the system is and what to expect from infant to school age

Interviewees were asked to identify their 'Top 3' suggested changes to improve the child care situation. The responses are grouped by themes.

Increase the number of high-quality, licensed spaces to meet need

- More flexible hours of care and drop-in programs
- Accessible care for kids with additional support needs

Create a universal public child care system

- Increased funding to child care makes all other suggested changes possible
- Make it a right for every child to access child care
- Develop oversight from a single body
- Integrate child care and K – 12 school system to ensure consistent quality of care and full service from birth to high school completion

Focus on addressing staff recruitment and retention challenges

- Make Early Childhood Education a more attractive career path
- Increase ECE wages and other compensation – consider progressive wage grid
- Provide bursaries for new educators – no-cost ECE training
- Increase number of spaces in ECE training programs
- Increase educational requirements for ECE
- More ongoing training and professional development for ECEs
- Better training for ECEs on systemic racism

Space

- Purpose-built centres for child care rather than renovations or spaces that are not fully suitable
- Create more 'one-stop-shop' centres for families to access many services, including child care
- Open schools on weekends, summer school breaks for child minding or child care
- License nature schools
- **Improve information-sharing**
 - Clearer information for parents on how to access child care (e.g. website)
- **Enhance partnerships**
 - Build partnerships for child care with municipalities, School Districts, health authorities, employers, and community agencies
 - Enhance number of FTE licensing officer personnel to give them time to truly partner with operators

Mid-Island Child Care Provider Interviews

Background

To gain insights of those doing frontline work in the child care sector, the consulting team interviewed ten child care operators. These interviews are intended to supplement the online survey of child care providers, which garnered responses for 126 child care facilities in the region. The child care operators interviewed represent a cross-section of centre and home-based care, as well as both for-profit and not-for-profit care. It should be noted that interviews took place in July 2020, during the COVID-19 pandemic, which likely impacted providers' current operations.

Changes to their child care programs over the past 3 years

Child care providers report that demand for spaces has increased over the past three years, especially for infant-toddler and after-school care. They note that the Child Care Fee Reduction Initiative and increases to the Affordable Child Care Benefit have helped make child care more affordable for many families, though one provider noted the additional paperwork associated with the new funding programs can be difficult to manage.

Some operators describe changes over time in the families and children they serve, including an increase in children with behavioural issues and extra support needs. Other, generally smaller, operators, described fewer noticeable changes over time in the types of families and children they serve. Child care providers also reported improving their child care program curricula and guiding philosophies based on the needs of the children they serve. Several operators reported moving or renovating to access better indoor and outdoor facility space.

Families and children currently served

Most of the child care providers interviewed reported having one or more children that require additional supports, the majority of whom have support staff assigned to them. Some do provide care for families that are new immigrants, Indigenous, and single parent and the reported number of children receiving fee subsidy ranges from one child to virtually all the families in the programs.

Waitlists

All but one of the child care providers interviewed keep an active waitlist; the remaining provider closed their waitlist in response to high demand. Some centres with multiple programs keep a waitlist only for their infant-toddler program. The reported number of children waitlisted ranges from 3 to 50 children, with some operators capping the number of names they will accept on the waitlist. Many operators note that it is difficult to estimate when spaces will become available because siblings get priority and many families are on multiple lists. However, wait times for infant-toddler spaces generally range from 18 months to 3 years. Practices around waitlist fees vary.

Some operators describe their waitlists as “out of control” and several describe changing their waitlist processes to cope (e.g. requiring parents to visit the facility before joining the waitlist, requiring parents to check-in and confirm their interest every 3 months, etc.).

State of child care in the community

Many providers describe the state of child care in the community as a “crisis”, “state of emergency”, or “desperate”. While some operators feel optimistic about the increased political focus on child care and funding for new spaces, others feel confused or left behind by these changes. There is consensus that there is an enormous lack of infant-toddler spaces, while care for children aged 3 to 5 is more readily

available. Quality and affordability of programs vary. Recent government initiatives, particularly increasing the Affordable Child Care Benefit, have improved child care affordability significantly.

However, programs are still expensive for many families and operators find it difficult to balance between keeping fees affordable for parents and paying their staff good wages. There are many labour force challenges within the sector with interviewees reporting that there are not enough ECEs and that those who work in the field do not receive adequate training. Staff often work very long days with no breaks and many centres experience high staff turnover which is “really hard on the children and families”.

Greatest challenges faced by parents

As noted above, the biggest challenge faced by parents is the lack of child care spaces, especially infant-toddler as well as school age care. Because of the lack of spaces, parents are forced to compromise on their preferred care arrangement, often accepting spaces at programs of lower quality or a long distance from work and home or relying on informal care arrangements. Child care is very expensive for many families.

Some families face additional challenges to finding suitable child care, including parents of children with special needs, parents with multiple children, families in smaller and rural communities, parents with longer commute times, shift workers, and single parents. It is often difficult for parents to navigate the child care system and access the supports they need. Many support services are also only available in Nanaimo.

Generally, families find out about child care through social media, word of mouth, schools, advertising by operators, the CCR&R, and the MCFD map. However, these sources of information are sometimes incomplete or out-of-date.

Greatest challenges faced by operators

The greatest challenge faced by many operators is finding and retaining qualified staff, leading to high staff turn-over, reliance on licensing exemptions, and sometimes to closure of entire programs. Operators are sometime unable to offer competitive wages and other forms of compensation. Centres are also responsible for hiring their own support staff for children with additional needs, which can be difficult and requires additional administrative work. Few substitute teachers are available, which means centres must close if staff are unable to come to work.

Some of the operators interviewed suggested improvements to the local ECE training program. Some would like there to be more training on behaviour management and care for children who have experienced trauma or who have other additional needs or more challenging behaviours. One interviewee felt that “there is a huge disconnect between what [the ECE program] is teaching and what actually happens in the classroom”. They also voiced concern that students do not get paid for practicums so lose income during this time. Others were concerned that some students who complete the ECE program do not stay in the field and that practicum placements are no longer a guaranteed avenue to get suitable, committed staff.

Some child care providers felt licensing requirements are sometimes too rigid and that flexibility would be useful on a case-by-case basis. One provider notes that licensing seems to have high staff turnover which “does not allow for relationship building” and that the relationship feels non-supportive - “it seems like all they do is look for infractions”. There is a sense that parents sometimes call licensing

rather than talk out issues with staff and that minor complaints require the same processes of investigation as major infractions, as all complaints influence ratings and inspection dates. Some providers reported that it is difficult to find suitable facility space that meets licensing requirements. Building permit, licensing, and re-zoning applications are time-consuming, confusing, and often tedious processes.

Child care operators also cope with a large workload, including increased administrative workload. Many report feeling overworked and overwhelmed. As one provider shared, “the stress makes me want to close my door. I’m tired. Needs of children are getting harder and I’m starting to burn out”. Operating costs are high and many operators struggle to keep their centres financially viable.

Plans for expansion

Around half of the child care providers interviewed were currently implementing plans for expansion, with new spaces to be offered in the fall and winter. These expansion plans include 56 infant-toddler, 14 30 month-school age, and 16 preschool spaces. Other providers expressed some interest in expansion but cited barriers including lack of staff, difficulty finding space, and lack of capacity to manage the additional workload. One provider was uncertain about what community need would be after the new spaces funded by the capital grant funding open.

The Child Care Providers were each asked to suggest some actions or initiatives that various groups could do to facilitate or support child care in the Mid-island region.

Local municipalities

- Streamline process for obtaining building permits
- Increase flexibility for zoning to facilitate creation of spaces in existing buildings (e.g. schools, community buildings, churches)
- Decrease wait times for licensing
- Offer space for child care in community buildings
- Assist with finding other spaces that meet licensing requirements
- Create child care contact at the municipal level, a navigator, to help operators work through bylaws, zoning, and licensing requirements as one cohesive process
 - This person could provide workshops for operators about the process of expanding or opening new spaces

School Boards

- Introduce high school students to ECE as a potential career option – encourage people to enter the field
- Recognize early learning as important and take greater role in before and after school care
- Offer portables on school grounds for child care providers to lease
- Provide more StrongStart programs

Senior levels of government

- Provide free workshops for ECEs to enhance skills (e.g. behaviour management)
 - Consider group online workshops (hard to send staff to workshops without substitutes)
- Increase funding to improve day care spaces (e.g. onsite playground, quality supplies) and to increase staff wages
- Implement the \$10-a-day child care plan

- Increase regulation for fees so centres do not vary so much
- Increase wage enhancement funding for centres charging lower fees
- Extend wage enhancement to ECE assistants
- Increase availability of grants and supports for private operators
- Provide more funding for non-profits and continuing to support and fund small child care providers
- Reduce gap in funding for family centres vs group care centres
- Increase grants for operating upgrades and building costs
- Increase child care operating funding
- MCFD should improve child care map
- MCFD should increase supports for families
- Encourage more people to pursue ECE as a career; improve recognition of ECEs as educators
- Increased licensing flexibility (for ECEs, ages)
- Improve communication of policy changes to child care providers
- Make criminal record checks applicable to entire health authority rather than site specific to make it easier to find subs and share sub lists between centres

Community agencies and child care operators

- Increase partnerships
- Offer low cost rentals
- Support families to navigate and apply for the Affordable Child Care Benefit

Other

Education

- Improve quality of education for ECEs; consider offering BA in ECE – e.g. include leadership training for ECE supervisors
- Reduce tuition for ECE
- Offer ECE courses online so more accessible
- Waive practicum requirements for staff with child care experience

Large employers

- Create spaces in their buildings to provide child care for employees

Developers

- Include child care space in new buildings

Interviewees were asked to identify their 'Top 3' suggested changes to improve the child care situation. The responses are grouped by themes.

- Increased resources and funding for child care
 - Increase operating funding
 - More supports for private operators
 - More supports for family child care providers
 - Allow family child care providers to hire staff
 - Decrease discrepancy in funding between in-home and group centres
- More qualified staff – address recruitment and retention challenges
 - All child care workers would have ECE
 - Higher wages and benefits to increase number of ECE's

- Improve quality of education and training of ECE's
 - Substitute teachers available to be shared across multiple centres
- Improve affordability, access, and supports for parents and children
 - More child care spaces in high quality programs
 - Increase child care subsidy
 - Improve supported child care programs for children with additional needs
- Change in societal perception of child care
 - Change parents' way of thinking about child care – “not just babysitting”
 - Government initiatives to improve recognition of ECEs
- Collaborative approach among providers, schools, and government
- More room for providers to have input on government decisions around child care
- Fast-track and streamline processes to create new child care spaces
 - Decrease administrative burden on child care operators
 - More flexibility in licensing and zoning requirements
 - Make licensing more user-friendly
 - Consider creating special zoning for child care
- Make parent fees consistent across all centres

Mid-Island Vulnerable and Underserved Populations Engagement

Background

Individuals who are vulnerable or less privileged are often less likely to participate in conventional forms of community engagement, such as online surveys. To address this well-known response bias, and to learn about the experiences of families who may be underserved or more vulnerable, the consulting team and Mid-Island Child Care Working Group created a supplementary engagement process that builds on the strength of existing relationships between clients and service providers.

Several community agencies provided their staff with interview guides created by the consultant team (please see Appendix A for a full list of participating organizations). Staff then conducted the one-on-one interviews as informal conversations with any interested clients with children 12 years and younger. The interview guide was also made available as an online survey. Both the interview guides and the survey were translated and made available in English, Arabic, Chinese, Filipino, Korean, and Punjabi.

Overall, 43 individuals participated in this engagement process. Although the process was created to elicit input for individuals from many populations, including recent immigrants, parents of children with special needs, persons with disabilities, 2SLGBTQ+ individuals, single parents, foster parents, grandparents, and others, the analysis here focuses on the experiences of recent immigrants and parents of children with special needs. These are the two population groups where the number of responses was sufficient to create a robust summary that also protect participants' anonymity. However, it is worth noting several common themes throughout the responses of all participants, including lack of child care spaces, struggles with affordability, need for care in more convenient locations and for longer hours, desire for culturally safe care, and health and safety concerns related to COVID-19.

As individuals have intersecting identities, and as many families are vulnerable in multiple ways, it is important to note the experiences summarized here are not homogenous. Intersectionalities are highlighted in the analysis whenever possible.

Recent immigrant families

The engagement process garnered responses from 31 individuals who identified as recent immigrants. Interviews and surveys for this group were completed in English, Chinese, Korean, and Arabic. The number of children reported by recent immigrant families ranged from one to five, with a median number of three children.

For this group, the most common types of care arrangements were parents and other relatives, reported by over half of all respondents. The next most common was some type of group child care, most commonly before and after school, reported by 40% of respondents. Some families reported multiple care arrangements, either different arrangements for children of different ages or a combination of arrangements for one child (e.g. part-time group care, part-time family member care). Some parents have found child care arrangements that work well for their families. Many families using licensed group care shared positive experiences, especially with the child care staff, who are described as caring, skilled, and patient. Some parents feel having their children at home or with family works well for them, especially given health concerns related to COVID-19.

For respondents who are home with their children or who rely on family members and friends, the biggest concerns included lack of activities and social opportunities for children who are always at home.

Recent immigrant parents also shared challenges finding child care, especially care located near home or work. Many parents reported limited options and long waitlists. Daycare fees are also very expensive, especially for families with multiple children. Furthermore, several parents expressed health and safety concerns related to COVID-19. Many parents shared that their ideal care arrangement would be affordable, licensed group care with high-quality staff. Some also mention they would love if their child care program provided healthy food to their children. Some families also need care during longer hours, over the weekend, or for flexible, part-time hours to match their work schedules.

Parents of children with special needs

The engagement process elicited responses from ten parents of children with special needs. Three of the participants also disclosed that they are single parents. The number of children ranged from one to four, with a median of two in the family. Most of the children were under 5 years and some parents have multiple children with special needs.

The most common care arrangements reported were family child care, a parent at home full-time, and combinations of family child care and informal care from family or friends. Many parents rely on a patchwork of care arrangements due to the lack of full-time care.

Some parents using licensed child care reported positive experiences. As one parent shared, “our current day care has gone above and beyond for my son”. Many parents reported strong positive experiences with supports provided by Child Development Centre, including the playgroup and playschool.

However, most of the parents interviewed faced tremendous challenges finding care for their children with special needs; many could not think of anything that is currently working well for them. It is extremely difficult for parents with children with special needs to access care. While it is difficult for many families across the region to find child care spaces, especially for infant-toddler care, many of these families report that child care centres simply will not accept their children. As one parent shared, the CDC services are excellent “but that doesn’t help when there aren’t spaces or trained individuals for the diversity of children”. This common refrain is highlighted in the comments like, “it’s very frustrating – I’m very sad for my children that they also don’t get the opportunity to show who they are before they are judged by people over the phone”, “I’m tired of getting no responses or turned away or told I’m put on a waitlist and never get a call back”, and even “I have given up believing that any daycare will give my child a chance to grow and improve”.

While a few of these families reported finding high-quality child care providers, others shared very negative experiences, including having to remove their child from care or being asked to remove their child. Child care staff are often not trained to work with children with special needs. While SCD is an important resource, some child care providers do not follow the recommendations of the SCD consultants.

Parents reported that affordability is a major challenge, even with the subsidy and special needs funding, especially for those who are lone parents. Parents often feel they can only afford cheaper, in-home care, but that it is challenging to find family child care providers with the training and knowledge needed to provide care for children with special needs.

Given the overall lack of child care spaces and particular lack of providers both willing and capable of providing suitable care for children with special needs, as well as the high costs of child care, many

families report the feeling of being “backed into a corner”. As one parent shared, “I feel like I have very little options and have to choose between a bad place and lower quality place in order to work or to continue to jump from friends and neighbours – which also isn’t great for my children and their social development”. Some parents felt that they cannot complain about things they do not like about their current care provider because they have nowhere else to go.

What the ideal care situation would look like varied between families. Many expressed a wish for accessible, affordable full-time child care where their children are treated with respect and given the support they need. One parent suggested their ideal arrangement would be a specialized daycare for special needs children. Other parents described their ideal situation as care in their own home, through a nanny or au pair qualified to work with children with special needs. Others would prefer the option to be financially supported to stay at home with their children.

Engagement with First Nations

A commitment to engage with the three First Nations was a priority. A range of approaches to reach out to the Nations was employed, the last one being a partnership the Snuneymuxw Nation, along with an invitation to participate from the City of Nanaimo to the Snaw-Naw-As, Nanoose First Nations, Snuneymuxw first Nation, Stz’uminus First Nation, and Qualicum First Nation. Interviews were completed with three staff from Snuneymuxw and Stz’uminus First Nations.

Some key findings from these interviews are summarized below:

- There is lack of infant-toddler and school age child care. There are also few options available for parents who do shift work.
- While there are more financial supports available to families now, which is a positive development, many families still struggle to navigate the process for getting approval for programs like the Affordable Child Care Benefit.
- The cost of operating child care has increased.
- While staff from the programs interviewed are proud of the quality of child care staff at their centres, there is unmet need across the sector for qualified child care workers. Interviewees would like to see higher wages for child care staff.
- There is need for more quality child care facility space, including outdoor space where children can connect with the land. In general, there is interest in more outdoor and land-based learning.
- There is desire for more resources to support teaching Indigenous language and culture.
- There is also desire for more outreach and connection from health care services to child care facilities (e.g. providing access to hearing/sight testing, speech therapy, etc.).

Appendix A: Participating Organizations and Individuals

Key Informant Interviewees

Organization	Name/Position
Vancouver Island Health	Shelley McClure, Regional Manager for Community Care Licensing
Ministry of Child and Family Development	Jamie Robertson, Director of Operations for Early Years & Children and Youth with Special Needs
School District 68 (Nanaimo-Ladysmith)	Jane Carrol, District Principal, Department of Learning Services
School District 69 (Oceanside)	Dr. Keven Elder, Superintendent
Vancouver Island University	Dr. Lynda Phillips, Associate Dean for Health and Human Services
Pacific Care Family Enrichment Society (Child Care Resource & Referral)	Scott Beam, Executive Director & Deb Perras, CCR&R Program Manager
Oceanside Building Learning Together Society	Judi Malcolm, Manager
Boys and Girls Club of Central Vancouver Island	Karen Love, Executive Director
Central Island Multicultural Society	Jennifer Fowler, Executive Director
Nanaimo Early Years Healthy Start Fair	Amber Bruner
Tillicum Lelum	Tammy Aguilera, Early Years Director
Nanaimo Aboriginal Centre	Chris Beaton, Executive Director
Nanaimo Child Development Centre	Dominic Rockall, Executive Director & Kathleen Silvey, Department Lead for Preschool and Supported Child Development
Sources Community Resource Centre	Howard Schein, Director of Community Services & Julie Snowden, Team Leader of Child Development Services
Mount Arrowsmith Teachers Association	Debbie Comer, Local President
Nanaimo Chamber of Commerce	Kim Smythe, President and CEO
Qualicum Beach Chamber of Commerce	Mike Kervel, Members and Community Co-ordinator

Child Care Provider Interviewees

Facility	Name
Core Education and Fina Arts (CEFA)	Rhonda Lee Salvani
Kid's Place Child Care Centre	Tina Alyward
Lil Ones Early Learning Centre	Janet Fletcher
Nanaimo Innovation Academy	Keely Freeman
Nanaimo's Integrated Childcare Centre	Amber McLeod
Tenderfoot Child Care	Summer Lin
The HOPE Centre	Alice Verstraete
The Thinking Garden Early Childhood Centre	Elidah Jewer
Vancouver Island School of Early Childhood Education	Michele Moore
Well Beings Early Childhood Centre	Lindsay Price

Vulnerable and Underserved Populations Participating Organizations

Organization
Nanaimo Child Development Centre
Central Vancouver Island Multicultural society
Boys and Girls Club of Central Vancouver Island
Nanaimo Aboriginal Centre
Oceanside Build Together Learn
School District 68
Snuneymuxw Nation

Appendix D – Community Profile

This report can be found on the following page.



Mid Island Region Child Care Planning:

Community Profiles

Prepared by the Social Planning and Research Council of BC

August 26, 2020

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Background

This Community Profile is largely based on data from the 2016 Census. It also incorporates data from the Nanaimo Regional District, School Districts 68 and 69, the Human Early Learning Partnership, and Vancouver Island Health Licensing.

City of Nanaimo

Child population statistics for the City of Nanaimo

In the City of Nanaimo in 2016, there were 11,395 children aged 0 to 12 years-old out of a total population of 90,504 (Figure 1). The largest age group was the 7-year-old group, with 935 children (8% of the total child population). The smallest age group was the under 1-year-olds, with 795 children (7% of the total child population). The age range with the largest number of children was the 5 to 9-year-old age range, comprising 41% of the total child population (4,630 children).

Figure 1: Child population statistics by age range for the City of Nanaimo, 2016

Age Range	Age Total	Age %
0 to 4 Years	4,225	37%
5 to 9 Years	4,630	41%
10 to 12 Years	2,540	22%
Total 0 to 12 Years	11,395	100%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002

Between 2011 and 2016, the total number of 0 to 12-year-olds increased by 1,175 children, an 11.5% increase (Figure 2). The 0 to 4-year-old population increased by 230 children (+5.8% increase). The 5 to 9-year-old age group increased by 870 children (+23.1% increase) and the 10 to 12-year-old age group increased by 75 children (+3.0% increase).

Figure 2: Changes over the past 2 censuses (2011-2016) in child population by age group, City of Nanaimo

Age group	Change in number of children, 2011-2016 (#)	Change in number of children, 2011-2016 (%)
0 to 4 Years	+230	+5.8%
5 to 9 Years	+870	+23.1%
10 to 12 Years	+75	+3.0%
Total 0 to 12 Years	+1,175	+11.5%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002

Population Projections

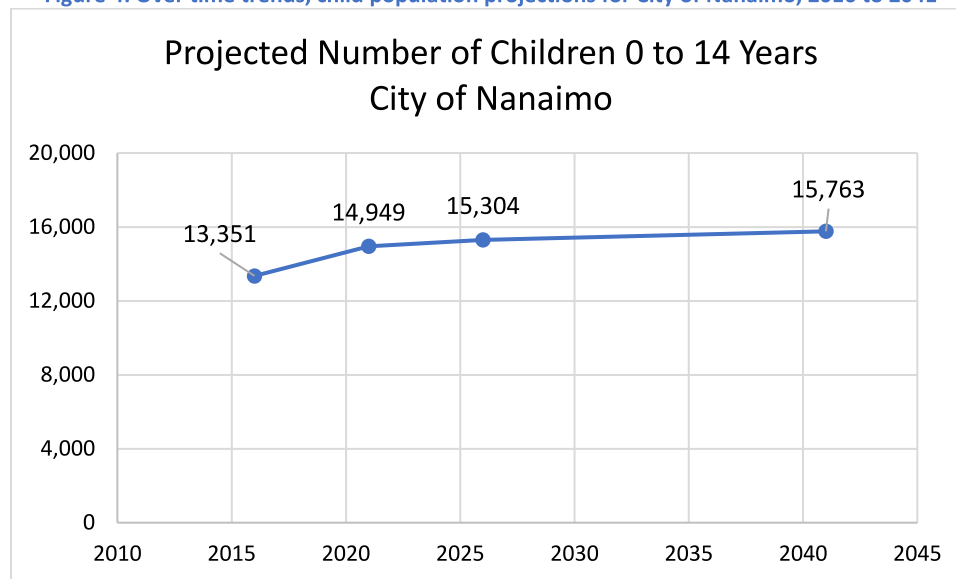
According to projections supplied by the Regional District of Nanaimo, assuming a baseline growth scenario, the population of 0 to 14 year olds in the City of Nanaimo is projected to increase from 13,351 children in 2016 to 15,763 children in 2041, an 18.1% increase (+2,412 children), with an average annual growth rate of 0.7% and average annual increase of 96 children (Figure 3).

Figure 3: Child population projections for City of Nanaimo, 2016 to 2041

Projected Number of Children 0 to 14 Years			
2016	2021	2026	2041
13,351	14,949	15,304	15,763
	+1,598	+355	+459
	+12.0%	+2.4%	+3.0%
Average Annual Change, 2016 to 2041 = 96 children			
Average Annual Growth Rate = 0.7%			

**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Figure 4: Over time trends, child population projections for City of Nanaimo, 2016 to 2041



**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Children in Lone Parent Families

In 2016, 26.3% of all children aged 0 to 14 lived in lone parent families (3,425 children) (Figure 5). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 1,305 children in lone parent families (31.3% of all children in this age range).

Figure 5: Number of children in lone parent families, City of Nanaimo, 2016

Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
0 to 4 Years	4,220	860	20.4%
5 to 9 Years	4,620	1,255	27.2%
10 to 14 Years	4,170	1,305	31.3%
0 to 14 Years	13,010	3,425	26.3%

*Source: Statistics Canada Catalogue No. 98-400-X2016041.

Median Family Income

In the City of Nanaimo in 2015, the median income (before-tax) was \$99,260 for couple families with at least one child 0 to 17-years-old and \$90,317 for couple families with at least one child 0 to 5-years-old (Figure 6). The median income for lone parent households was \$35,925 for those with at least one child 0 to 17-years-old and \$27,541 for those with at least one child 0 to 5-years-old.

Figure 6: Median family income (before-tax) by family type, City of Nanaimo, 2015

Family Type	Median Income (Families with children 0 to 17-years-old)	Median Income (Families with children 0 to 5-years-old)
Couple families with children	\$99,260	\$90,317
Lone parent families	\$35,925	\$27,541
Total families	\$77,275	\$72,976

*Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>

Low-Income Measure

In 2015, 23.1% of children aged 0 to 17 (3,625 children) were in low-income families based on the low-income after-tax measure (Figure 7).

Figure 7: Low income based on the low-income measure after tax by age group, City of Nanaimo, 2015

Age group	Number of children in low income families	Percentage of children in low income families
0 to 17 Years	3,625	23.1%
0 to 5 Years	1,265	24.6%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.

Housing

In 2016, the median monthly shelter costs for owned dwellings was \$995, while the median shelter costs for rented dwellings was \$912 (Figure 8).

Figure 8: Median monthly shelter costs, City of Nanaimo, 2016

Housing characteristics	Cost (\$)
Median monthly shelter costs for owned dwellings	\$995
Median monthly shelter costs for rented dwellings	\$912

**Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Languages Spoken Most Often at Home

Figure 9 lists the ten most common languages spoken at home in the City of Nanaimo and the total number of individuals that speak each language. There was a total of 57 languages spoken in the city. English (82,960 speakers), Mandarin (855 speakers), and Punjabi (535 speakers) were the most common languages in 2016.

Figure 9: Top ten languages spoken at home, City of Nanaimo, 2016

Language	Number of speakers
English	82,960
Mandarin	855
Punjabi (Panjabi)	535
Korean	275
French	255
Vietnamese	240
Cantonese	215
Arabic	170
Spanish	155
Tagalog (Pilipino, Filipino)	140

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070*

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.¹⁰ Persons with Aboriginal identity comprised 7.3% of the City of Nanaimo's total population in 2016 (6,405 persons of Aboriginal identity) (Figure 10).

Figure 10: Indigenous population, City of Nanaimo, 2016

Aboriginal Population	Number	Percentage
Aboriginal identity	6,405	7.3%
Total population	87,650	100%

**Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Immigration

In 2016 in the City of Nanaimo, 17.4% of residents were first generation Canadians (15,260 people). 19.8% were second generation (17,335 people) and 62.8% were third generation or more (55,055 people) (Figure 11).

Figure 11: Residents – breakdown by generation status, City of Nanaimo, 2016

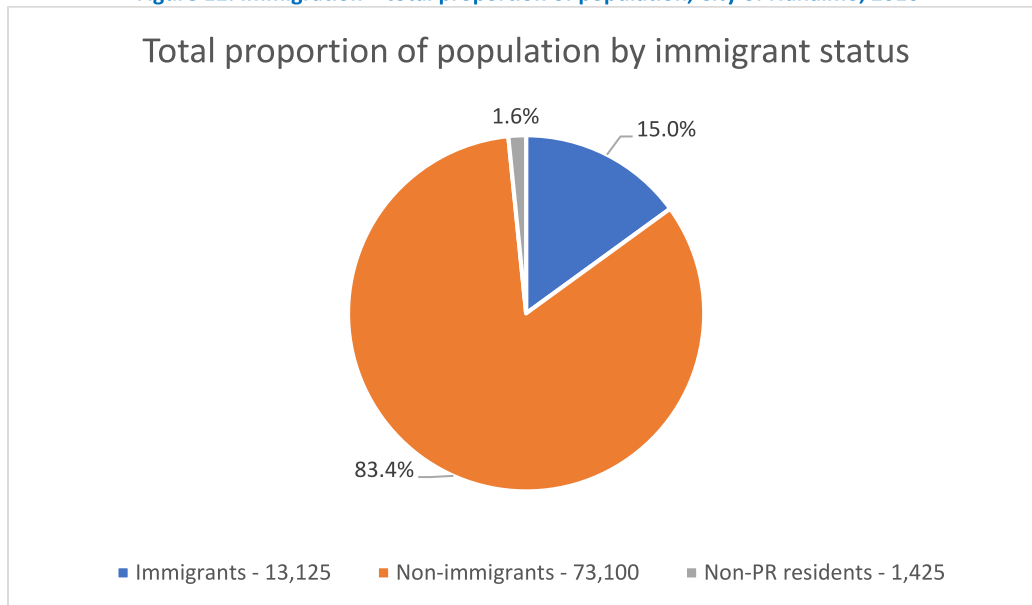
Generation Status	Number	Percentage
First generation	15,260	17.4%
Second generation	17,335	19.8%
Third generation or more	55,055	62.8%
Total	87,650	100%

**Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

¹⁰ For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

The total proportion of immigrants by immigrant status was 15.0% (13,125 immigrants). The total proportion of non-immigrants was 83.4% (73,100 non-immigrants) (Figure 12).

Figure 12: Immigration – total proportion of population, City of Nanaimo, 2016

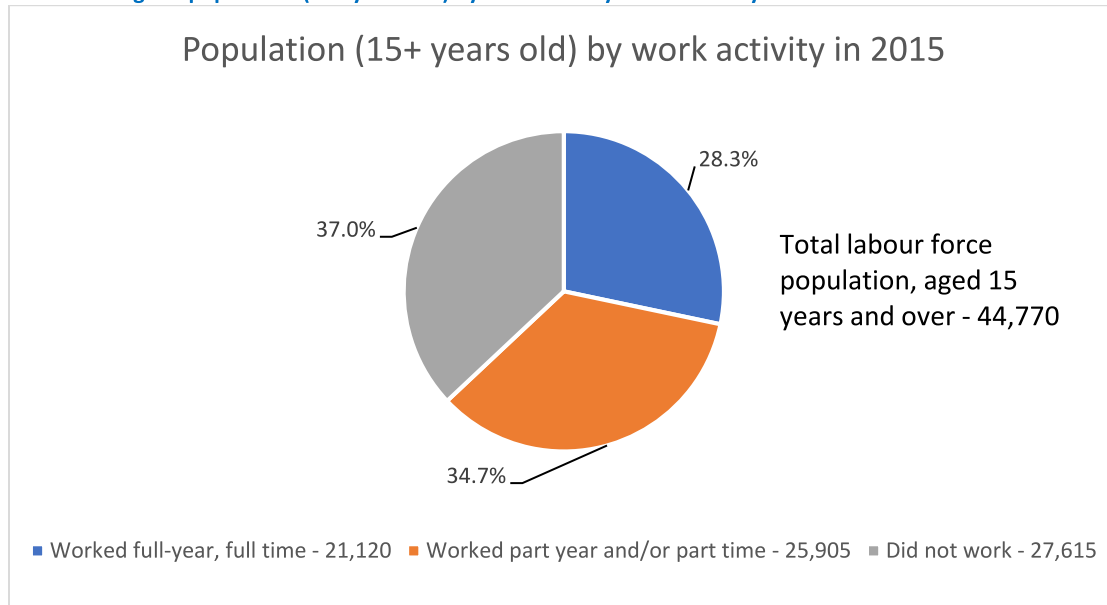


*Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Employment

In the City of Nanaimo in 2015, 28.3% of the population (15+ years old) worked full year, full time, compared with 34.7% who worked part year and/or part time and 37.0% who did not work (Figure 13).

Figure 13: Percentage of population (15+ years old) by work activity in 2015 in City of Nanaimo



**Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

We can generally assume that in most couple families with one or no earners and most lone parent families with no earners that a parent is staying at home. Figure 14 shows that 25.3% of couple families with at least one child 0 to 5-year-olds (745 families) and 19.6% of couple families with at least one child 0 to 17-years-old (1,230 families) had one or no earners. 27.2% of lone parent families with at least one child 0 to 5-years-old (250 families) and 18.9% of lone parent families with at least one child 0 to 17-years-old (530 families) had no earners.

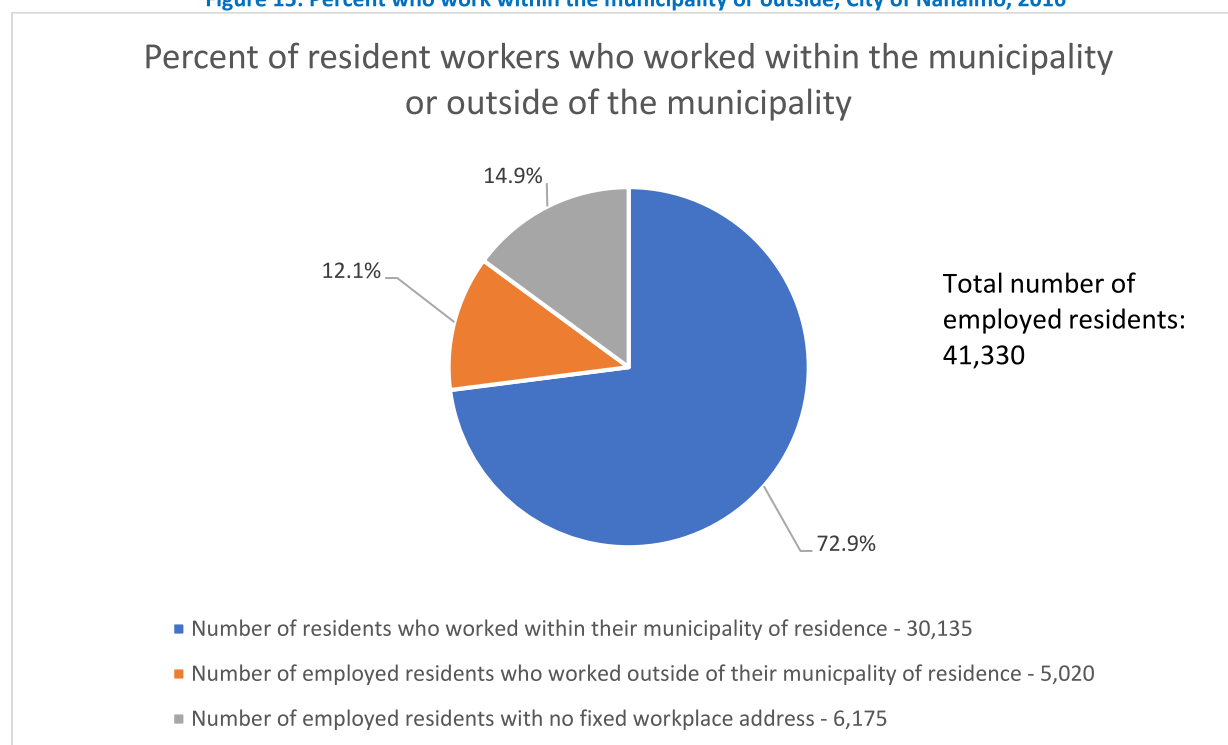
Figure 14: Percentage of families, by family type, by number of earners in 2015, City of Nanaimo

Number of earners	Couple families		Lone parent families	
	At least one child 0 to 17 years	At least one child 0 to 5 years	At least one child 0 to 17 years	At least one child 0 to 5 years
No earners	2.4% (150)	3.1% (90)	18.9% (530)	27.2% (250)
One earner	17.2% (1,080)	22.2% (655)	65.1% (1,830)	69.6% (640)
Two or more earners	80.4% (5,035)	74.9% (2,205)	15.8% (445)	3.3% (30)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

In 2016, 72.9% of workers residing in the City of Nanaimo worked within the municipality¹¹, 12.1% worked outside the municipality, and an additional 14.9% had no fixed work address (Figure 15).

Figure 15: Percent who work within the municipality or outside, City of Nanaimo, 2016



**Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Residential Mobility

In the City of Nanaimo in 2016, the number of people who had moved within the past year was 15,810 (18.2% of all residents) and the number of new people who had moved into the City was 5,795 (6.7%)¹².

The number of people who had moved within the past five years was 39,080 (46.8% of all residents) and the number of new people who had moved into the City was 17,350 (20.8%)¹³.

¹¹ This figure includes residents who worked from home.

¹² Source: Statistics Canada. 2017. Nanaimo, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

¹³ Ibid.

Child Care Spaces

In the City of Nanaimo, there are 158 child care centres offering a total of 3,326 child care spaces. The under-school age group (3 to 4-year-olds and half of all 5-year-olds) has the most child care spaces per capita, with 39.5 spaces per 100 children. By contrast, there are only 9.5 child care spaces in group care (birth to 36 months) for every 100 children aged birth to 2 and 18.4 spaces in group care (school age) for every 100 school aged children (6 to 12-year-olds and half of all 5-year-olds). Overall, the City of Nanaimo has 29.3 child care spaces for every 100 children from birth to 12 years of age.

Figure 16: Child care spaces by type versus child population by age group

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	236	0-2-year olds	2,495	9.5
Group (30 months to school age)	867	3-4-year olds and half of all 5-year olds	2,192.5	39.5
Group (school age)	1,232	6-12-year olds and half of all 5-year olds	6,702.5	18.4
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	999	General	-	-
Total child care spaces	3,334	Total 0-12-year olds	11,395	29.3

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

A more detailed overview of the number of programs and spaces by license type is presented below.

Figure 17: Child care programs and spaces by license type

License Type	Programs		Spaces	
	Number	Percent	Number	Percent
Group (Birth to 36 Months)	19	9%	236	7%
Group (30 Months to School Age)	37	18%	867	26%
Licensed Preschool	21	10%	371	11%
Group (School Age)	41	20%	1,232	37%
Multi-Age	9	4%	80	2%
Family Child Care	60	30%	420	13%
In-Home Multi-Age	16	8%	128	4%
Total	203	100%	3,334	100%

*Source: UBCM child care inventory, Island Health Licensing.

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. Family and in-home multi-age care account for 37% of all programs (76 programs) and 16% of child care spaces (548 spaces). For-profit care accounts for 47% of all programs (95 programs) and 60% of all spaces (2,011 spaces) while non-profit care accounts for only 16% of all programs (32 programs) and 23% of spaces (775 spaces).

Figure 18: Child care programs and spaces by service type and auspice

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	76	37%	548	16%
Group and multi-age: For-profit	95	47%	2,011	60%
Group and multi-age: Non-profit	32	16%	775	23%
Total	203	100%	3,334	100%

**Source: UBCM child care inventory, Island Health Licensing.*

City of Parksville

Child population statistics for the City of Parksville

In the City of Parksville in 2016, there were 985 children aged 0 to 12 years-old out of a total population of 12,510 (Figure 20). The largest age group was the 9-year-old group, with 90 children (9% of the total child population). The smallest age group was the under 1-year-olds, with 65 children (7% of the total child population). The age range with the largest number of children was the 5 to 9-year-old age range, comprising 41% of the total child population (400 children).

Figure 19: Child population statistics by age range for the City of Parksville, 2016

Age Range	Age Total	Age %
0 to 4 Years	340	35%
5 to 9 Years	400	41%
10 to 12 Years	245	25%
Total 0 to 12 Years	985	100%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Between 2011 and 2016, the total number of 0 to 12-year-olds decreased by 105 children, a 9.6% decrease (Figure 21). The 0 to 4-year-old population decreased by 35 children (-9.3% decrease) and the 10 to 12-year-old age group decreased by 75 children (-23.4% decrease). The 5 to 9-year-old age group increased by 5 children (+1.3% increase).

Figure 20: Changes over the past 2 censuses (2011-2016) in child population by age group, City of Parksville

Age group	Change in number of children, 2011-2016 (#)	Change in number of children, 2011-2016 (%)
0 to 4 Years	-35	-9.3%
5 to 9 Years	+5	1.3%
10 to 12 Years	-75	-23.4%
Total 0 to 12 Years	-105	-9.6%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Population Projections

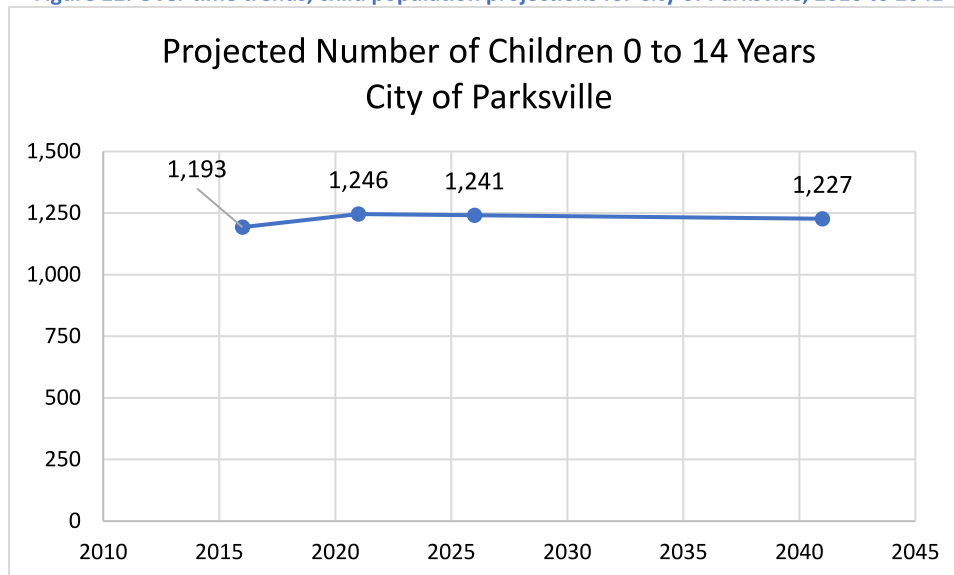
According to projections supplied by the Regional District of Nanaimo, assuming a baseline growth scenario, the population of 0 to 14 year olds in the City of Parksville is projected to increase from 1,193 children in 2016 to 1,227 children in 2041, a 2.8% increase (+34 children), with an average annual growth rate of 0.1% and average annual increase of 1 child (Figure 22).

Figure 21: Child population projections for City of Parksville, 2016 to 2041

Projected Number of Children 0 to 14 Years			
2016	2021	2026	2041
1,193	1,246	1,241	1,227
	+53	-5	-14
	+4.4%	-0.4%	-1.1%
Average Annual Change, 2016 to 2041 = 1 child			
Average Annual Growth Rate = 0.1%			

**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Figure 22: Over time trends, child population projections for City of Parksville, 2016 to 2041



**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Children in Lone Parent Families

In 2016, 26.5% of all children aged 0 to 14 lived in lone parent families (305 children) (Figure 24). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 130 children in lone parent families (31.7% of all children in this age range).

Figure 23: Number of children in lone parent families, City of Parksville, 2016

Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
0 to 4 Years	340	65	19.1%
5 to 9 Years	400	115	28.8%
10 to 14 Years	410	130	31.7%
0 to 14 Years	1,150	305	26.5%

*Source: Statistics Canada Catalogue No. 98-400-X2016041.

Median Family Income

In the City of Parksville in 2015, the median income (before-tax) was \$95,437 for couple families with at least one child 0 to 17-years-old and \$83,456 for couple families with at least one child 0 to 5-years-old (Figure 25). The median income for lone parent households was \$36,992 for those with at least one child 0 to 17-years-old and \$29,376 for those with at least one child 0 to 5-years-old.

Figure 24: Median family income (before-tax) by family type, City of Parksville, 2015

Family Type	Median Income (Families with children 0 to 17-years-old)	Median Income (Families with children 0 to 5-years-old)
Couple families with children	\$95,437	\$83,456
Lone parent families	\$36,992	\$29,376
Total families	\$76,629	\$66,304

*Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>

Low-Income Measure

In 2015, 18.7% of children aged 0 to 17 (280 children) were in low-income families based on the low-income after-tax measure (Figure 26).

Figure 25: Low income based on the low-income measure after tax by age group, City of Parksville, 2015

Age group	Number of children in low income families	Percentage of children in low income families
0 to 17 Years	280	18.7%
0 to 5 Years	70	16.9%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.

Housing

In 2016, the median monthly shelter costs for owned dwellings was \$727 and the median monthly shelter costs for rented dwellings was \$973 (Figure 27).

Figure 26: Median monthly shelter costs, City of Parksville, 2016

Housing characteristics	Cost (\$)
Median monthly shelter costs for owned dwellings	\$727
Median monthly shelter costs for rented dwellings	\$973

**Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Languages Spoken Most Often at Home

Figure 28 lists the ten most common languages spoken at home in the City of Parksville and the total number of individuals that speak each language. There was a total of 20 languages spoken in the city. English (11,705 speakers), Tagalog (35 speakers), and French (30 speakers) were the most common languages in 2016.

Figure 27: Top ten languages spoken at home, City of Parksville, 2016

Language	Number of speakers
English	11,705
Tagalog (Pilipino, Filipino)	35
French	30
German	25
Spanish	15
Japanese	15
Korean	15
Danish	10
Dutch	10
Hindi	10

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070*

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.¹⁴ Persons with Aboriginal identity comprised 4.6% of the City of Parksville's total population in 2016 (550 persons of Aboriginal identity) (Figure 29).

Figure 28: Indigenous population, City of Parksville, 2016

Aboriginal Population	Number	Percentage
Aboriginal identity	550	4.6%
Total population	12,030	100%

**Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Immigration

In 2016 in the City of Parksville, 18.1% of residents were first generation Canadians (2,175 people). 22.2% were second generation (2,675 people) and 59.7% were third generation or more (7,175 people) (Figure 30).

Figure 29: Residents – breakdown by generation status, City of Parksville, 2016

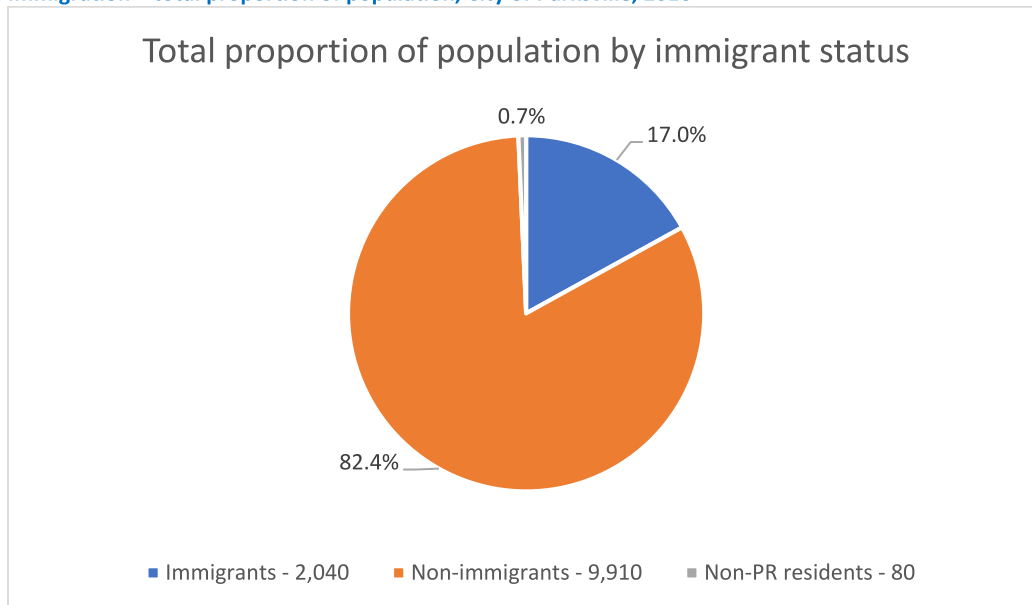
Generation Status	Number	Percentage
First generation	2,175	18.1%
Second generation	2,675	22.2%
Third generation or more	7,175	59.7%
Total	12,025	100%

**Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

¹⁴ For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

The total proportion of immigrants by immigrant status was 17.0% (2,040 immigrants). The total proportion of non-immigrants was 82.4% (9,910 non-immigrants) (Figure 31).

Figure 30: Immigration – total proportion of population, City of Parksville, 2016

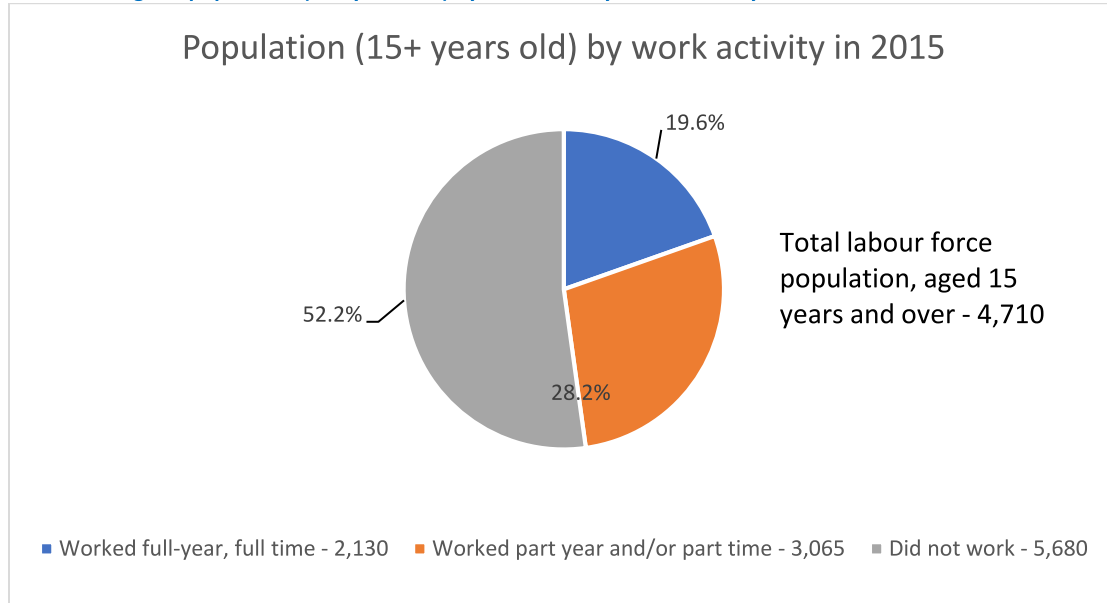


*Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Employment

In the City of Parksville in 2015, over half of the population (15+ years old) (52.2%) did not work. 28.2% worked part year and/or part time and 19.6% worked full-year, full-time (Figure 32).

Figure 31: Percentage of population (15+ years old) by work activity in 2015 in City of Parksville



*Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

We can generally assume that in most couple families with one or no earners and in most lone parent families with no earners that a parent is staying at home. Figure 33 shows that about 27% of couple families with at least one child 0 to 5-year-olds (65 families) and about 18% of couple families with at least one child 0 to 17-years-old (110 families) had one or no earners. 26.7% of lone parent families with at least one child 0 to 5-years-old (20 families) and 16.1% of lone parent families with at least one child 0 to 17-years-old (45 families) had no earners¹⁵.

Figure 32: Percentage of families, by family type, by number of earners in 2015, City of Parksville

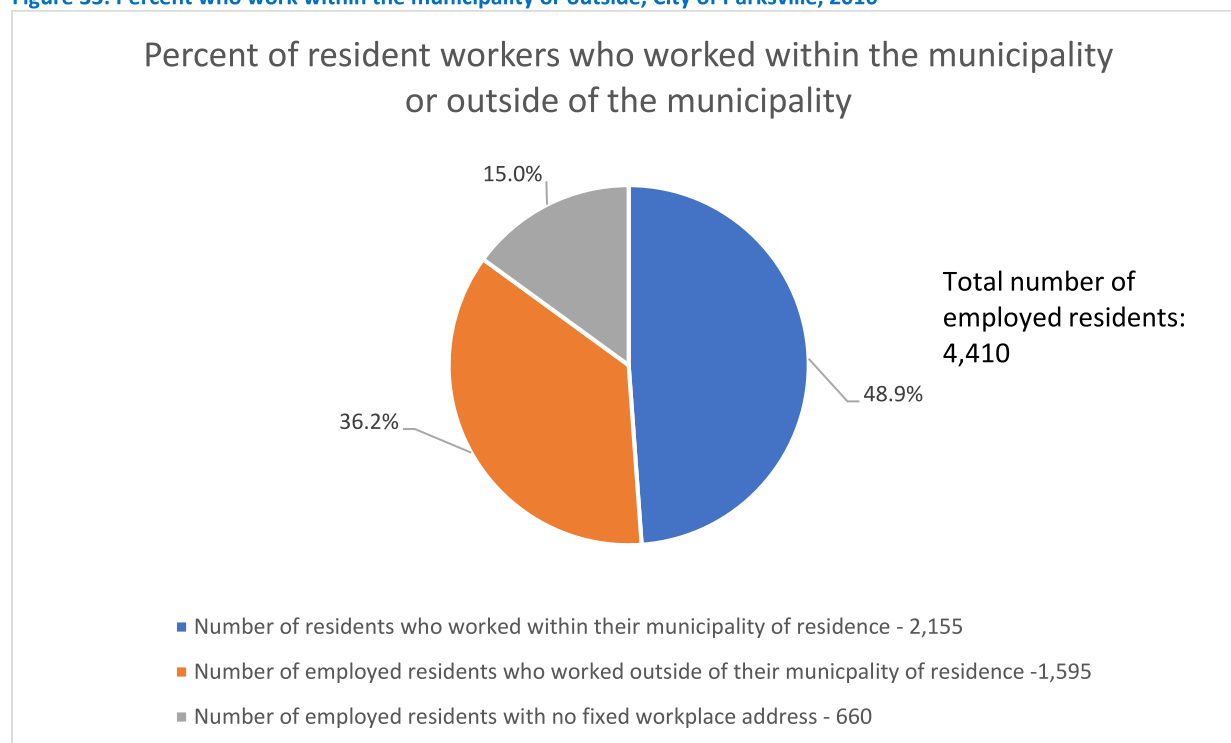
Number of earners	Couple families		Lone parent families	
	At least one child 0 to 17 years	At least one child 0 to 5 years	At least one child 0 to 17 years	At least one child 0 to 5 years
No earners	0.8% (5)	2.1% (5)	16.1% (45)	26.7% (20)
One earner	17.2% (105)	25.0% (60)	57.1% (160)	73.3% (55)
Two or more earners	81.1% (495)	75.0% (180)	26.8% (75)	0% (0%)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

¹⁵ Due to random rounding by Statistics Canada to protect confidentiality, the share of families in each earning situation may not add up to 100%.

In 2016, 48.9% of workers residing in the City of Parksville worked within the municipality¹⁶, 36.2% worked outside the municipality, and an additional 15.0% had no fixed work address (Figure 34).

Figure 33: Percent who work within the municipality or outside, City of Parksville, 2016



**Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Residential Mobility

In the City of Parksville in 2016, the number of people who had moved within the past year was 1,755 (14.6% of all residents) and the number of new people who had moved into the City was 1,140 (9.5%)¹⁷.

The number of people who had moved within the past five years was 5,335 (45.6% of all residents) and the number of new people who had moved into the City was 3,540 (30.3%)¹⁸.

¹⁶ This figure includes residents who worked from home.

¹⁷ Source: Statistics Canada. 2017. Parksville, CY [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

¹⁸ Ibid.

Child Care Spaces

In the City of Parksville, there are 11 child care centres offering a total of 371 child care spaces. The under-school age group (3 to 4-year-olds and half of all 5-year-olds) has the most child care spaces per capita, with 52.2 spaces per 100 children. By contrast, there are only 12 child care spaces in group care (birth to 36 months) for every 100 children aged birth to 2 and 12.7 spaces in group care (school age) for every 100 school aged children (6 to 12-year-olds and half of all 5-year-olds). Overall, the City of Parksville has 37.7 child care spaces for every 100 children from birth to 12 years of age.

Figure 34: Child care spaces by type versus child population by age group

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	24	0-2-year olds	200	12.0
Group (30 months to school age)	94	3-4-year olds and half of all 5-year olds	180	52.2
Group (school age)	77	6-12-year olds and half of all 5-year olds	605	12.7
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	176	General	-	-
Total child care spaces	371	Total 0-12-year olds	985	37.7

**Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.*

A more detailed overview of the number of programs and spaces by license type is presented below.

Figure 35: Child care programs and spaces by license type

License Type	Programs		Spaces	
	Number	Percent	Number	Percent
Group (Birth to 36 Months)	2	12%	24	6%
Group (30 Months to School Age)	4	24%	94	25%
Licensed Preschool	3	18%	140	38%
Group (School Age)	3	18%	77	21%
Multi-Age	1	6%	8	2%
Family Child Care	4	24%	28	8%
In-Home Multi-Age	0	0%	0	0%
Total	17	100%	371	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. Family child care accounts for 24% of all programs (4 programs) and 8% of child care spaces (28 spaces). For-profit care accounts for 65% of all programs (11 programs) and 65% of all spaces (243 spaces) while non-profit care accounts for only 12% of all programs (2 programs) but 27% of spaces (100 spaces).

Figure 36: Child care programs and spaces by service type and auspice

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	4	24%	28	8%
Group and multi-age: For-profit	11	65%	243	65%
Group and multi-age: Non-profit	2	12%	100	27%
Total	17	100%	371	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Town of Qualicum Beach

Child population statistics for the Town of Qualicum Beach

In the Town of Qualicum Beach in 2016, there were 480 children aged 0 to 12 years-old out of a total population of 8,945 (Figure 39). The largest age groups were the 8-year-old and 11-year-old groups, with 50 children each (10% of the total child population each). The smallest age group was the under 1-year-olds, with 20 children (4% of the total child population). The age range with the largest number of children was the 5 to 9-year-old age range, comprising 41% of the total child population (195 children).

Figure 37: Child population statistics by age range for the Town of Qualicum Beach, 2016

Age Range	Age Total	Age %
0 to 4 Years	155	32%
5 to 9 Years	195	41%
10 to 12 Years	130	27%
Total 0 to 12 Years	480	100%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Between 2011 and 2016, the total number of 0 to 12-year-olds increased by 20 children, a 4.3% increase (Figure 40). The 0 to 4-year-old population remained stable and the 5 to 9-year-old age group increased by 40 children (+25.8% increase). The 10 to 12-year-old age group decreased by 20 children (-13.3% decrease).

Figure 38: Changes over the past 2 censuses (2011-2016) in child population by age group, Town of Qualicum Beach

Age group	Change in number of children, 2011-2016 (#)	Change in number of children, 2011-2016 (%)
0 to 4 Years	0	0%
5 to 9 Years	+40	25.8%
10 to 12 Years	-20	-13.3%
Total 0 to 12 Years	+20	+4.3%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Population Projections

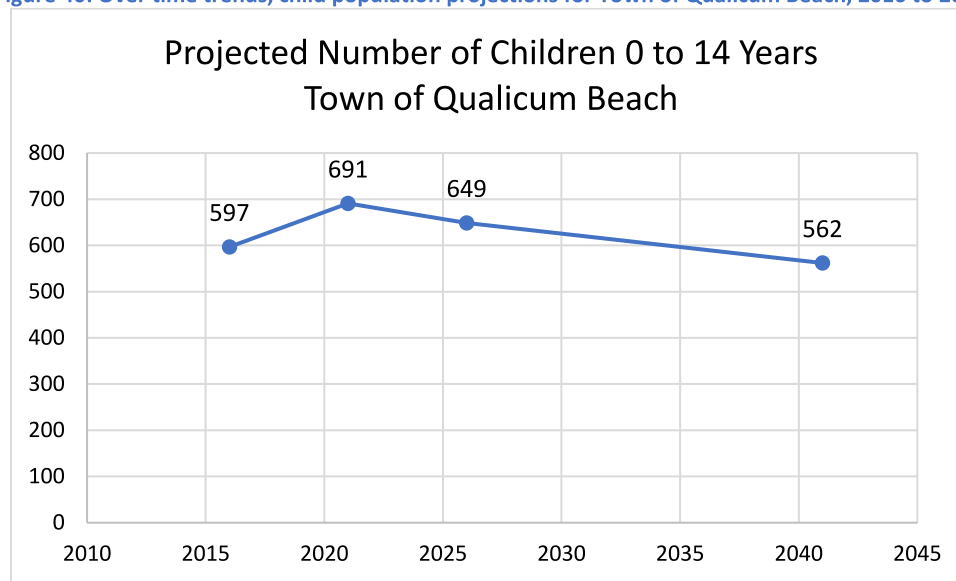
According to projections supplied by the Regional District of Nanaimo, assuming a baseline growth scenario, the population of 0 to 14 year olds in the Town of Qualicum Beach is projected to decrease from 597 children in 2016 to 562 children in 2041, a 5.9% decrease (-35 children), with an average annual growth rate of -0.2% and average annual decrease of 1 child (Figure 41).

Figure 39: Child population projections for Town of Qualicum Beach, 2016 to 2041

Projected Number of Children 0 to 14 Years			
2016	2021	2026	2041
597	691	649	562
	+94	-42	-87
	+15.7%	-6.1%	-13.4%
Average Annual Change, 2016 to 2041 = -1 child			
Average Annual Growth Rate = -0.2%			

**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Figure 40: Over time trends, child population projections for Town of Qualicum Beach, 2016 to 2041



**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Children in Lone Parent Families

In 2016, 20.9% of all children aged 0 to 14 lived in lone parent families (115 children) (Figure 43). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 50 children in lone parent families (25.0% of all children in this age range).

Figure 41: Number of children in lone parent families, Town of Qualicum Beach, 2016

Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
0 to 4 Years	160	25	15.6%
5 to 9 Years	190	35	18.4%
10 to 14 Years	200	50	25.0%
0 to 14 Years	550	115	20.9%

*Source: Statistics Canada Catalogue No. 98-400-X2016041.

Median Family Income

In the Town of Qualicum Beach in 2015, the median income (before-tax) was \$100,352 for couple families with at least one child 0 to 17-years-old and \$87,168 for couple families with at least one child 0 to 5-years-old (Figure 44). The median income for lone parent households was \$34,944 for those with at least one child 0 to 17-years-old and \$28,816 for those with at least one child 0 to 5-years-old.

Figure 42: Median family income (before-tax) by family type, Town of Qualicum Beach, 2015

Family Type	Median Income (Families with children 0 to 17-years-old)	Median Income (Families with children 0 to 5-years-old)
Couple families with children	\$100,352	\$87,168
Lone parent families	\$34,944	\$28,816
Total families	\$81,152	\$76,544

*Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>

Low-Income Measure

In 2015, 21.5% of children aged 0 to 17 (155 children) were in low-income families based on the low-income after-tax measure (Figure 45).

Figure 43: Low income based on the low-income measure after tax by age group, Town of Qualicum Beach, 2015

Age group	Number of children in low income families	Percentage of children in low income families
0 to 17 Years	155	21.5%
0 to 5 Years	45	24.3%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.

Housing

In 2016, the median monthly shelter costs for owned dwellings was \$543 and for rented dwellings was \$1,038 (Figure 46).

Figure 44: Median monthly shelter costs, Town of Qualicum Beach, 2016

Housing characteristics	Cost (\$)
Median monthly shelter costs for owned dwellings	\$543
Median monthly shelter costs for rented dwellings	\$1,038

**Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Languages Spoken Most Often at Home

Figure 47 lists languages spoken at home in the Town of Qualicum Beach with ten speakers or more and the total number of individuals that speak each language. There was a total of 18 languages spoken in the town. After English (8,410 speakers), the most common languages in 2016 were German (20 speakers), French (15 speakers), and Korean (15 speakers).

Figure 45: Top ten languages spoken at home, Town of Qualicum Beach, 2016

Language	Number of speakers
English	8,410
German	20
French	15
Korean	15
Tagalog (Pilipino, Filipino)	10
Dutch	10

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070*

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.¹⁹ Persons with Aboriginal identity comprised 3.4% of Qualicum Beach's total population in 2016 (290 persons of Aboriginal identity) (Figure 48).

Figure 46: Indigenous population, Town of Qualicum Beach, 2016

Aboriginal Population	Number	Percentage
Aboriginal identity	290	3.4%
Total population	8,510	100%

**Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Immigration

In 2016 in the Town of Qualicum Beach, 23.2% of residents were first generation Canadians (1,975 people). 22.5% were second generation (1,915 people) and 54.3% were third generation or more (4,615 people) (Figure 49).

Figure 47: Residents – breakdown by generation status, Town of Qualicum Beach, 2016

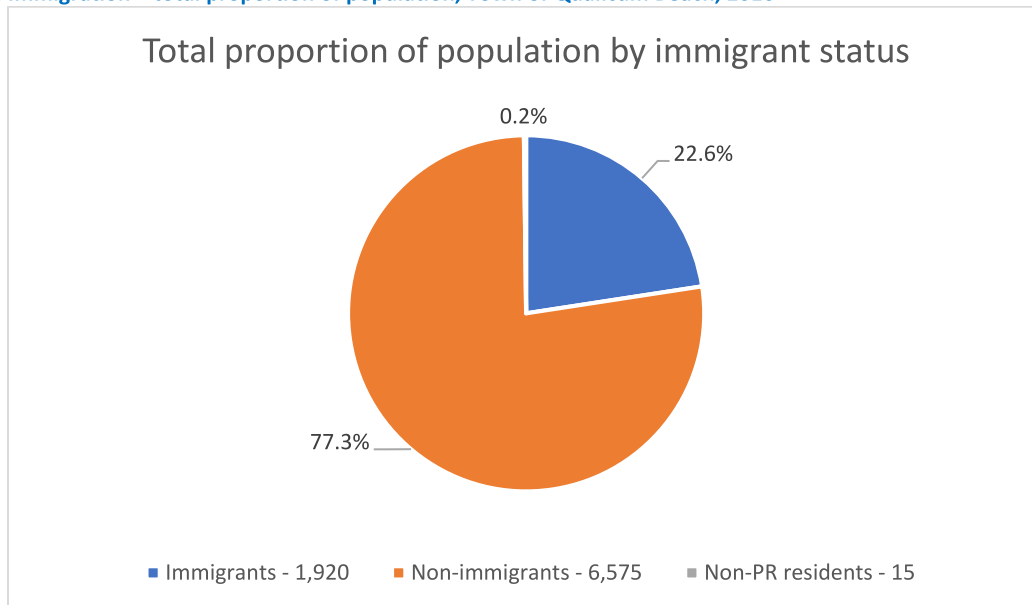
Generation Status	Number	Percentage
First generation	1,975	23.2%
Second generation	1,915	22.5%
Third generation or more	4,615	54.3%
Total	8,505	100%

**Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

¹⁹ For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

The total proportion of immigrants by immigrant status was 22.6% (1,920 immigrants). The total proportion of non-immigrants was 77.3% (6,575 non-immigrants) (Figure 50).

Figure 48: Immigration – total proportion of population, Town of Qualicum Beach, 2016

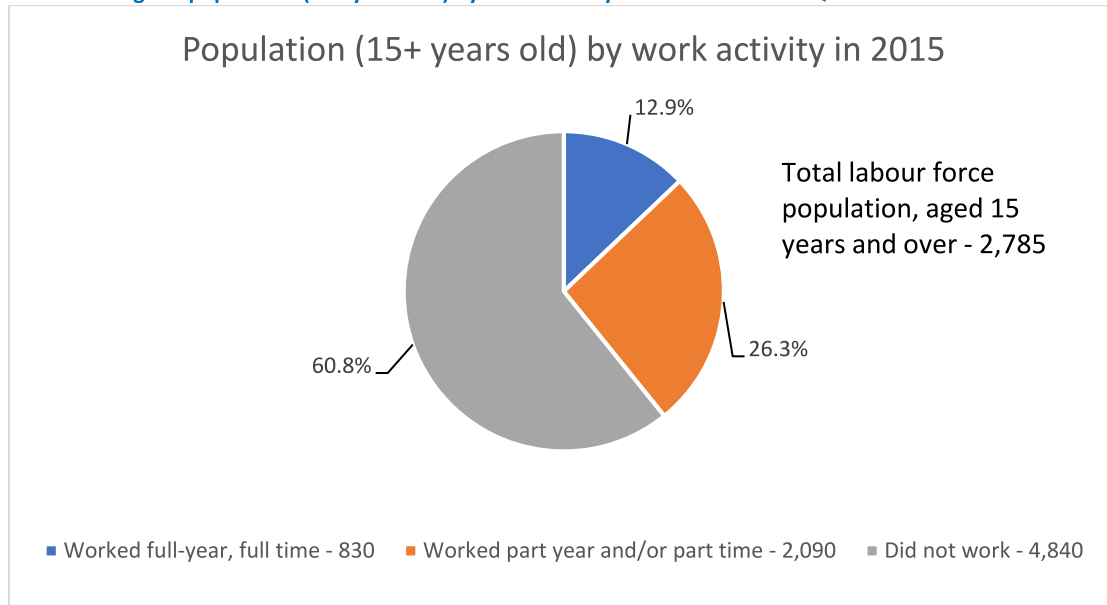


**Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Employment

In the Town of Qualicum Beach in 2015, 60.8% of the population (15+ years old) did not work. 26.3% worked part year and/or part time and 12.9% worked full-year full-time (Figure 51).

Figure 49: Percentage of population (15+ years old) by work activity in 2015 in Town of Qualicum Beach



*Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

We can generally assume that in most couple families with one or no earners and in most lone parent families with no earners that a parent is staying at home. Figure 52 shows that 23.8% of couple families with at least one child 0 to 5-year-olds (25 families) and about 18% of couple families with at least one child 0 to 17-years-old (55 families) had one or no earners. 33.3% of lone parent families with at least one child 0 to 5-years-old (10 families) and 13.0% of lone parent families with at least one child 0 to 17-years-old (15 families) had no earners²⁰.

Figure 50: Percentage of families, by family type, by number of earners in 2015, Town of Qualicum Beach

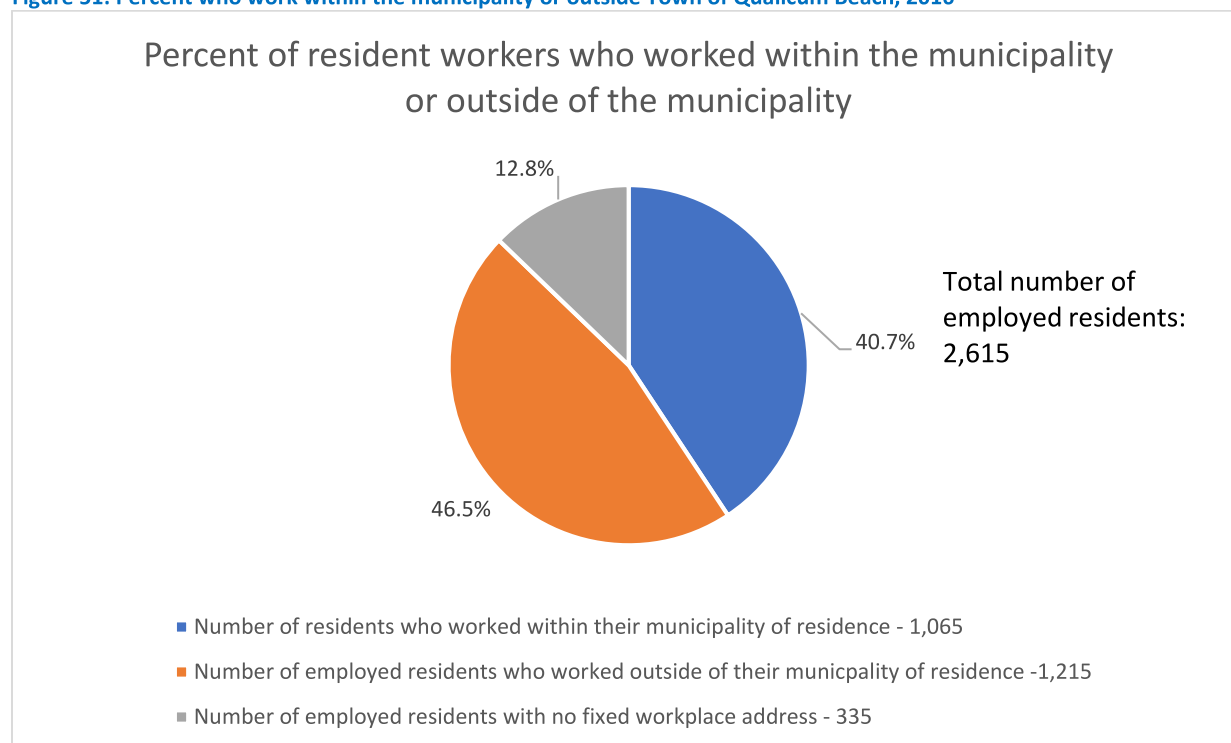
Number of earners	Couple families		Lone parent families	
	At least one child 0 to 17 years	At least one child 0 to 5 years	At least one child 0 to 17 years	At least one child 0 to 5 years
No earners	1.6% (5)	0% (0)	13.0% (15)	33.3% (10)
One earner	16.1% (50)	23.8% (25)	65.2% (75)	66.7% (20)
Two or more earners	80.6% (250)	66.7% (70)	21.7% (25)	0% (0)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

²⁰ Due to random rounding by Statistics Canada to protect confidentiality, the share of families in each earning situation may not add up to 100%.

In 2016, 46.5% of workers residing in the Town of Qualicum Beach worked outside the municipality²¹, 40.7% worked within the municipality, and an additional 12.8% had no fixed work address (Figure 53).

Figure 51: Percent who work within the municipality or outside Town of Qualicum Beach, 2016



*Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Residential Mobility

In the Town of Qualicum Beach in 2016, the number of people who had moved within the past year was 1,365 (16.1% of all residents) and the number of new people who had moved into the Town was 830 (9.8%)²².

The number of people who had moved within the past five years was 3,375 (40.5% of all residents) and the number of new people who had moved into the Town was 2,255 (27.1%)²³.

²¹ This figure includes residents who worked from home.

²² Source: Statistics Canada. 2017. Qualicum Beach, T [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

²³ Ibid.

Child Care Spaces

In the Town of Qualicum Beach, there are 10 child care centres offering a total of 224 child care spaces. Overall, Qualicum Beach has 46.2 child care spaces for every 100 children from birth to 12 years. There are 72 under-school age group care spaces for every 100 preschooler age children (3 to 4-year-olds and half of all 5-year-olds). There are 34.3 child care spaces in group care (birth to 36 months) for every 100 children aged birth to 2 years. There are 16.2 child care spaces in group school age care for every 100 school age children (6 to 12-year-olds and half of all five-year-olds).

Figure 52: Child care spaces by type versus child population by age group

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	24	0-2-year olds	70	34.3
Group (30 months to school age)	72	3-4-year olds and half of all 5-year olds	100	72.0
Group (school age)	51	6-12-year olds and half of all 5-year olds	315	16.2
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	77	General	-	-
Total child care spaces	224	Total 0-12-year olds	485	46.2

**Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.*

A more detailed overview of the number of programs and spaces by license type is presented below.

Figure 53: Child care programs and spaces by license type

License Type	Programs		Spaces	
	Number	Percent	Number	Percent
Group (Birth to 36 Months)	2	14%	24	11%
Group (30 Months to School Age)	4	29%	72	32%
Licensed Preschool	2	14%	40	18%
Group (School Age)	2	14%	51	23%
Multi-Age	0	0%	0	0%
Family Child Care	2	14%	21	9%
In-Home Multi-Age	2	14%	16	7%
Total	14	100%	224	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. Most child care in Qualicum Beach is for-profit, with for-profit care accounting for 71% of all programs (10 programs) and 83% of all spaces (187 spaces). Family and in-home multi-age care accounts for 29% of programs (4 programs) and 17% of spaces (37 spaces). There are no non-profit child care operators in Qualicum Beach.

Figure 54: Child care programs and spaces by service type and auspice

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	4	29%	37	17%
Group and multi-age: For-profit	10	71%	187	83%
Group and multi-age: Non-profit	0	0%	0	0%
Total	14	100%	224	100%

**Source: UBCM child care inventory, Island Health Licensing.*

District of Lantzville

Child population statistics for the District of Lantzville

In the District of Lantzville in 2016, there were 415 children aged 0 to 12 years-old out of a total population of 3,605 (Figure 58). The largest age groups were the 6-year-old, 8-year-old, and 9-year-old groups, with 40 children each (10% of the total child population each). The smallest age groups were the under 1-year-olds and 1-year-olds, with 25 children each (6% of the total child population each). The age range with the largest number of children was the 5 to 9-year-old age range, comprising 45% of the total child population (185 children).

Figure 55: Child population statistics by age range for the District of Lantzville, 2016

Age Range	Age Total	Age %
0 to 4 Years	130	31%
5 to 9 Years	185	45%
10 to 12 Years	100	24%
Total 0 to 12 Years	415	100%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Between 2011 and 2016, the total number of 0 to 12-year-olds increased by 35 children, a 9.2% increase (Figure 59). The 0 to 4-year-old population increased by 10 children (+8.3% increase) and the 5 to 9-year-old age group increased by 30 children (+19.4% increase). The 10 to 12-year-old age group decreased by 5 children (-4.8% decrease).

Figure 56: Changes over the past 2 censuses (2011-2016) in child population by age group, District of Lantzville

Age group	Change in number of children, 2011-2016 (#)	Change in number of children, 2011-2016 (%)
0 to 4 Years	+10	+8.3%
5 to 9 Years	+30	+19.4%
10 to 12 Years	-5	-4.8%
Total 0 to 12 Years	+35	+9.2%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016002*

Population Projections

Population projects are not available for the District of Lantzville.

Children in Lone Parent Families

In 2016, 12.9% of all children aged 0 to 14 lived in lone parent families (65 children) (Figure 62). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 35 children in lone parent families (18.4% of all children in this age range).

Figure 57: Number of children in lone parent families, District of Lantzville, 2016

Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
0 to 4 Years	130	10	7.7%
5 to 9 Years	190	20	10.5%
10 to 14 Years	190	35	18.4%
0 to 14 Years	505	65	12.9%

**Source: Statistics Canada Catalogue No. 98-400-X2016041.*

Median Family Income

In the District of Lantzville in 2015, the median income (before-tax) was \$118,784 for couple families with at least one child 0 to 17-years-old and \$120,320 for couple families with at least one child 0 to 5-years-old (Figure 63). The median income for lone parent households with at least one child 0 to 17-years-old was \$41,856.

Figure 58: Median family income (before-tax) by family type, District of Lantzville, 2015

Family Type	Median Income (Families with children 0 to 17-years-old)	Median Income (Families with children 0 to 5-years-old)
Couple families with children	\$118,784	\$120,320
Lone parent families	\$41,856	<i>Data Suppressed</i> ²⁴
Total families	\$106,957	\$112,384

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

²⁴ Given the small number of families in this category, Statistics Canada has suppressed this data to protect the confidentiality of Census respondents' personal information.

Low-Income Measure

In 2015, 12.2% of children aged 0 to 17 (75 children) were in low-income families based on the low-income after-tax measure (Figure 64).

Figure 59: Low income based on the low-income measure after tax by age group, District of Lantzville, 2015

Age group	Number of children in low income families	Percentage of children in low income families
0 to 17 Years	75	12.2%
0 to 5 Years	15	9.1%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.*

Housing

In 2016, the median monthly shelter costs was \$831 for owned dwelling and \$1,024 for rented dwellings (Figure 65).

Figure 60: Median monthly shelter costs, District of Lantzville, 2016

Housing characteristics	Cost (\$)
Median monthly shelter costs for owned dwellings	\$831
Median monthly shelter costs for rented dwellings	\$1,024

**Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Languages Spoken Most Often at Home

Figure 66 lists the languages spoken at home in the District of Lantzville with ten speakers or more and the total number of individuals that speak each language. There was a total of 13 languages spoken in the district. After English (3,495 speakers), German (15 speakers) was the most common languages in 2016.

Figure 61: Top ten languages spoken at home, District of Lantzville, 2016

Language	Number of speakers
English	3,495
German	15
Vietnamese	10
Russian	10
Dutch	10
Punjabi (Panjabi)	10
Mandarin	10

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070*

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.²⁵ Persons with Aboriginal identity comprised 4.3% of the District of Lantzville's total population in 2016 (155 persons of Aboriginal identity) (Figure 67).

Figure 62: Indigenous population, District of Lantzville, 2016

Aboriginal Population	Number	Percentage
Aboriginal identity	155	4.3%
Total population	3,605	100%

* Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Immigration

In 2016 in the District of Lantzville, 18.3% of residents were first generation Canadians (660 people). 22.1% were second generation (795 people) and 59.6% were third generation or more (2,150 people) (Figure 68).

Figure 63: Residents – breakdown by generation status, District of Lantzville, 2016

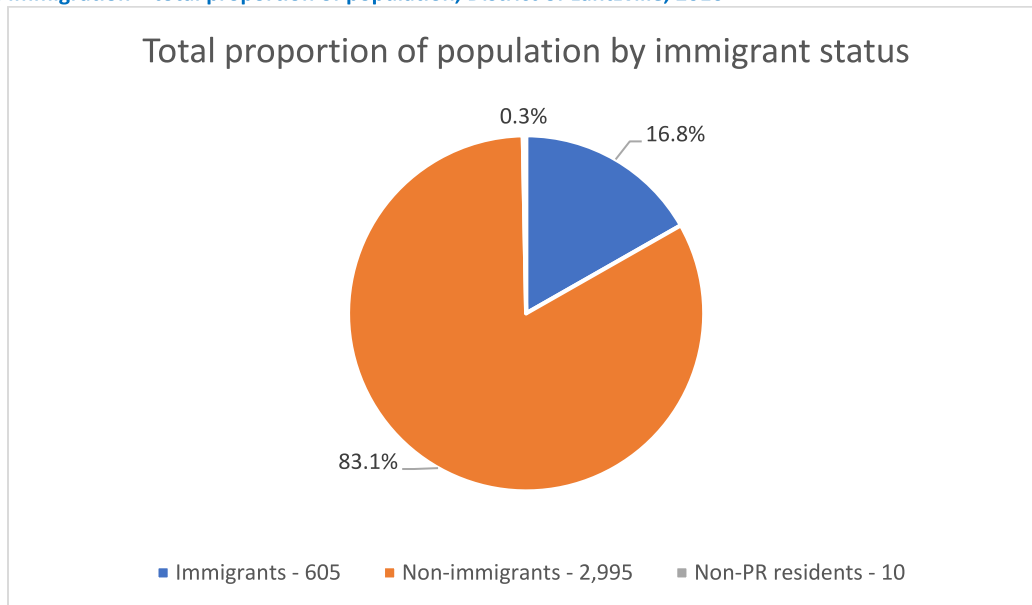
Generation Status	Number	Percentage
First generation	660	18.3%
Second generation	795	22.1%
Third generation or more	2,150	59.6%
Total	3,605	100%

*Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

²⁵ For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

The total proportion of immigrants by immigrant status was 16.8% (605 immigrants). The total proportion of non-immigrants was 83.1% (2,995 non-immigrants) (Figure 69).

Figure 64: Immigration – total proportion of population, District of Lantzville, 2016

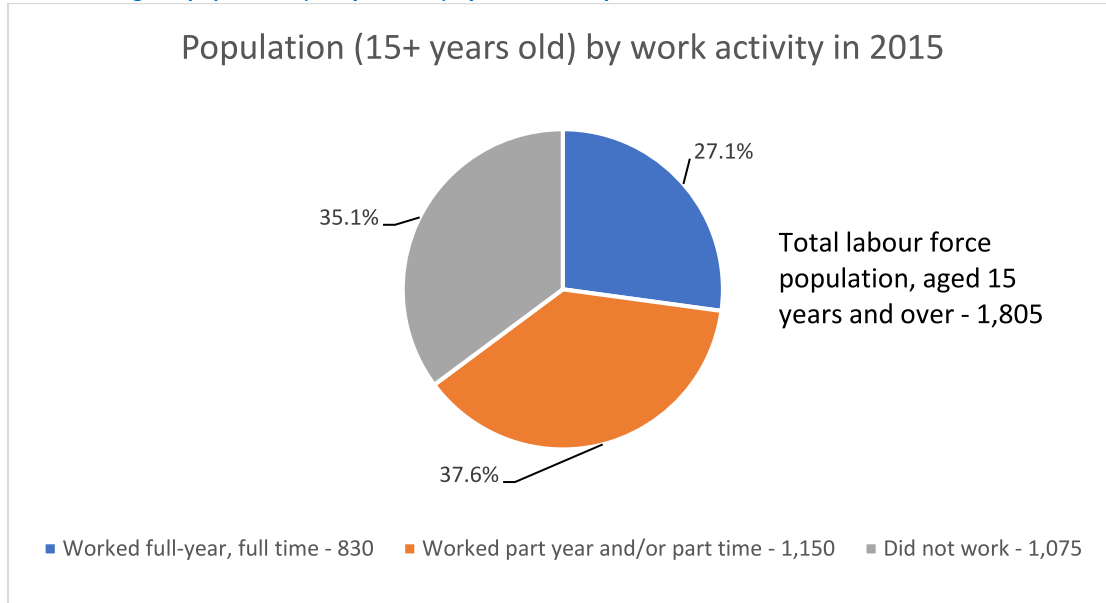


*Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Employment

In the District of Lantzville in 2015, 27.1% of the population (15+ years old) worked full-year full-time and 37.6% worked part year and/or part-time. 35.1% did not work (Figure 70).

Figure 65: Percentage of population (15+ years old) by work activity in 2015 in District of Lantzville



*Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

We can generally assume that in most couple families with one or no earners and in most lone parent families with no earners that a parent is staying at home. Figure 71 shows that 23.8% of couple families with at least one child 0 to 5-year-olds (25 families) and about 19% of couple families with at least one child 0 to 17-years-old (55 families) had one or no earners. There were no lone parent families with at least one child 0 to 5-years-old who had no earners. 18.2% of lone parent families with at least one child 0 to 17-years-old (10 families) had no earners²⁶.

Figure 66: Percentage of families, by family type, by number of earners in 2015, District of Lantzville

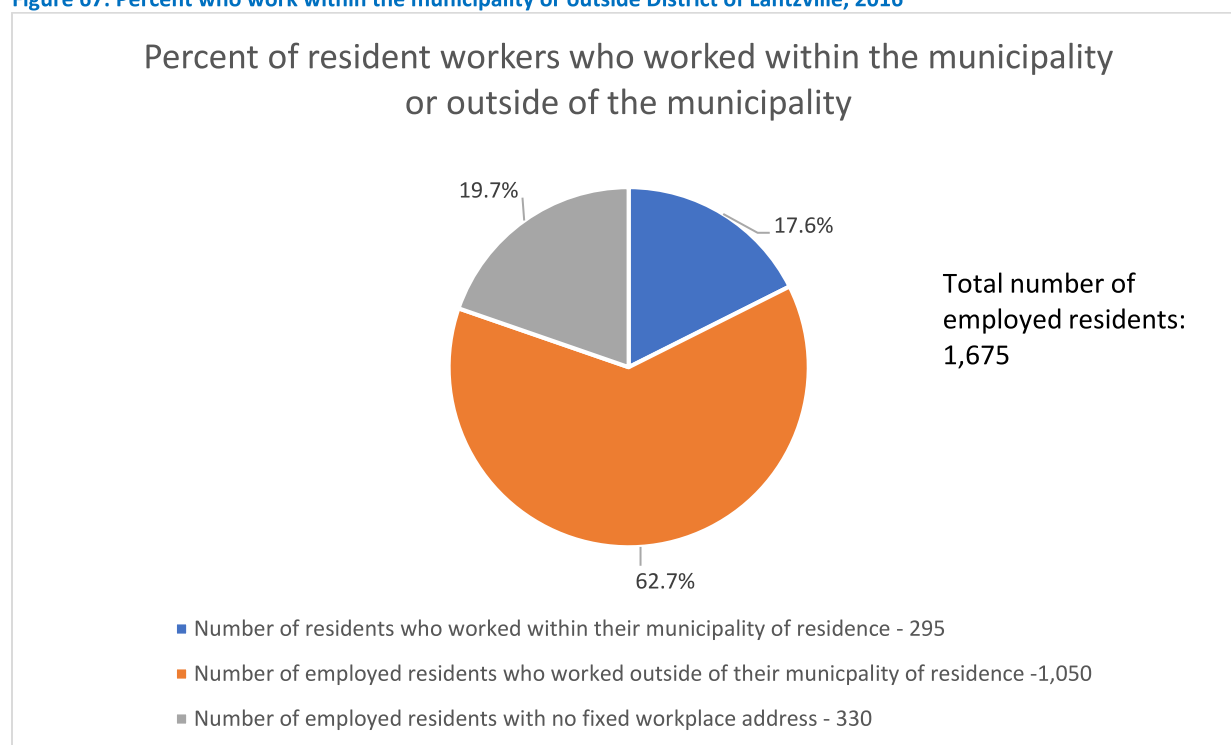
Number of earners	Couple families		Lone parent families	
	At least one child 0 to 17 years	At least one child 0 to 5 years	At least one child 0 to 17 years	At least one child 0 to 5 years
No earners	3.5% (10)	0% (0)	18.2% (10)	0% (0)
One earner	15.8% (45)	23.8% (25)	63.6% (35)	100% (10)
Two or more earners	78.9% (225)	71.4% (75)	18.2% (10)	0% (0)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

²⁶ Due to random rounding by Statistics Canada to protect confidentiality, the share of families in each earning situation may not add up to 100%.

In 2016, 62.7% of workers residing in the District of Lantzville worked outside the municipality²⁷, 17.6% worked within the municipality, and an additional 19.7% had no fixed work address (Figure 72).

Figure 67: Percent who work within the municipality or outside District of Lantzville, 2016



**Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Residential Mobility

In the District of Lantzville in 2016, the number of people who had moved within the past year was 415 (11.6% of all residents) and the number of new people who had moved into the District was 285 (7.9%)²⁸.

The number of people who had moved within the past five years was 1,075 (30.9% of all residents) and the number of new people who had moved into the District was 735 (21.2%)²⁹.

²⁷ This figure includes residents who worked from home.

²⁸ Source: Statistics Canada. 2017. Lantzville, DM [Census subdivision], British Columbia and Nanaimo, RD [Census division], British Columbia (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

²⁹ Ibid.

Child Care Spaces

In the District of Lantzville, there are 7 child care centres offering a total of 250 child care spaces. Overall, Lantzville has 58.8 child care spaces for every 100 children from birth to 12 years. Almost half of all spaces are group care for children 30 month to school age and there are more spaces of this type of care available than there are preschooler age children (3 to 4 years and half of all 5-year-olds) living in Lantzville. By contrast, there are only 12.5 infant toddler spaces for every 100 children from birth to 2 years of age. There are 25.9 group (school age) spaces for every 100 school age children (6 to 12 years and half of all 5-year-olds).

Figure 68: Child care spaces by type versus child population by age group

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	10	0-2-year olds	80	12.5
Group (30 months to school age)	100	3-4-year olds and half of all 5-year olds	75	133.3
Group (school age)	70	6-12-year olds and half of all 5-year olds	270	25.9
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	70	General	-	-
Total child care spaces	250	Total 0-12-year olds	425	58.8

**Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.*

A more detailed overview of the number of programs and spaces by license type is presented below.

Figure 69: Child care programs and spaces by license type

License Type	Programs		Spaces	
	Number	Percent	Number	Percent
Group (Birth to 36 Months)	1	8%	10	4%
Group (30 Months to School Age)	3	25%	100	40%
Licensed Preschool	2	17%	48	19%
Group (School Age)	3	25%	70	28%
Multi-Age	1	8%	8	3%
Family Child Care	2	17%	14	6%
In-Home Multi-Age	0	0%	0	0%
Total	12	100%	250	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. Half of all programs (6 programs) and 71% of all spaces (178 spaces) in Lantzville are run by non-profit operators. There is also one Indigenous government-run centre, which has 3 programs (25% of all programs) and 42 spaces (17% of all spaces).

Figure 70: Child care programs and spaces by service type and auspice

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	2	17%	14	6%
Group and multi-age: For-profit	1	8%	16	6%
Group and multi-age: Non-profit	6	50%	178	71%
Indigenous government	3	25%	42	17%
Total	12	100%	250	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Unincorporated Areas of Nanaimo

Child population statistics

As shown in Figure 77, the number of children 0 to 12 years in each unincorporated area of Nanaimo ranges from 250 in Nanaimo B (6.2% of the total population) to 1,005 in Nanaimo F (13.0%).

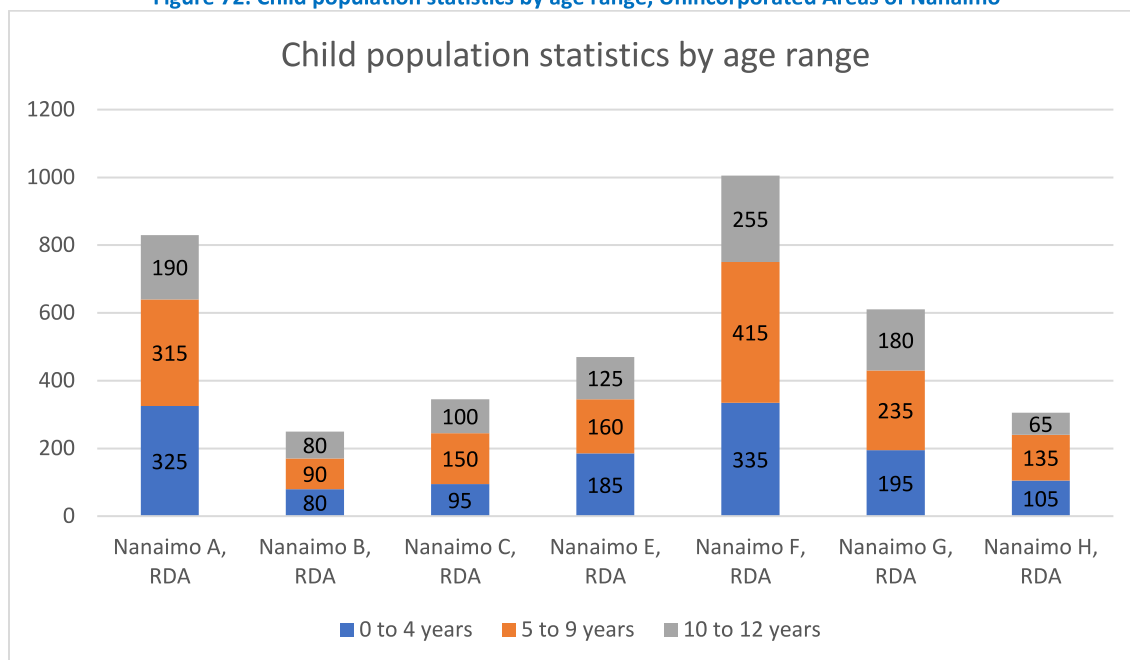
Figure 71: Child population, 0 to 12 years, for the Unincorporated Areas of Nanaimo

RDA	Total 0 to 12 Years	Share of Total Population
Nanaimo A	830	11.8%
Nanaimo B	250	6.2%
Nanaimo C	345	12.3%
Nanaimo E	470	7.7%
Nanaimo F	1,005	13.0%
Nanaimo G	610	8.2%
Nanaimo H	305	12.4%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016004.*

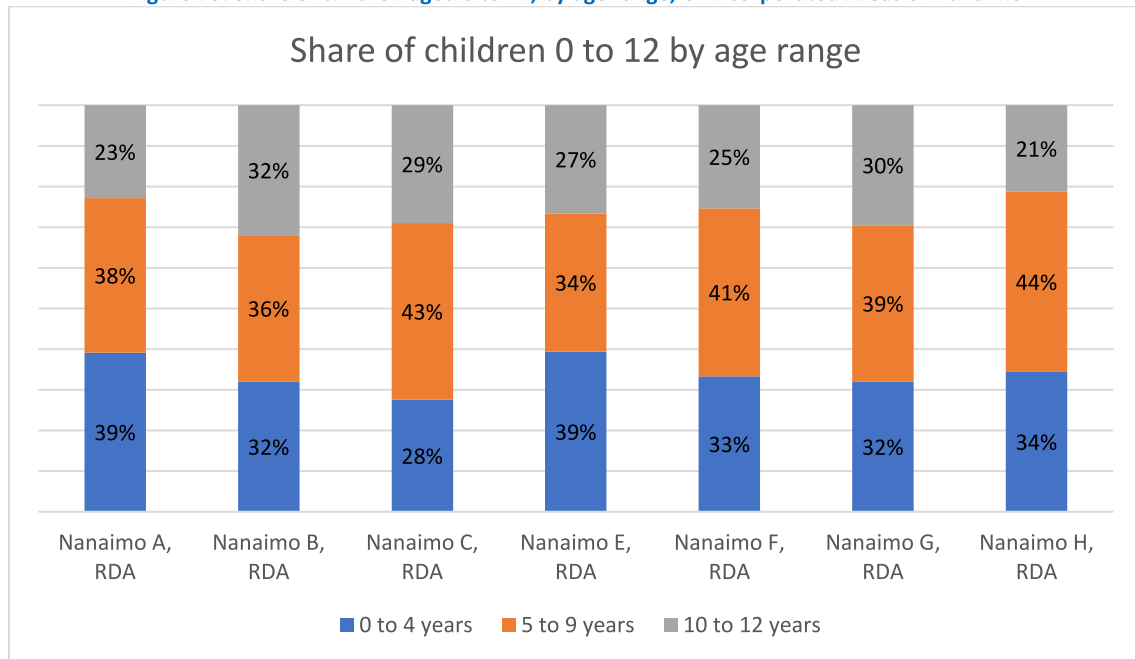
Figure 78 shows the absolute number of children in each unincorporated area by age range. Figure 79 shows the share of each age range of the total 0 to 12-year-old population.

Figure 72: Child population statistics by age range, Unincorporated Areas of Nanaimo



**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016004.*

Figure 73: Share of children aged 0 to 12, by age range, Unincorporated Areas of Nanaimo



*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016004.

Between 2011 and 2016, the unincorporated area with the largest absolute and relative decline in the population of 0 to 14-year-olds was Nanaimo B (-85 children, -22% change). The unincorporated area with the largest increase was Nanaimo E (+60 children, +12% increase) (Figure 80).

Figure 74: Changes over the past 2 censuses (2011-2016) in child population by age group, Unincorporated Areas of Nanaimo

RDA	0 to 4 Years	5 to 9 Years	10 to 14 Years	0 to 14 Years³⁰
Nanaimo A	+60 (+23%)	0 (0%)	-45 (-12%)	+15 (+2%)
Nanaimo B	-20 (-20%)	-55 (-39%)	-5 (-4%)	-85 (-22%)
Nanaimo C	-35 (-27%)	+10 (+7%)	-30 (-16%)	-60 (-13%)
Nanaimo E	+45 (+32%)	0 (0%)	+15 (+8%)	+60 (+12%)
Nanaimo F	-25 (-7%)	+55 (+15%)	-15 (-4%)	+15 (+1%)
Nanaimo G	25 (+15%)	0 (0%)	+10 (+3%)	+40 (+6%)
Nanaimo H	-5 (-4%)	+15 (+13%)	+10 (+9%)	+25 (+7%)

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016041.*

³⁰ The 2011 single year population data is not available for all of the RDAs, so it was not possible to provide population for the 10 – 12-year-old age group as for the municipalities above. Population for the 10 to 14-year-old age group has been provided instead.

Population Projections

According to projections supplied by the Regional District of Nanaimo, assuming a baseline growth scenario, the population of 0 to 14-year-olds in most electoral areas in the Regional District of Nanaimo is projected to decrease between 2016 and 2041, with the exception of Nanaimo E. The largest projected decreases are in Nanaimo B, with an average annual growth rate of -3.0% and average annual decrease of 6 children (Figure 3).

Figure 75: Child population projections for Unincorporated Areas of Nanaimo, 2016 to 2041

RDA	Projected Number of Children 0 to 14 Years				# change 2016 - 2041	% change 2016 - 2041	Average Annual Change	Average Annual Growth Rate
	2016	2021	2026	2041				
Nanaimo A	965	1,048	1,087	950	-15	-1.6%	-1	-0.1%
Nanaimo B	298	265	242	138	-160	-53.75	-6	-3.0%
Nanaimo C	418	402	392	351	-67	-16.0%	-3	-0.7%
Nanaimo E	578	650	684	617	+39	+6.7%	+2	+0.3%
Nanaimo F	1,197	1,228	1,208	1,168	-29	-2.4%	-1	-0.1%
Nanaimo G	775	789	732	646	-129	-16.6%	-5	-0.7%
Nanaimo H	371	402	377	369	-2	-0.5%	0	0%

**Source: Technical Memo: RDN Population and Housing Projections. Prepared by Vann Struth Consulting Group Inc. for Regional District of Nanaimo. November 2019.*

Children in Lone Parent Families

In 2016, the percentage of children aged 0 to 14 living in lone parent families ranged from 12.5% in Nanaimo C (50 children) to 23.5% in Nanaimo F (270 children) (Figures 82 – 88).

Figure 76: Number of children in lone parent families, Nanaimo A, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo A	0 to 4 Years	325	65	20.0%
	5 to 9 Years	315	85	27.0%
	10 to 14 Years	320	55	17.2%
	0 to 14 Years	960	65	20.0%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 77: Number of children in lone parent families, Nanaimo B, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo B	0 to 4 Years	80	5	6.3%
	5 to 9 Years	85	20	23.5%
	10 to 14 Years	135	40	29.6%
	0 to 14 Years	300	70	23.3%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 78: Number of children in lone parent families, Nanaimo C, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo C	0 to 4 Years	95	10	10.5%
	5 to 9 Years	150	20	13.3%
	10 to 14 Years	160	25	15.6%
	0 to 14 Years	400	50	12.5%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 79: Number of children in lone parent families, Nanaimo E, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo E	0 to 4 Years	185	25	13.5%
	5 to 9 Years	165	25	15.2%
	10 to 14 Years	200	35	17.5%
	0 to 14 Years	545	85	15.6%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 80: Number of children in lone parent families, Nanaimo F, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo F	0 to 4 Years	335	45	13.4%
	5 to 9 Years	410	95	23.2%
	10 to 14 Years	400	120	30.0%
	0 to 14 Years	1,150	270	23.5%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 81: Number of children in lone parent families, Nanaimo G, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo G	0 to 4 Years	195	15	7.7%
	5 to 9 Years	235	35	14.9%
	10 to 14 Years	310	65	21.0%
	0 to 14 Years	745	115	15.4%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Figure 82: Number of children in lone parent families, Nanaimo H, 2016

Electoral Area	Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
Nanaimo H	0 to 4 Years	110	10	9.1%
	5 to 9 Years	135	35	25.9%
	10 to 14 Years	125	25	20.0%
	0 to 14 Years	370	75	20.3%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Median Family Income

In 2015, the median income for all families with at least one child 0 to 17-years-old ranged from \$55,104 in Nanaimo B to \$99,584 in Nanaimo C. For lone parent families with at least one child 0 to 17-years-old median incomes ranged from \$29,504 in Nanaimo C to \$43,392 in Nanaimo G. Median incomes for families with at least one child 0 to 5-years-old tended to be lower, from \$57,216 in Nanaimo B to \$100,096 in Nanaimo C (Figure 89).

Figure 83: Median income (before-tax) by family type, Unincorporated Areas of Nanaimo, 2015

RDA	Families with children 0 to 17-years-old			Families with children 0 to 5-years-old		
	Couple families	Lone parent families	Total families	Couple families	Lone parent families	Total families
Nanaimo A	\$102,208	\$34,176	\$86,374	\$94,805	\$27,968	\$81,280
Nanaimo B	\$68,864	\$30,528	\$55,104	\$60,544	<i>Data Suppressed³¹</i>	\$57,216
Nanaimo C	\$113,408	\$29,504	\$99,584	\$111,701	<i>Data Suppressed</i>	\$100,096
Nanaimo E	\$109,312	\$32,576	\$94,464	\$100,480	\$30,336	\$90,880
Nanaimo F	\$83,541	\$31,936	\$65,536	\$78,464	\$27,200	\$68,928
Nanaimo G	\$103,744	\$43,392	\$92,928	\$93,440	<i>Data Suppressed</i>	\$86,016
Nanaimo H	\$82,048	\$33,088	\$71,893	\$79,104	<i>Data Suppressed</i>	\$74,624

*Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>

³¹ Given the small number of families in this category, Statistics Canada has suppressed this data to protect the confidentiality of Census respondents' personal information.

Low-Income Measure

The number of 0 to 17-year-olds in low income families (based on the after-tax low income measure) ranged from 14.7% in Nanaimo C (75 children) to 38.4% in Nanaimo B (140 children). The number of children aged 0 to 5 years who lived in low income families ranged from 11.5% in Nanaimo C (15 children) to 36.8% in Nanaimo B (35 children) (Figure 90).

Figure 84: Number and percentage of children in low income families, based on the low-income measure after tax, Unincorporated Areas of Nanaimo, 2015

RDA	0 to 17 Years		0 to 5 Years	
	Percent	Number	Percent	Number
Nanaimo A	18.3%	215	20.0%	75
Nanaimo B	38.4%	140	36.8%	35
Nanaimo C	14.7%	75	11.5%	15
Nanaimo E	15.7%	105	16.3%	35
Nanaimo F	28.2%	390	25.0%	105
Nanaimo G	16.1%	150	12.5%	30
Nanaimo H	27.0%	120	26.9%	35

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.*

Housing

The median monthly shelter costs for owned dwellings ranged from \$508 in Nanaimo B to \$893 in Nanaimo A. The median monthly shelter cost for rented dwellings ranged from \$768 in Nanaimo B to \$1,130 in Nanaimo C (Figure 91).

Figure 85: Median monthly shelter costs, Unincorporated Areas of Nanaimo, 2016

RDA	Median monthly shelter cost for owned dwellings	Median monthly shelter cost for rented dwellings
Nanaimo A	\$893	\$973
Nanaimo B	\$508	\$768
Nanaimo C	\$879	\$1,130
Nanaimo E	\$662	\$1,069
Nanaimo F	\$799	\$895
Nanaimo G	\$632	\$1,066
Nanaimo H	\$628	\$852

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.

Languages Spoken Most Often at Home

Figure 92 lists the languages spoken at home in each unincorporated area of Nanaimo that have ten speakers or more, excluding English, and the total number of individuals that speak each language.

Figure 86: Top ten languages spoken at home, Unincorporated Areas of Nanaimo, 2016

RDA	Languages (number of speakers)
Nanaimo A	French (25), German (15)
Nanaimo B	French (15), German (10)
Nanaimo C	No non-English languages with 10 or more speakers
Nanaimo E	French (20), German (20)
Nanaimo F	French (15), German (15), Persian (10)
Nanaimo G	French (15), German (10), Punjabi (10), Cantonese (10)
Nanaimo H	Russian (25), German (10)

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.³² The number and percentage of population with Aboriginal identity is shown by electoral area below (Figure 9).

Figure 87: Indigenous population, Unincorporated Area of Nanaimo, 2016

Area	Number Aboriginal Identity	Percentage Aboriginal Identity
Nanaimo A	595	8.5%
Nanaimo B	145	3.6%
Nanaimo C	205	7.5%
Nanaimo E	245	4.0%
Nanaimo F	540	7.1%
Nanaimo G	255	3.4%
Nanaimo H	295	7.7%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

³² For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

Immigration

As shown in Figure 94, the share of residents who are first-generation Canadians ranged from 12.5% in Nanaimo A (875 residents) to 23.0% in Nanaimo B (925 residents). About one-quarter to one-fifth of residents in each of the electoral areas are second-generation Canadians.

Figure 88: Residents – breakdown by generation status, Unincorporated Areas of Nanaimo, 2016

RDA	First generation		Second generation		Third generation or more	
	Percent	Number	Percent	Number	Percent	Number
Nanaimo A	12.5%	875	19.6%	1,380	67.9%	4,770
Nanaimo B	23.0%	925	25.0%	1,005	51.9%	2,085
Nanaimo C	14.2%	390	22.2%	610	63.6%	1,750
Nanaimo E	18.9%	1,150	20.3%	1,235	61.0%	3,715
Nanaimo F	13.1%	1,000	19.1%	1,465	67.7%	5,185
Nanaimo G	16.8%	1,255	24.0%	1,790	59.1%	4,405
Nanaimo H	18.3%	700	20.8%	795	60.9%	2,325

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

By immigration status, the share of immigrants in each unincorporated area of Nanaimo ranged from 11.4% in Nanaimo A (800 individuals) to 22.7% in Nanaimo B (910 individuals) (Figure 95).

Figure 89: Residents - broken down by immigration status, Unincorporated Areas of Nanaimo, 2016

RDA	Non-immigrant		Immigrant		Non-PR	
	Percent	Number	Percent	Number	Percent	Number
Nanaimo A	88.3%	6,205	11.4%	800	0.3%	20
Nanaimo B	77.5%	3,110	22.7%	910	0%	0
Nanaimo C	86.0%	2,365	13.3%	365	0.5%	15
Nanaimo E	81.7%	4,980	17.9%	1,090	0.4%	25
Nanaimo F	87.7%	6,710	12.2%	935	0.2%	15
Nanaimo G	83.4%	6,215	16.3%	1,215	0.3%	20
Nanaimo H	82.6%	3,150	17.2%	655	0.3%	10

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Employment

The share of the population 15 years and older who did not work in 2015 ranged from 32.7% in Nanaimo C (780 individuals) to 49.4% in Nanaimo G (3,315 individuals). This was the largest group by work activity in all electoral areas with the exceptions of Nanaimo C and Nanaimo F. The share of the population who worked full year, full time ranged from 14.4% in Nanaimo B (535 individuals) to 31.9% in Nanaimo C (760 individuals). Across all electoral areas, approximately one-third of the population 15 years and older worked part year and/or part time (Figure 96).

Figure 90: Percent of population (15+ years old) and number of individuals by work activity in 2015 in Unincorporated Areas of Nanaimo

RDA	Worked full year, full time		Worked part year and/or part time		Did not work	
	Percent	Number	Percent	Number	Percent	Number
Nanaimo A	30.5%	1,850	33.9%	2,055	35.6%	2,160
Nanaimo B	14.4%	535	37.1%	1,380	48.5%	1,800
Nanaimo C	31.9%	760	35.4%	845	32.7%	780
Nanaimo E	20.9%	1,160	31.7%	1,760	47.3%	2,625
Nanaimo F	26.9%	1,750	37.8%	2,455	35.3%	2,290
Nanaimo G	19.8%	1,325	30.8%	2,065	49.4%	3,315
Nanaimo H	19.2%	665	32.9%	1,140	47.8%	1,655

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.

We can generally assume that in most couple families with one or no earners and in most lone parent families with no earners that a parent is staying at home. Figures 97 and 98 shows the number and percentage of families by number of earners and family type in the Electoral Areas of Nanaimo³³. For families with at least one child 0 to 5-years-old (Figure 97), the share of couple families with one or no earners ranges from about 26% in Nanaimo E (35 families) to about 39% in Nanaimo H (35 families). The share of lone parent families with at least one child 0 to 5-years-old with no earners ranges from zero in Nanaimo B and Nanaimo C to 100% in Nanaimo H (10 families). In other electoral areas, about a quarter of lone parent families with at least one child 0 to 5-years-old had no earners.

Figure 91: Number and percentage of families with at least one child 0 to 5 years, by family type, by number of earners in 2015, Regional District of Nanaimo

RDA	No earners		One earner		Two or more earners	
	Couple families	Lone parent families	Couple families	Lone parent families	Couple families	Lone parent families
Nanaimo A	2.3% (5)	27.3% (15)	27.3% (60)	81.8% (45)	70.5% (155)	0 (0%)
Nanaimo B	7.7% (5)	0% (0)	23.1% (15)	100% (10)	69.2% (45)	0 (0%)
Nanaimo C	5.6% (5)	0% (0)	22.2% (20)	66.7% (10)	66.7% (60)	0 (0%)
Nanaimo E	0% (0)	25.0% (5)	25.9% (35)	100% (20)	74.1% (100)	0 (0%)
Nanaimo F	2.0% (5)	27.3% (15)	27.5% (70)	81.8% (45)	70.6% (180)	9.1% (5)
Nanaimo G	0% (0)	25.0% (5)	32.3% (50)	100% (20)	67.7% (105)	0 (0%)
Nanaimo H	5.6% (5)	100% (10)	33.3% (30)	50% (5)	61.1% (55)	0 (0%)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

³³ Due to random rounding by Statistics Canada to protect confidentiality, the share of families in each earning situation may not add up to 100%.

For families with at least one child 0 to 17-years-old (Figure 98), the share of couple families with one or no earners ranges from about 21% in Nanaimo C (50 families) to about 31% in Nanaimo H (60 families). The share of lone parent families with at least one child 0 to 17-years-old with no earners ranges from 5.3% in Nanaimo G (5 families) to 28.6% in Nanaimo E (20 families).

Figure 92: Number and percentage of families with at least one child 0 to 17 years, by family type, by number of earners in 2015, Regional District of Nanaimo

RDA	No earners		One earner		Two or more earners	
	Couple families	Lone parent families	Couple families	Lone parent families	Couple families	Lone parent families
Nanaimo A	1.9% (10)	20.0% (35)	20.8% (110)	68.6% (120)	78.3% (415)	14.3% (25)
Nanaimo B	3.1% (5)	15.4% (10)	18.8% (30)	69.2% (45)	78.1% (125)	15.4% (10)
Nanaimo C	4.2% (10)	20.0% (10)	16.7% (40)	60.0% (30)	81.3% (195)	20.0% (10)
Nanaimo E	1.6% (5)	28.6% (20)	19.4% (60)	64.3% (45)	79.0% (245)	14.3% (10)
Nanaimo F	3.6% (20)	15.6% (35)	23.2% (130)	71.1% (160)	73.2% (410)	13.3% (30)
Nanaimo G	2.4% (10)	5.3% (5)	22.9% (95)	73.7% (70)	74.7% (310)	26.3% (25)
Nanaimo H	5.1% (10)	20.0% (10)	25.6% (50)	80.0% (40)	71.8% (140)	10.0% (5)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

As shown in Figure 99, in most electoral areas, the majority of workers work outside the RDA they live in, with the exception of Nanaimo B (where 59.2% of workers worked within the RDA).

Figure 93: Workers by place of work, Unincorporated Areas of Nanaimo, 2016

RDA	Worked within RDA		Worked outside RDA		No fixed workplace address	
	Percent	Number	Percent	Number	Percent	Number
Nanaimo A	20.3%	705	61.7%	2,145	18.0%	625
Nanaimo B	59.2%	915	19.4%	300	21.4%	330
Nanaimo C	19.7%	285	61.7%	895	18.6%	270
Nanaimo E	23.2%	565	59.8%	1,455	17.0%	415
Nanaimo F	30.3%	1,080	46.2%	1,650	23.5%	840
Nanaimo G	18.1%	515	61.6%	1,750	20.2%	575
Nanaimo H	26.4%	385	49.3%	720	24.3%	355

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Residential Mobility

As shown in Figure 100 below, the share of individuals in each RDA who had moved within the past year ranged from 9.0% in Nanaimo C (245 individuals) to 15.1% in Nanaimo F (1,150 individuals). The RDA with the lowest share of new residents who moved into the RDA within the past year was Nanaimo C (3.5%) and the RDA with the highest share of new residents who moved into the RDA within the past year was Nanaimo H (9.5%)

Figure 94: Residents who moved within the past year, Unincorporated Areas of Nanaimo, 2016

RDA	Moved within past year		Moved within past year from outside RDA	
	Percent	Number	Percent	Number
Nanaimo A	13.0%	900	7.0%	485
Nanaimo B	10.0%	400	5.9%	235
Nanaimo C	9.0%	245	3.5%	95
Nanaimo E	10.9%	660	8.4%	510
Nanaimo F	15.1%	1,150	9.2%	695
Nanaimo G	11.1%	825	7.3%	545
Nanaimo H	12.1%	460	9.5%	360

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.

The share of individuals who moved within the past five years ranges from 28.4% in Nanaimo C (750 individuals) to 42.4% in Nanaimo F (3,105 individuals). The RDA with the lowest share of new residents moving into the RDA in the past five years was Nanaimo C (15.0%) and the RDA with the highest share of new residents moving into the RDA in the past five years was Nanaimo G (28.2%), closely followed by Nanaimo F (27.9%) and Nanaimo H (27.3%) (Figure 101).

Figure 95: Residents who moved within the past five years, Unincorporated Areas of Nanaimo, 2016

RDA	Moved within past 5 years		Moved within past 5 years from outside RDA	
	Percent	Number	Percent	Number
Nanaimo A	31.8%	2,125	18.3%	1,220
Nanaimo B	31.8%	1,255	21.5%	850
Nanaimo C	28.4%	750	15.0%	395
Nanaimo E	33.8%	1,985	25.0%	1,465
Nanaimo F	42.4%	3,105	27.9%	2,045
Nanaimo G	38.8%	2,830	28.2%	2,060
Nanaimo H	36.2%	1,340	27.3%	1,010

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-316-X2016001.*

Child Care Spaces

The following tables show the number of group child care spaces by license type and total child care spaces relative to child population by age range for each electoral area. The number of spaces per 100 children by type and age group are summarized in the Figure below.

Figure 96: Child care spaces by type versus child population by age group, Nanaimo A

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	0	0-2-year olds	200	0
Group (30 months to school age)	14	3-4-year olds and half of all 5-year olds	152.5	9.2
Group (school age)	0	6-12-year olds and half of all 5-year olds	492.5	0
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	62	General	-	-
Total child care spaces	76	Total 0-12-year olds	845	9.0

**Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.*

Figure 97: Child care spaces by type versus child population by age group, Nanaimo B

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	0	0-2-year olds	45	0
Group (30 months to school age)	16	3-4-year olds and half of all 5-year olds	45	35.6
Group (school age)	24	6-12-year olds and half of all 5-year olds	150	16.0
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	36	General	-	-
Total child care spaces	76	Total 0-12-year olds	240	31.7

**Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.*

Figure 98: Child care spaces by type versus child population by age group, Nanaimo C

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	12	0-2-year olds	50	24.0
Group (30 months to school age)	49	3-4-year olds and half of all 5-year olds	65	75.4
Group (school age)	25	6-12-year olds and half of all 5-year olds	225	11.1
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	18	General	-	-
Total child care spaces	104	Total 0-12-year olds	340	30.6

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

Figure 99: Child care spaces by type versus child population by age group, Nanaimo E

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	0	0-2-year olds	105	0
Group (30 months to school age)	28	3-4-year olds and half of all 5-year olds	102.5	27.3
Group (school age)	55	6-12-year olds and half of all 5-year olds	267.5	20.6
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	43	General	-	-
Total child care spaces	126	Total 0-12-year olds	475	26.5

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

Figure 100: Child care spaces by type versus child population by age group, Nanaimo F

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	36	0-2-year olds	205	17.6
Group (30 months to school age)	97	3-4-year olds and half of all 5-year olds	180	53.9
Group (school age)	16	6-12-year olds and half of all 5-year olds	625	2.6
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	150	General	-	-
Total child care spaces	299	Total 0-12-year olds	1,010	29.6

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

Figure 101: Child care spaces by type versus child population by age group, Nanaimo G

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	0	0-2-year olds	100	0
Group (30 months to school age)	0	3-4-year olds and half of all 5-year olds	120	0
Group (school age)	0	6-12-year olds and half of all 5-year olds	390	0
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	22	General	-	-
Total child care spaces	22	Total 0-12-year olds	610	3.6

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

Figure 102: Child care spaces by type versus child population by age group, Nanaimo H

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	0	0-2-year olds	60	0
Group (30 months to school age)	40	3-4-year olds and half of all 5-year olds	55	72.7
Group (school age)	40	6-12-year olds and half of all 5-year olds	195	20.5
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	36	General	-	-
Total child care spaces	116	Total 0-12-year olds	310	37.4

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

For ease of comparison, the Figure below summarizes the number of spaces per 100 children for each type of care and age range. Overall spaces per capita vary widely between electoral areas, from 9.0 in Nanaimo A to 31.7 spaces for every 100 children in Nanaimo B. Most electoral areas have no infant-toddler care, with the exceptions of Nanaimo C and Nanaimo F. Group care (30 months to school age) is more readily available in most electoral areas, with the exception of Nanaimo G. Availability of group (school age) care relative to the school age population ranges from none in Nanaimo A and Nanaimo G to over 20 paces per 100 children in Nanaimo E and Nanaimo H.

Figure 103: Summary of Child Care Spaces per 100 Children, Regional District of Nanaimo Electoral Areas

	Infant-Toddler	Preschooler Age	School Age	Total
Nanaimo A	0	9.2	0	9.0
Nanaimo B	0	35.6	16.0	31.7
Nanaimo C	24	75.4	11.1	30.6
Nanaimo E	0	27.3	20.6	26.5
Nanaimo F	17.6	53.9	2.6	29.6
Nanaimo G	0	0	0	3.6
Nanaimo H	0	72.7	20.5	37.4

For more detail please refer to the UBCM Inventory.

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. Nanaimo B is notable in that all of its child care services are provided by non-profit operators. All the programs in Nanaimo H are provided by Indigenous government. Nanaimo E does not have any services provided by not-for-profits or public sector. Nanaimo G only has licensed family and in-home multi-age programs.

Figure 104: Child care programs and spaces by service type and auspice

RDA	Programs					Spaces				
	Family and in-home multi-age	Group and multi-age: For-profit	Group and multi-age: Non-profit	Public Sector or Indigenous Government	Total	Family and in-home multi-age	Group and multi-age: For-profit	Group and multi-age: Non-profit	Public Sector or Indigenous Government	Total
Nanaimo A	3 (43%)	3 (43%)	0 (0%)	1 (14%)	7 (100%)	22 (29%)	44 (58%)	0 (0%)	10 (13%)	76 (100%)
Nanaimo B	0 (0%)	0 (0%)	4 (100%)	0 (0%)	4 (100%)	0 (0%)	0 (0%)	76 (100%)	0 (0%)	76 (100%)
Nanaimo C	1 (17%)	2 (33%)	0 (0%)	3 (50%)	6 (100%)	7 (7%)	50 (48%)	0 (0%)	47 (45%)	104 (100%)
Nanaimo E	3 (43%)	4 (57%)	0 (0%)	0 (0%)	7 (100%)	23 (18%)	103 (82%)	0 (0%)	0 (0%)	126 (100%)
Nanaimo F	5 (25%)	9 (45%)	6 (30%)	0 (0%)	20 (100%)	36 (12%)	145 (48%)	118 (39%)	0 (0%)	299 (100%)
Nanaimo G	3 (100%)	0 (0%)	0 (0%)	0 (0%)	3 (100%)	22 (100%)	0 (0%)	0 (0%)	0 (0%)	22 (100%)
Nanaimo H	0 (0%)	0 (0%)	0 (0%)	3 (100%)	3 (100%)	0 (0%)	0 (0%)	0 (0%)	116 (100%)	116 (100%)

*Source: UBCM child care inventory, Island Health Licensing.

Regional District of Nanaimo

Child population statistics for the Regional District of Nanaimo

In the Regional District of Nanaimo in 2016, there were 17,325 children aged 0 to 12 years-old out of a total population of 155,695 (Figure 104). The largest age group was the 8-year-old group, with 1,460 children (8% of the total child population). The smallest age group was the under 1-year-old group, with 1,150 children (7% of the total child population). The age range with the largest number of children was the 5 to 9-year-old age range, comprising 40% of the total child population (6,995 children).

Figure 105: Child population statistics by age range for the Regional District of Nanaimo, 2016

Age Range	Age Total	Age %
0 to 4 Years	6,240	36%
5 to 9 Years	6,995	40%
10 to 12 Years	4,090	24%
Total 0 to 12 Years	17,325	100%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016004.*

Between 2011 and 2016, the total number of 0 to 14-year-olds increased by 900 children, a 4.7% increase (Figure 105). The 0 to 4-year-old population increased by 225 children (+3.7% increase) and the 5 to 9-year-old age group increased by 935 children (+15.5% increase). The 10 to 14-year-old age group decreased by 255 children (-3.7% decrease).

Figure 106: Changes over the past 2 censuses (2011-2016) in child population by age group, Regional District of Nanaimo

Age group	Change in number of children, 2011-2016 (#)	Change in number of children, 2011-2016 (%)
0 to 4 Years	+225	+3.7%
5 to 9 Years	+935	+15.5%
10 to 14 Years	-255	-3.7%
Total 0 to 14 Years³⁴	+900	+4.7%

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016041.*

³⁴ The 2011 single year population data is not available for all of the RDAs, so it was not possible to provide population for the 10 – 12-year-old age group as for the municipalities above. Population for the 10 to 14-year-old age group has been provided instead.

Children in Lone Parent Families

In 2016, 24.3% of all children aged 0 to 14 lived in lone parent families (4,850 children) (Figure 106). The age range with the greatest number of children in lone parent families was the 10 to 14-year-old group, with 1,925 children in lone parent families (28.6% of all children in this age range).

Figure 107: Number of children in lone parent families, Regional District of Nanaimo, 2016

Age Range	Number of Children	Number of Children in Lone Parent Families	Percentage of Children in Lone Parent Families
0 to 4 Years	6,230	1,155	18.5%
5 to 9 Years	6,895	1,770	25.3%
10 to 14 Years	6,730	1,925	28.6%
0 to 14 Years	19,945	4,850	24.3%

*Source: Statistics Canada Catalogue No. 98-400-X2016041.

Median Family Income

In the Regional District of Nanaimo in 2015, the median income (before-tax) was \$98,551 for couple families with at least one child 0 to 17-years-old and \$89,410 for couple families with at least one child 0 to 5-years-old (Figure 107). The median income for lone parent households was \$34,974 for those with at least one child 0 to 17-years-old and \$27,824 for those with at least one child 0 to 5-years-old.

Figure 108: Median family income (before-tax) by family type, Regional District of Nanaimo, 2015

Family Type	Median Income (Families with children 0 to 17-years-old)	Median Income (Families with children 0 to 5-years-old)
Couple families with children	\$98,551	\$89,410
Lone parent families	\$34,974	\$27,824
Total families	\$78,359	\$74,654

*Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>

Low-Income Measure

In 2015, 22.2% of children aged 0 to 17 (5,330 children) were in low-income families based on the low-income after-tax measure (Figure 108).

Figure 109: Low income based on the low-income measure after tax by age group, Regional District of Nanaimo, 2015

Age group	Number of children in low income families	Percentage of children in low income families
0 to 17 Years	5,330	22.2%
0 to 5 Years	1,730	23.0%

*Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016127.

Housing

In 2016, the median monthly shelter costs for owned dwellings was \$818 and \$923 for rented dwellings (Figure 109).

Figure 110: Median monthly shelter costs, Regional District of Nanaimo, 2016

Housing characteristics	Cost (\$)
Median monthly shelter costs for owned dwellings	\$818
Median monthly shelter costs for rented dwellings	\$923

**Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020)*

Languages Spoken Most Often at Home

Figure 110 lists the ten most common languages spoken at home in the Regional District of Nanaimo and the total number of individuals that speak each language. There was a total of 60 languages spoken in the Regional District. English (145,790 speakers), Mandarin (890 speakers), and Punjabi (560 speakers) were the most common languages in 2016.

Figure 111: Top ten languages spoken at home, Regional District of Nanaimo, 2016

Language	Number of speakers
English	145,790
Mandarin	890
Punjabi (Panjabi)	560
French	415
Korean	320
Vietnamese	285
Cantonese	230
German	225
Spanish	195
Tagalog (Pilipino, Filipino)	190

**Source: Statistics Canada, 2016 Census of Population, Statistics Canada Catalogue no. 98-400-X2016070*

Indigenous Population

According to Statistics Canada, Aboriginal identity includes persons who are First Nations, Metis, Inuk and/or those who are Registered or Treaty Indians, and/or those who have membership in a First Nation or Indian band.³⁵ Persons with Aboriginal identity comprised 7.0% of the Regional District of Nanaimo's total population in 2016 (290 persons of Aboriginal identity) (Figure 111).

Figure 112: Indigenous population, Regional District of Nanaimo, 2016

Aboriginal Population	Number	Percentage
Aboriginal identity	10,635	7.0%
Total population	151,630	100%

**Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Immigration

In 2016 in the Regional District of Nanaimo, 17.4% of residents were first generation Canadians (26,395 people). 20.5% were second generation (31,065 people) and 62.1% were third generation or more (94,165 people) (Figure 112).

Figure 113: Residents – breakdown by generation status, Regional District of Nanaimo, 2016

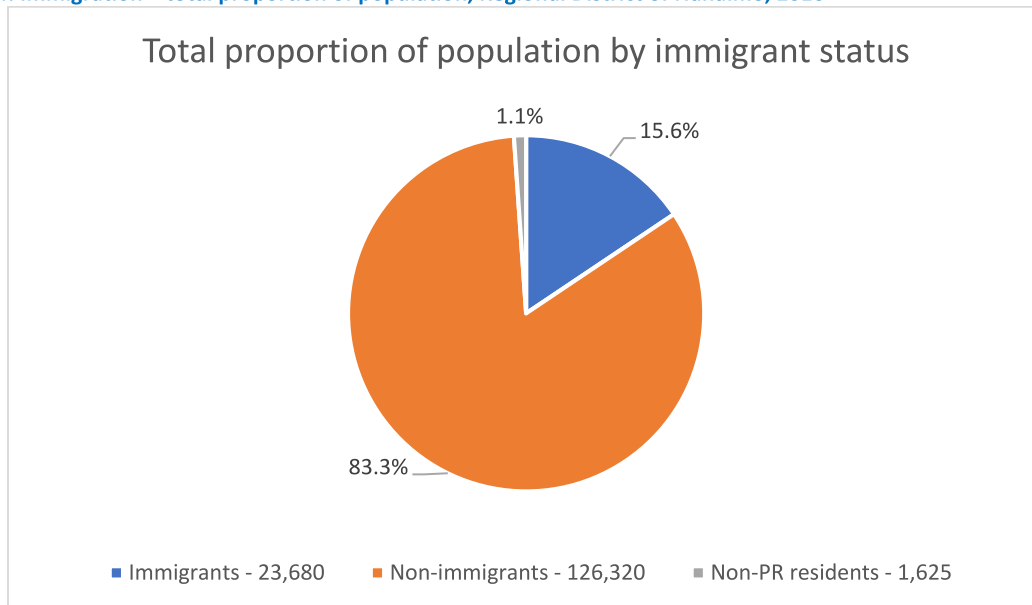
Generation Status	Number	Percentage
First generation	26,395	17.4%
Second generation	31,065	20.5%
Third generation or more	94,165	62.1%
Total	151,630	100%

**Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

³⁵ For definition of Aboriginal identity, see: <https://www12.statcan.gc.ca/census-recensement/2016/ref/dict/pop001-eng.cfm>

The total proportion of immigrants by immigrant status was 15.6% (23,680 immigrants). The total proportion of non-immigrants was 83.3% (126,320 non-immigrants) (Figure 113).

Figure 114: Immigration – total proportion of population, Regional District of Nanaimo, 2016

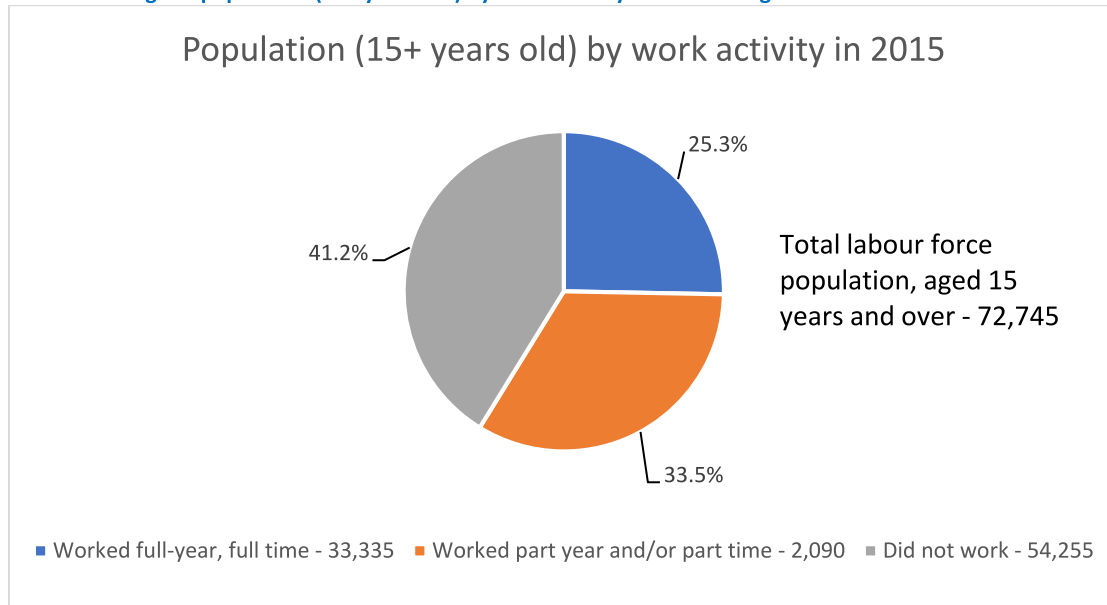


**Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).*

Employment

In the Regional District of Nanaimo in 2015, 41.2% of the population (15+ years old) did not work. 33.5% worked part year and/or part time and 25.3% worked full-year full-time (Figure 114).

Figure 115: Percentage of population (15+ years old) by work activity in 2015 in Regional District of Nanaimo



*Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

We can generally assume that in most couple families with one or no earners and in most lone parent families with no earners that a parent is staying at home. Figure 115 shows that 26.8% of couple families with at least one child 0 to 5-year-olds (1,190 families) and about 20.9% of couple families with at least one child 0 to 17-years-old (2,080 families) had one or no earners. 26.2% of lone parent families with at least one child 0 to 5-years-old had no earners and 18.5% of lone parent families with at least one child 0 to 17-years-old (10 families) had no earners.

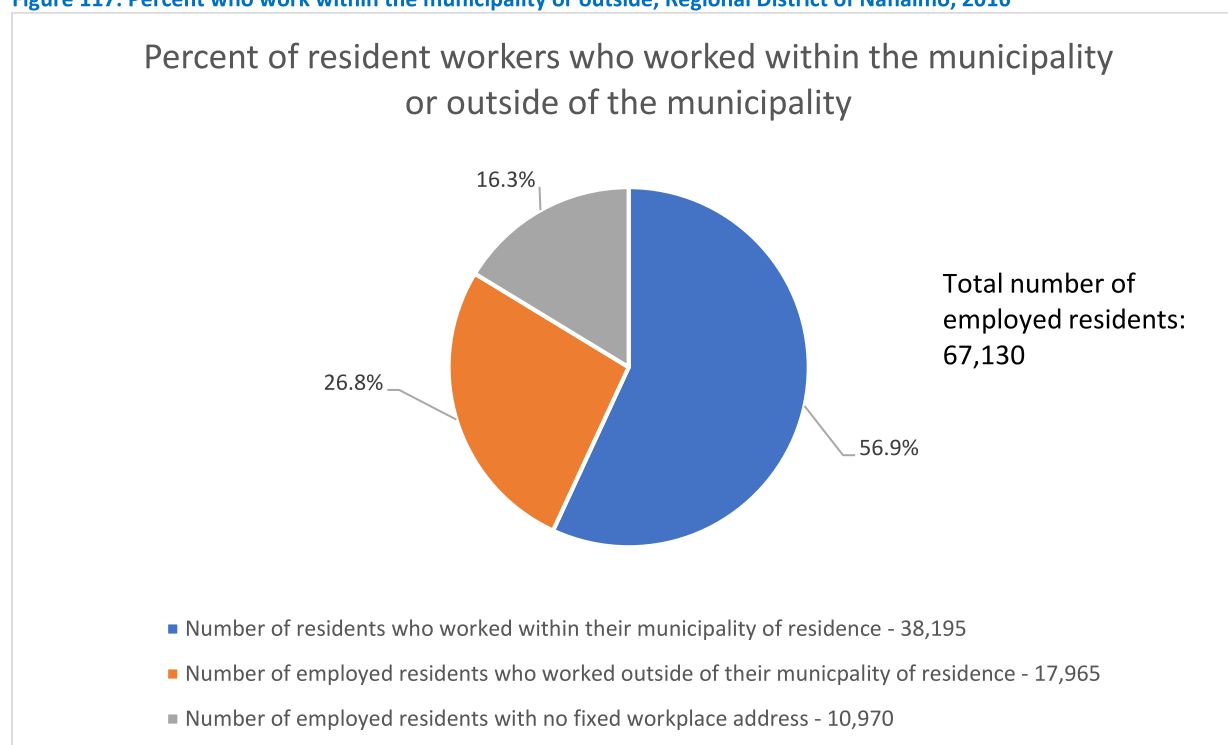
Figure 116: Percentage of families, by family type, by number of earners in 2015, Regional District of Nanaimo

Number of earners	Couple families		Lone parent families	
	At least one child 0 to 17 years	At least one child 0 to 5 years	At least one child 0 to 17 years	At least one child 0 to 5 years
No earners	2.5% (250)	2.8% (125)	18.5% (750)	26.2% (325)
One earner	18.4% (1,830)	24.0% (1,065)	65.0% (2,635)	71.0% (880)
Two or more earners	79.2% (7,895)	73.2% (3,250)	16.5% (670)	3.2% (40)

**Source: Statistics Canada. Census Family Total Income Groups (22) in Constant (2015) Dollars, Census Family Structure (7), Family Size of Census Family (4), Ages of Census Family Members (18), Number of Earners in the Census Family (5) for Census Families, 2006, 2016 Census. Downloaded from Community Data Program: <https://communitydata.ca/content/census-family-total-income-groups-22-constant-2015-dollars-census-family-structure-7-family>*

In 2016, 56.9% of workers residing in the Regional District of Nanaimo worked within the municipality, 26.8% worked within the municipality, and an additional 16.3% had no fixed work address (Figure 116).

Figure 117: Percent who work within the municipality or outside, Regional District of Nanaimo, 2016



*Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

Residential Mobility

In the Regional District of Nanaimo in 2016, the number of people who had moved within the past year was 24,100 (16.0% of all residents) and the number of new people who had moved into the Regional District was 11,050 (7.3%)³⁶.

The number of people who had moved within the past five years was 62,495 (43.0% of all residents) and the number of new people who had moved into the Regional District was 33,045 (22.7%)³⁷.

³⁶ Source: Statistics Canada. 2017. Nanaimo, RD [Census division], British Columbia and British Columbia [Province] (table). Census Profile. 2016 Census. Statistics Canada Catalogue no. 98-316-X2016001. Ottawa. Released November 29, 2017. <https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index.cfm?Lang=E> (accessed May 5, 2020).

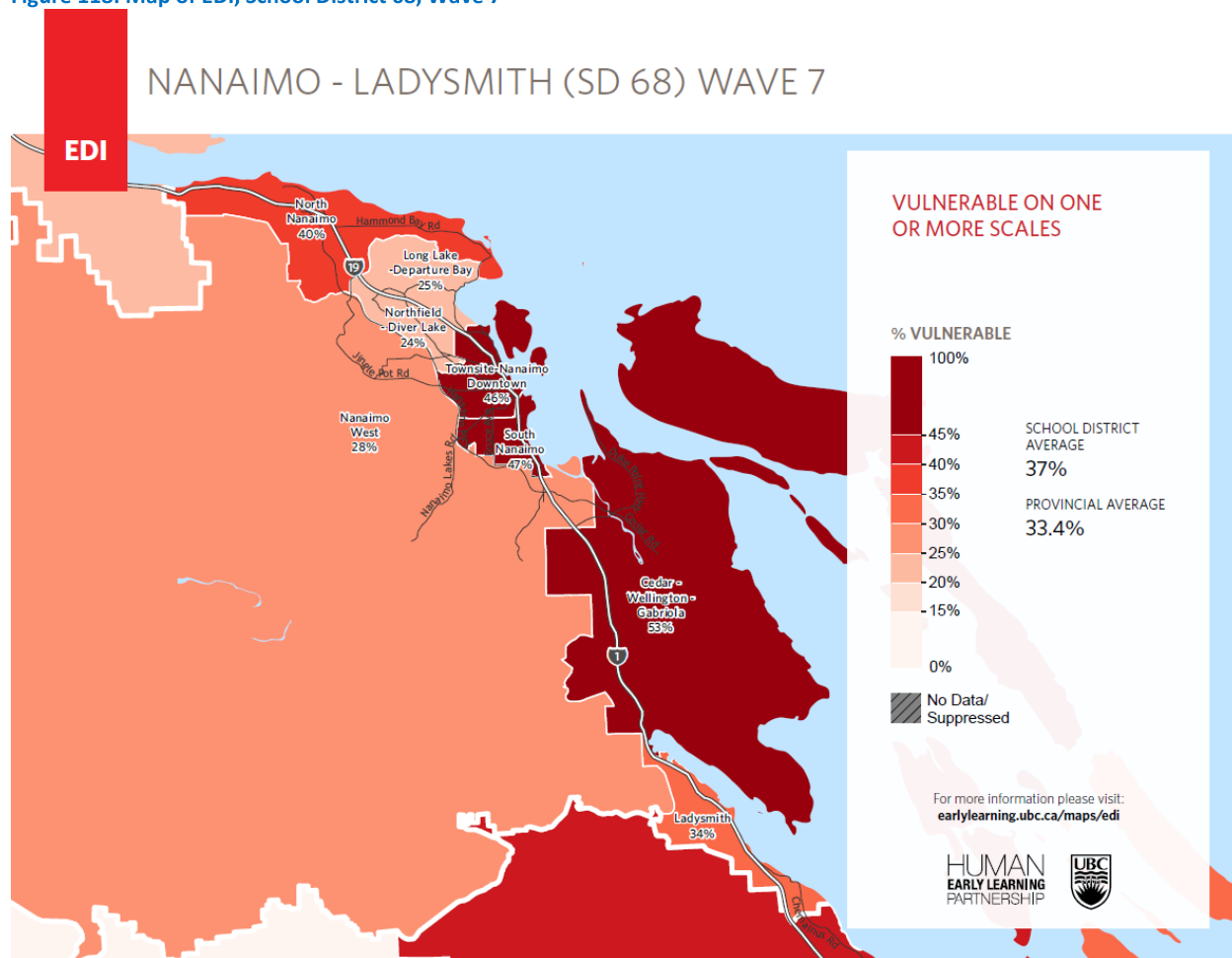
³⁷ Ibid.

EDI (Early Development Instrument) for School Districts 68 and 69

The Early Development Instrument (EDI) is used to assess childhood vulnerability by surveying kindergarten children around the province. Vulnerable children are defined as those who, without additional support and care, are more likely to experience challenges in their school years and beyond. EDI is measured along five scales: Physical Health & Well-Being, Social Competence, Emotional Maturity, Language & Cognitive Development, and Communication Skills & General Knowledge. A complete description of the EDI can be found at <http://earlylearning.ubc.ca/maps/data/>.

During Wave 7 (2016-2019), 37% of surveyed children (385 children) in School District 68 and 31% of surveyed children (173 children) in School District 69 were vulnerable on at least one of the five scales (Figure 21). For comparison, 33.4% of surveyed children were vulnerable on at least one of the five scales across the entire province of BC. Cedar-Wellington-Gabriola had the highest vulnerability rate at 53%, followed by South Nanaimo (47%) and Townsite-Nanaimo Downtown (46%) (Figure X).

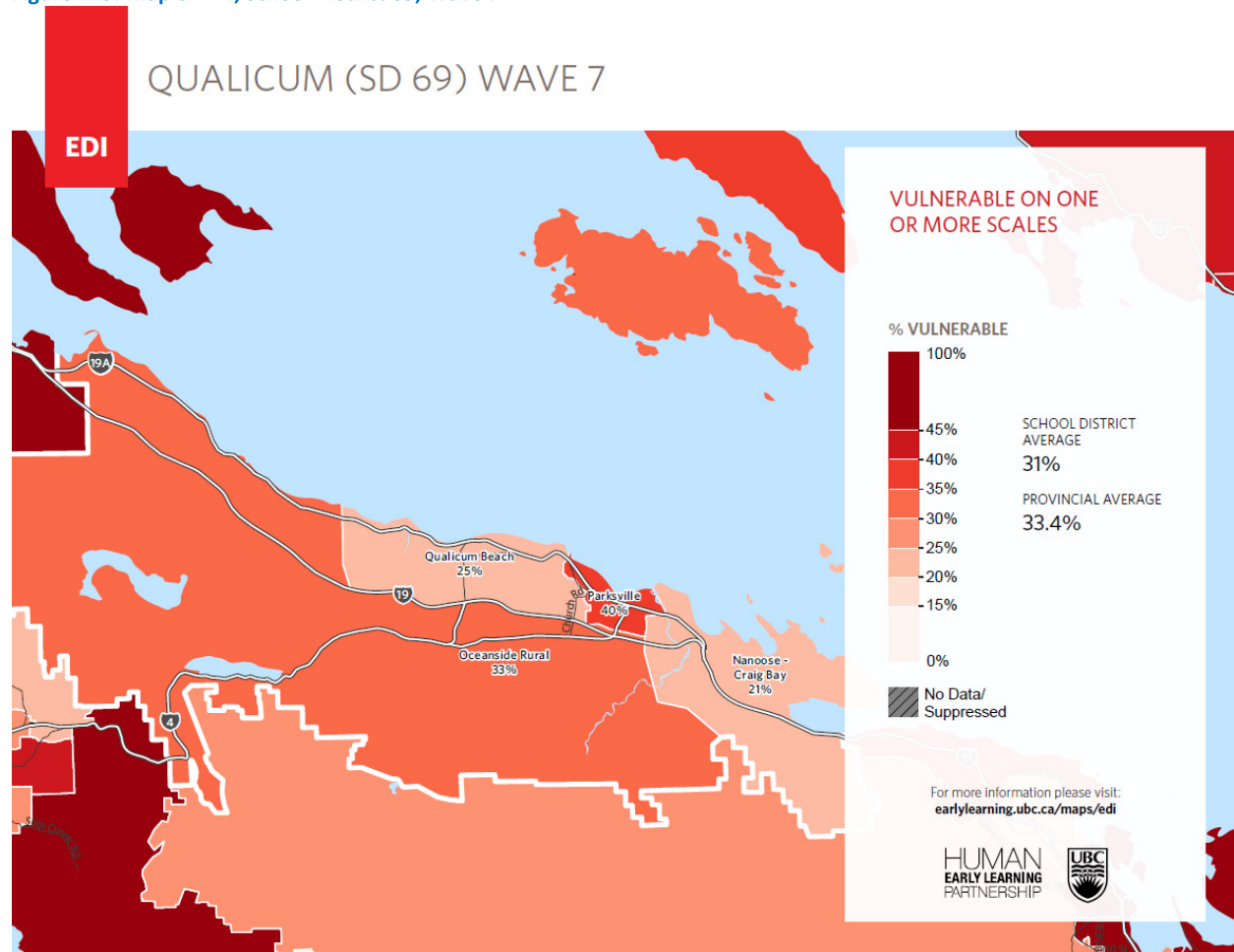
Figure 118: Map of EDI, School District 68, Wave 7



*Source: UBC (University of British Columbia). HELP (Human Early Learning Partnership). EDI (Early Development Instrument). Website. School District 68. Community Profile.

http://earlylearning.ubc.ca/media/edi_w7_communityprofiles/edi_w7_communityprofile_sd_68.pdf.

Figure 119: Map of EDI, School District 69, Wave 7



Source: UBC (University of British Columbia). HELP (Human Early Learning Partnership). EDI (Early Development Instrument). Website. School District 69. Community Profile.

http://earlylearning.ubc.ca/media/edi_w7_communityprofiles/edi_w7_communityprofile_sd_69.pdf

Figure 120: EDI (by HELP Neighbourhood), School Districts 68 and 69, Wave 7 (2016-2019)

Neighbourhood	Number of Children	Vulnerable on One or More Scales (%)
School District 68 – Nanaimo-Ladysmith		
Cedar-Wellington-Gabriola	92	53%
Ladysmith	93	34%
Long Lake-Departure Bay	147	25%
Nanaimo West	127	28%
Northfield – Diver Lake	122	24%
North Nanaimo	237	40%
South Nanaimo	108	47%
Townsite-Nanaimo Downtown	127	46%
School District 68	1,053	37%
School District 69 - Qualicum		
NanOOSE-Craig Bay	90	21%
Oceanside Rural	174	33%
Parksville	169	40%
Qualicum Beach	118	25%
School District 69	551	31%
All participating districts	43,377	33

*Source: UBC (University of British Columbia). HELP (Human Early Learning Partnership). EDI (Early Development Instrument). Website. School District 68. Community Profile.

http://earlylearning.ubc.ca/media/edi_w7_communityprofiles/edi_w7_communityprofile_sd_68.pdf. &

UBC (University of British Columbia). HELP (Human Early Learning Partnership). EDI (Early Development Instrument). Website. School District 69. Community Profile.

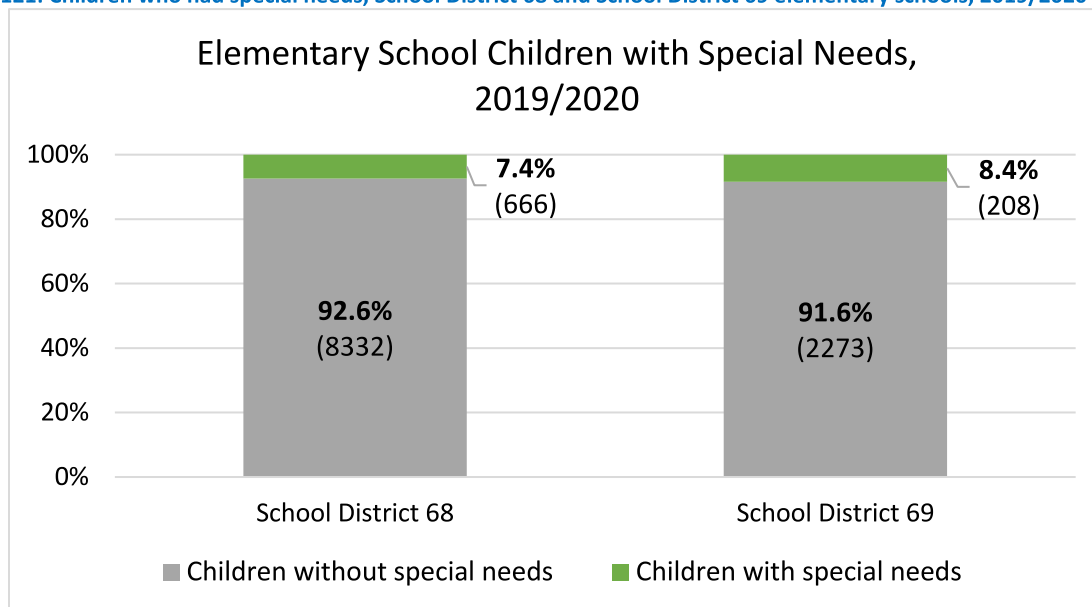
http://earlylearning.ubc.ca/media/edi_w7_communityprofiles/edi_w7_communityprofile_sd_69.pdf

Special Needs

In 2019/2020, the percentage of students in elementary schools with special needs was 7.4% in School District 68 (666 children of 8,998 total) and 8.4% in School District 69 (208 children of 2,481 total)³⁸ (Figure 124).

³⁸ According to the BC Government's Ministry of Education, the following categories are special needs:

Figure 121: Children who had special needs, School District 68 and School District 69 elementary schools, 2019/2020



*Source: BC Government. Open Data Catalogue - Student Enrollment and FTE by Grade.

Physically Dependent; Deafblind; Moderate to Profound Intellectual Disability; Physical Disability or Chronic Health Impairment; Visual Impairment; Deaf or Hard of Hearing; Autism Spectrum Disorder; Intensive Behaviour Interventions or Serious Mental Illness; Mild Intellectual Disabilities; Gifted; Learning Disability; and Students Requiring Behaviour Support or Students with Mental Illness. For more information, please visit BC Government. Ministry of Education. Student Success. Glossary. Special Needs Categories.
<https://studentsuccess.gov.bc.ca/glossary>

The Infant Development Program (IDP) and the Aboriginal Infant Development Programs (AIDP) are programs for children birth to 3 years who have a diagnosed disability or are at risk of having a developmental delay. Services are delivered in the home. Supported Child Development (SCD) and Aboriginal Supported Child Development (ASCD) are programs for children, infant through school age, who require extra support in the child care setting they attend. Services are primarily delivered in the child care programs. The number of children in the Regional District of Nanaimo served and on the wait lists for these programs are shown in Figure 126. It is worth noting these numbers were reported in August 2020 and may reflect impacts of the COVID-19 pandemic; some providers anticipated increased demand for services in fall 2020 as more children re-enter schools and child care centres.

Figure 122: Children using IDP, AIDP, SCD, and ASCD, Regional District of Nanaimo, August 2020

Program	Number of Children Served	Number of Children on Wait List
Infant Development Program	297	45
Aboriginal Infant Development Program	-	-
Supported Child Development	290	21
Aboriginal Supported Child Development	42	0

**Sources: Nanaimo Child Development Centre, Nanaimo Aboriginal Centre.*

Child Care Spaces

Across the entire Regional District, there are 221 child care centres offering a total of 4,998 child care spaces. Overall, the Regional District has 28.8 child care spaces for every 100 children from birth to 12 years. There are 41.3 group (30 months to school age) spaces for every 100 preschooler age children (3 to 4-year-olds and half of all 5-year-olds). By contrast, there are only 9.4 group (birth to 36 month) spaces for every 100 children from birth to 2 years. There are 15.3 group (school age) spaces for every 100 school age children (6 to 12 years and half of all 5-year-olds).

Figure 123: Child care spaces by type versus child population by age group

License type	Number of spaces	Age group	# of children	Spaces per 100 children in this age group
Group (birth to 36 months)	342	0-2-year olds	3,625	9.4
Group (30 months to school age)	1,377	3-4-year olds and half of all 5-year olds	3,330	41.3
Group (school age)	1,590	6-12-year olds and half of all 5-year olds	10,410	15.3
All others (licensed preschool, group multi-age, family child care, in-home multi-age)	1,689	General	-	-
Total child care spaces	4,998	Total 0-12-year olds	17,335	28.8

*Source: UBCM child care inventory, Island Health Licensing, 2016 Census for child population.

A more detailed overview of the number of programs and spaces by license type is presented below.

Figure 124: Child care programs and spaces by license type

License Type	Programs		Spaces	
	Number	Percent	Number	Percent
Group (Birth to 36 Months)	27	9%	342	7%
Group (30 Months to School Age)	60	20%	1,377	28%
Licensed Preschool	40	14%	824	16%
Group (School Age)	54	18%	1,590	32%
Multi-Age	14	5%	128	3%
Family Child Care	78	26%	553	11%
In-Home Multi-Age	23	8%	184	4%
Total	296	100%	4,998	100%

*Source: UBCM child care inventory, Island Health Licensing.

Child Care Auspice

A summary of the number of programs and spaces offered by service type and auspice is shown below. 46% of all programs (135 programs) and 56% of all spaces (2,799 spaces) are group or multi-age for-profit care. The next most common service type and auspice is family and in-home multi-age care, accounting for 34% of all programs (1010 programs) and 15% of spaces (737 spaces). Group and multi-age care run by non-profit operators accounts for 17% of all programs (50 programs) and 25% of all spaces (1,247 spaces) and Indigenous government and other public sector run child care accounts for 3% of all programs (10 programs) and 4% of spaces (215 spaces).

Figure 125: Child care programs and spaces by service type and auspice

Service Type and Auspice	Programs		Spaces	
	Number	Percent	Number	Percent
Family and in-home multi-age	101	34%	737	15%
Group and multi-age: For-profit	135	46%	2,799	56%
Group and multi-age: Non-profit	50	17%	1,247	25%
Indigenous government/public sector	10	3%	215	4%
Total	296	100%	4,998	100%

**Source: UBCM child care inventory, Island Health Licensing.*

Elementary Schools and Licensed Child Care

Figure 126: Public elementary schools within School District 68, with K-7 school enrollment in 2019/20 and licensed capacity by child care program type

School Name	Municipality	Enrollment	Child care on site?	Group under 36 months	Group 3 -5 years	Preschool	Before / After School
Bayview Elementary	Nanaimo	189	No				
Brechin Elementary	Nanaimo	200	Yes				24
Cedar Elementary	Nanaimo A	333	No				40
Chase River Elementary	Nanaimo	239	No				
Cilaire Elementary	Nanaimo	189	Yes				20
Cinnabar Valley Elementary	Nanaimo	298	Yes				20
Coal Tye Elementary	Nanaimo	362	Yes				20
Departure Bay Elementary	Nanaimo	325	Yes				24
Ecole Hammond Bay Elementary	Nanaimo	357	Yes				46
Ecole North Oyster Elementary	Nanaimo A	370	No				
Ecole Pauline Haarer Elementary	Nanaimo	229	Yes				40
Ecole Quarterway Elementary	Nanaimo	412	No				
Fairview Elementary	Nanaimo	381	Yes			20	20
Forest Park Elementary	Nanaimo	404	No				
Frank J. Ney Elementary	Nanaimo	434	Yes				40
Gabriola Elementary	Nanaimo B	167	No				
Georgia Avenue Elementary	Nanaimo	384	Yes				20
Ladysmith Intermediate	Ladysmith	288	-	-	-	-	-
Ladysmith Primary	Ladysmith	307	-	-	-	-	-

School Name	Municipality	Enrollment	Child care on site?	Group under 36 months	Group 3 -5 years	Preschool	Before / After School
McGirr Elementary	Nanaimo	451	Yes				44
Mountain View Elementary	Nanaimo C	407	Yes				25
Park Avenue Elementary	Nanaimo	315	Yes				20
Pleasant Valley Elementary	Nanaimo	385	Yes				25
Qwam Qwum Stuwixwulh Community School	Nanaimo A	84	Yes			10	
Randerson Ridge Elementary	Nanaimo	425	Yes				25
Rock City Elementary	Nanaimo	364	Yes				40
Seaview Elementary	Lantzville	262	Yes				24
Uplands Park Elementary	Nanaimo	335	Yes				48
All Schools	School District 68	8,896	19/26 RDN schools	0	0	30	565

**Source: BC Government. Open Data Catalogue - Student Enrollment and FTE by Grade, UBCM child care inventory, Island Health Licensing.*

Figure 127: Public elementary schools within School District 69, with K-7 school enrollment in 2019/20 and licensed capacity by child care program type

School Name	Municipality	Enrollment	Child care on site?	Group under 36 months	Group 3 -5 years	Preschool	Before / After School
Arrowview Elementary	Qualicum Beach	298	Yes		20	20	21
Bowser Elementary	Nanaimo H	186	No				
Ecole Oceanside Elementary	Nanaimo G	476	No				
Errington Elementary	Nanaimo F	300	No				
False Bay School	Lasqueti Island	24	No				
Nanoose Bay Elementary	Nanaimo E	303	No				
Pass/Woodwinds Alternate	Parksville	NA	Yes	12	16		
Qualicum Beach Elementary	Qualicum Beach	384	Yes		20	20	30
Springwood Elementary	Parksville	474	No				
All Schools	School District 69		3/8 RDN Schools	12	56	40	51

**Source: BC Government. Open Data Catalogue - Student Enrollment and FTE by Grade, , UBCM child care inventory, Island Health Licensing.*

In addition to the School District 68 and 69 elementary schools, there are some child care services available at independent schools and through the French School District. Ecole Oceane Nanaimo, located in City of Nanaimo, has 20 group (30 months to school age) and 44 school age spaces. Three independent schools also have on-site child care: Nanaimo Christian School (City of Nanaimo) has 16 group (30 month to school age), 20 licensed preschool, and 24 group (school age) care spaces; Arrowsmith Independent School (Nanaimo F) has 20 group (30 month to school age) and 20 licensed preschool spaces; Aspengrove Independent School (Lantzville) has 68 group (30 month to school age), 32 licensed preschool, 16 group (school age), and 8 multi-age spaces.

ATTACHMENT B

Recommendations Unique to Nanaimo

Recommendations for the City of Nanaimo					
#	Action	Time Frame	External Partners	Staff Comment	
				Green represents actions that can be completed with existing resources Red represents actions that will require additional resources	
1	Review Schedule D of the Zoning Bylaw and allocate a much higher point value for including child care in a development.	Short	None	Schedule D already includes points for providing childcare on site or being located near a child care centre. Increasing the amount of points awarded for child care can be considered in Staff's next Schedule D review or Zoning Bylaw General Amendments.	
2	Amend the Official Community Plan (OCP) to clearly identify the importance of child care to the community's overall health.	Short/medium	Island Health, School districts, not-for-profit child care providers, community as a whole, through OCP consultation	The Mid Island Region Child Care Plan will be included as formal stakeholder input into the REIMAGINE NANAIMO project. REIMAGINE NANAIMO includes a re-write of Nanaimo's OCP.	
3	Include specific goals, policies and strategies in the OCP for facilitating development of child care in the community.	Short/medium	Community as a whole, through OCP consultation	Objectives and policies to support the provision of child care will be included in the OCP review process, which will provide an immediate opportunity for the City to implement Actions 2 and 3.	
4	Amend the terminology in the Zoning Bylaw, updating the definition section and replacing references to "day care facility" with "child care facility".	Short	None	The recommendation has been shared with Current Planning for consideration during the next round of General Amendments to Zoning Bylaw 4500. Changing the defined use of "day care facility" with "child care facility" might preclude other types of group day care centres, such as adult care for persons with varied cognitive abilities.	

Recommendations for the City of Nanaimo

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
5	Review the Zoning Bylaw with the aim of increasing the number of zoning districts in which child care facilities could be accommodated as a permitted use.	Medium	Not-for-profit child care providers; Island Health Licensing (to help identify locational priorities)	A review of all zoning districts to increase the number of zones that permit child care space can be carried out with existing staff resources. Policy direction from the REIMAGINE process may benefit this review and as such it is recommended the review not be started until the REIMAGINE project is complete. The Child Care Action Plan also includes a review of municipal bylaws and policies which will also benefit this review.
6	Promote the permissive tax exemptions to not-for-profit child care providers, where applicable.	Ongoing	Not-for-profit child care providers	There will be no impact to the City budget. The tax dollars needed will be distributed amongst the remaining properties in the taxation class. If Council wishes to implement this recommendation, a separate staff report will be required.
7	Include child care in the City's next Strategic Plan (2023-2027) and identify child care as a priority for the Strategic Infrastructure Reserve (enacted January 2020).	Medium	None	The exact impact of this recommendation is unknown at this time. The Strategic Infrastructure Reserve is funded from Casino and Fortis revenues. Due to the COVID 19 pandemic, Casinos have been unable to operate and as such the City is not receiving any revenue from Casino operations. If this continues into 2022, the reserve may have limited funds to direct to child care initiatives.

Mid-Island Regional Recommendations

Recommendations to Increase Accessibility

Policy and Planning

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
1	Develop a Mid-Island Region Child Care Policy for local governments, providing a consolidated statement of the Region's vision, goals, strategies and commitments to child care.	Short	Province, school districts, not-for-profit operators, community agencies	The development of a regional policy beyond what is already included within the Action Plan will require further coordination between the municipalities and additional staff time.
2	Establish an ongoing Child Care Action group that would be comprised of representatives from child care providers and other service providers, the school districts and key staff from each of the Project Partner jurisdictions (Nanaimo, Parksville, Qualicum Beach, Lantzville and the Regional District) to ensure a consistent regional approach. This group would develop strategies to maximize the group's effectiveness for a systemic approach to child care in the Mid-Island Region.	Short/medium/long	Not-for-profit providers, school districts, service providers and Island Health Licensing	To support the development of the Action Plan, a working group of regional childcare stakeholders was formed that included representation from First Nations, both School Districts, VIU, Island Health and a number of non-profits that support children and vulnerable families. While it will result in increased staff time and commitment from a number of other stakeholders, the working group may be reorganized as an ongoing Child Care Action group.

Recommendations to Increase Accessibility

Policy and Planning

	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
3	<p>Develop an inter-jurisdictional staff position dedicated to child care. The position would focus on:</p> <ul style="list-style-type: none"> Monitoring the progress of implementing the recommendations and meeting targets Reporting annually to Councils and the School districts Facilitating partnerships, and engaging with Provincial and community partners Identifying locations for new, not-for-profit and public quality child care Bringing child care providers and staff together for information sharing, joint training and education; and providing more information for parents about child care, how to access it and how the system works, especially targeting more vulnerable populations. 	Short/medium	Not-for-profit providers, Island Health, all Mid-Island jurisdictions, school districts	<p>The recommendation includes a new staff position but does not indicate where the position may be located and how it would be funded. As the position will be inter-jurisdictional and regional in nature, Staff do not support hosting the position within the City of Nanaimo. Creating a new position of this sort will require considerable coordination between all the local governments and other local child care partners (Island Health, School District, Pacific Care). It is recommended the coordination work to determine if this recommendation is achievable by the Child Care Action group if/when formed.</p>
4	Bring community partners together to explore the feasibility of a centralized waitlist and centralized list of providers in the Region to remove barriers for families to access current child care spaces.	Medium	Child care providers, school districts, Island Health, Child Care Action Group	<p>This task may be included as an action item for the Child Care Action Group.</p>

Recommendations to Increase Accessibility

Policy and Planning

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
5	Consider the opportunities for developing local government/Regional District-owned child care facilities, including accessing Provincial capital funding to build child care spaces.	Short/medium	Province, not-for-profit operators	The City has recently supported the School District's application for Provincial Childcare funding and is committed to working with our partners to access childcare funding. The Child Care Action plan, including the established space targets, will benefit future funding applications.
6	Develop and maintain an inventory of existing publicly owned spaces and properties that could be developed for child care that includes: <ul style="list-style-type: none"> • Assets in the various jurisdictions (buildings and land) that are potential sites for capital redevelopment; • Underutilized or vacant spaces or land, including parks, that could be used for child care; and, • Working with other public and not-for-profit partners to identify additional potential spaces and land. 	Short/medium/long	Island Health, School districts, not-for-profit child care providers, post-secondary institutions	An inventory project, such as the one recommended, will require coordination between Parks, Recreation and Culture, Real Estate and other governments and organizations responsible for public land. City Staff typically receive a high demand for the use of City meeting space from a number of non-profit and service organizations including child care providers.
7	Endorse the space targets identified in this report recognizing that partnerships and solutions outside of the mandate and resources of local governments are needed to deliver on these needs.	Short	Not-for-profit providers, school districts, Island Health	Staff recommend Council endorse the space targets as presented within the report.

Recommendations to Increase Accessibility

Policy and Planning

	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
8	Develop building models/prototypes and high-level cost estimates to facilitate planning for new child care facilities on municipal sites.	Short	None	Purpose-built child care space is not currently included within the City's facilities or capital planning. Developing such a model and adding child care space will require additional funding and resources.
9	Where possible, prioritize spaces for age groups which are most underserved, like infant/toddler and school-age. Direct these new spaces to areas of the Region with lower access rates, growing population, and priority locations such as public facilities and parks, new residential and commercial developments, along transit corridors and on school properties. (See Appendix E)	Short/medium/long	Child Care providers, school districts, Island Health, Regional District Transit System	The recommendation will involve coordination among all stakeholders as well as a number of independent actions to prioritize child care spaces. The City's role can be accomplished through zoning, providing development incentives for child care (density bonusing, rezoning policy), providing letters of support for child care grant applications, and making space available for priority groups where possible.
10	Include consideration and provision of child care within strategies and projects for affordable housing, seniors' residents and transit expansion/improvement.	Short/medium/long	BC Housing, Regional Transit System, Island Health	City Staff will work with housing, health and service providers to request child care be considered within appropriate future affordable housing projects.
11	Bring partners together to explore and pilot, with providers, child care that offers longer, non-traditional and/or flexible hours.	Medium	Child Care Action Group, Province, Island Health, not-for-profit providers, school district	The recommendation will involve coordination among all stakeholders and would best be accomplished through the Child Care Action Group.

Recommendations to Increase Accessibility				
Policy and Planning				
	Action	Time Frame	External Partners	Staff Comment
12	Engage in ongoing dialogue with First Nations and Métis, focusing on meeting the needs of Indigenous families/children and supporting high quality and culturally rooted programming.	Medium	Indigenous Communities	<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p> <p>The Mid-Island Region Child Care Action Plan includes dialogue with First Nations and urban Indigenous stakeholders. The work done during the Action Plan will lay a strong foundation for continuing Indigenous engagement with respect to child care. If a Child Care Action Group is established, Staff recommend it include Indigenous representation.</p>

Recommendations to Increase Accessibility				
Regulations and Development Processes				
	Action	Time Frame	External Partners	Staff Comment
13	Consider child care as a desired amenity in return for bonus density, where applicable.	Short/medium/long	None	<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p> <p>This recommendation has been previously discussed within the City of Nanaimo recommendations.</p>
14	Identify and consider changes to municipal processes and regulations to better facilitate creation of new child care spaces. Include a review of fees charged. Where appropriate, changes should align with Island Health.	Short/medium	Island Health, not-profit child care providers	<p>The City of Nanaimo charges a \$50 fee for child care centre licensing. A business licence is only required by for-profit child centres. Additional building permit fees may apply for renovations and constructions where required.</p>

Recommendations to Increase Accessibility

Regulations and Development Processes

	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
15	Put not-for-profit child care applications at the front of the permitting queue, when/if the size of the queue is causing delays in approval.	Ongoing	None	The City of Nanaimo is frequently requested to prioritize building permits for specific groups. Given the high demand for building permits and limited staff, the City would not be able to accommodate this recommendation without impacting permitting times for others and/or hiring additional staff.
16	Join or co-host Island Health child care information meetings for potential child care providers who are interested in opening child care centres to describe the various 'licensing' roles and processes for each jurisdiction.	Short/medium	Island Health	Participation in these meetings will put a demand on staff time. Without knowing the frequency or preparation time required for these meetings it is difficult to determine what impact Staff's participation may have on staff time and resources.
17	Add comprehensive information on all municipal websites regarding child care. This should include information for families seeking child care (e.g. links to the Pacific Care Child Care Resource and Referral and the BC Child Care Map) and particularly, should include zoning, processing, financial and related information for operators wanting to develop a child care facility. Information should align with Island Health where appropriate.	Medium	Not-for-profit child care providers, Island Health	Community Planning, Parks and Recreation and Communications staff will work together and with Island Health to include child care information on the City's website.

Recommendations to Improve Affordability				
#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
1	Create a grant program for not-for-profit child care centres to assist with facility upgrades and maintenance or to offer extended hours.	Short/medium	Not-for-profit providers	The City of Nanaimo does not currently offer a grant program for child care or have one included in the budget. Adding a grant program will require additional costs not currently included within the City's budget.
2	Lease or rent local government-owned facilities or land to not-for-profit child care providers at no cost or below-market rates.	On-going	Not-for-profit providers	The City of Nanaimo currently leases space to the Boys and Girls Club at three separate locations (Beban Park, Chase River and Departure Bay Kin Hut). The City also leases space to a for-profit daycare provider (Kids Club) and the North Island Distance Education program for school-based distance learning opportunities. Leases to child care providers are typically provided at a child and youth rate which is lower than the City's regular lease rate.
3	Reduce application fees for permits.	Short	None	<p>While reducing application fees (such as building permits) will help slightly reduce child care start up costs the reduction will impact revenue. Reducing permit fees may set a precedent for other service businesses or non-profits.</p> <p>The City charges a \$50 fee for child care centre licensing, and only for-profit child centres are required to get a business licence. A business licence is not required for any not-for-profit operation including child care.</p>

Recommendations to Improve Affordability				
#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
4	Advocate to senior governments to reduce the cost of child care and increase compensation for child care facility staff.	Short/medium/long	Senior governments, School district	Council may either individually or in partnership with the other regional partners choose to advocate to the Province and Federal government for reduced child care fees and increased staff compensation, either through UBCM or directly by a letter from Mayor and Council.

Recommendations to Promote and Influence Quality				
#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
1	<p>When and if considering the development of local government-owned child care spaces (as in Recommendation #4 under Accessibility), ensure that:</p> <ul style="list-style-type: none"> Partners are not-for-profit and/or public child care providers Local government policy expectations are met Local/regional governments consider the efficacy of developing facility design guidelines that are based on what research states is best practice for child care (i.e. square footage for indoor and outdoor space that exceed the minimum Provincial Licensing Requirements). 	Short	Not-for-profit providers, school districts	<p>The City of Nanaimo is not currently a child care provider. The City will continue to support the School District and other partners including not-for-profit day care providers in providing child care. The City's support may include providing space (where available) at a reduced child and youth care rate and supporting child care space funding applications.</p>

Recommendations to Promote and Influence Quality				
#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
2	Support the province in its “ <i>Early Care and Learning Recruitment and Retention Strategy</i> ” initiative through joint advocacy.	Short	School districts, Not-for-profit providers	The City may choose to send a letter of support in conjunction with the School District and other child care partners regarding the Province’s child care provider recruitment and retention strategy.
3	Explore the role of providing leadership for more and better-qualified ECE staff and additional training opportunities, such as workshops, online seminars, professional education, etc.	Short	VIU, not-for-profit operators	The training of child care operators is not typically the role of the municipality; however, the City will continue to support ECE and Child and Youth Care (CYC) programs by providing practicum and paid employment for ECE and CYC students.
4	Increase the number of licensed, not-for-profit, publicly funded child care operations, including consideration of strategies to recruit not-for-profit operators to move into the Mid-Island Region.	Long	Province, not-for-profit providers, school districts, Parks, Island Health	<p>Implementing a number of the other recommendations within this report will assist with this action.</p> <p>The City has previously supported the School District’s grant application to open 406 child care spaces at 10 separate schools.</p>

Recommendations to Develop Collaboration and Partnership

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
1	Build supportive, learning relationships with Métis and First Nations. Support Indigenous perspectives and history in child care.	Ongoing	Métis and First Nations	If a Child Care Action Group is developed, it should include Indigenous representation. Supporting child care within the City and on Snuneymuxw reserve lands should be considered wherever possible as part of the City and the Nation's ongoing cooperation.
2	Build a partnership and joint planning protocol with the school districts around child care to: <ul style="list-style-type: none"> • Ensure child care is part of all new school facilities and renovated school spaces where possible; • Facilitate the use of school spaces and grounds for school age care operations, where possible; • Structure regular and ongoing communication between the local governments and School districts; • Support the provincial direction toward an enhanced role for the School districts regarding school age child care; • Explore the use of empty, surplus school spaces for child care (e.g., Rutherford school in Nanaimo); and, • Work with the school districts to ensure that child care providers have access to school facilities during holidays and professional development days. 	Short/medium	School districts, not-for-profit providers	<p>The City recently supported School District 68's application for Provincial funding for 406 spaces within 10 schools.</p> <p>The City is committed to continue working with the School District to support the inclusion of child care spaces within schools.</p>

Recommendations to Develop Collaboration and Partnership

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
3	Work with not-for-profit child care providers on collaborations that support their existing service and potential expansion.	Short/medium/long	Not-for-profit child care providers	The report includes a number of recommendations for how the City can support not-for-profit child providers.
4	Pursue partnership opportunities with employers in the corporate sector to provide spaces for child care facilities that serve their employees' families and community. These could be joint projects with the involvement of several employers and not-for-profit child care providers.	Short/medium/long	Local employers, Chamber of Commerce	If a Child Care Action Group is formed, it would benefit from having representation from the Chamber of Commerce or business community to support coordination and implementation of this recommendation.
5	With Parks departments, community service providers and others, explore the possibilities of providing more after-school activities for 10-12 year olds as the needs of this population are generally not met in licensed child care programs.	Medium/long	Parks (Community Centres), other community facilities such as Boys and Girls Clubs.	While after school activity programs are currently limited due to COVID-19 restrictions, the City has previously provided after school drop-in programming at both City and School District-owned property. Running additional after school programs for this age group may require more funding and resources not currently budgeted.

Recommendations to Develop Collaboration and Partnership

#	Action	Time Frame	External Partners	Staff Comment
				<p>Green represents actions that can be completed with existing resources</p> <p>Red represents actions that will require additional resources</p>
6	<p>Advocate to senior governments to provide support to the child care sector and families in the following areas and other priorities that may arise:</p> <ul style="list-style-type: none"> • Ensuring the needs of Mid-Island children are a priority for new spaces in provincial planning and funding • Recruitment, remuneration and retention of ECEs; • Increased resources to support children with additional needs through Supported Child Development; • Lower fees for families; and, • Funding to support non-traditional hours of care. 	Short/medium	School districts	<p>Council may either individually or in partnership with the other regional partners choose to advocate to the Province and Federal government to support the child care sector, either through UBCM or directly by a letter from Mayor and Council.</p>
7	Continue to support and collaborate with the Early Learning and Child Care Council of Oceanside (ELCCO).	Ongoing	ELCCO	<p>While ELCCO represents the Oceanside area only, they played an important role in participating in the working group and otherwise supporting the development of the Action Plan. If a regional Child Care Action Group is formed it should include strong ELCCO representation.</p>

ATTACHMENT C

Childcare Space Targets Summary

Age Category	2030 Target	Regional - Current Situation	Nanaimo - Current Situation	Nanaimo - Spaces Needed to Meet 2030 Target
0 to 2 years old (infant toddler)	50 spaces per 100 children	9 spaces per 100 children	9 spaces per 100 children	1,205 new spaces
3 to 5.5 years old (pre-school)	75 spaces per 100 children	39 spaces per 100 children	36 spaces per 100 children	1,029 new spaces
5.5 to 10 years old (school aged)	50 per 100 children	24 spaces per 100 children	27 spaces per 100 children	1,176 new spaces
TOTAL				3,410 new spaces

Nanaimo - Childcare Spaces by Neighbourhood

Neighbourhood	# of children 0 to 14 (2016 census)	Total # of childcare spaces	# of spaces per 100 child (all ages)
Chase River/ South End	1,153	273	24
Harewood	1,403	174	13
VIU- University District	1,144	227	20
City Centre/ Old City/ Protection Island	404	272	67
Townsite	604	441	73
Westwood	666	138	21
Newcastle/ Brechin	193	124	64
Northfield	819	424	52
Departure Bay	785	87	11
Linley Valley	480	145	30
Diver Lake	967	152	15
Long Lake	1,114	107	10
Hammond Bay	509	7	Less than 1
North slope	943	147	16
Rutherford/ Pleasant Valley	1,188	220	19
Dover	978	224	23
Total/Average	13,350	3,162	24

ATTACHMENT D

SCHOOL	Current Approved BC Childcare New Spaces Fund	
	Daycare Spaces Outlined in Funding	Before and After School Spaces Outlined in Funding
Bayview		17
Cedar Elementary		20
Chase River	28	44
Fairview		23
Forest Park	28	48
Georgia Ave		18
Ladysmith Primary	28	44
Quarterway		18
Qwam Qwum Stuwixwulh	28	10
Rock City	28	24
Totals	140	266
Total Combined Spaces	406	
SCHOOL	Application 2021 BC Childcare New Spaces Fund - Not Approved	
	Daycare Spaces Outlined in Funding	Before and After School Spaces Outlined in Funding
Cilaire	28	24
Georgia Ave	28	24
Pleasant Valley	28	24
Quarterway		24
Seaview	28	24
Totals	112	120
Total Combined Spaces	232	