Sanism in Early Childhood Education and Care: Cultivating Space for Madness and Mad Educators in ECEC

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Abstract

This article engages with critical questions regarding the exclusion and stigmatization of Early Childhood Educators who experience madness and the presence/absence of madness in early learning settings. Through a Mad Studies analysis, we argue for more critical conversations challenging the pathologization of madness and educators who openly live with mental illness or identify as Mad. Drawing from Langford's (2006, 2007, 2008) work on the "good" ECE, we argue that the Mad ECE is a way of re-imagining ECE identity and the professionalized ideals that regulate ECEs' professional practices and self-presentation at work.

Key words

Acknowledgements

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Sanism in Early Childhood Education and Care: Cultivating Space for Madness and Mad Educators in ECEC

Is there space in Early Childhood Education and Care (ECEC) for Early Childhood Educators (ECEs) who live openly with "mental illness"[i] or who identify as Mad?[ii] Within helping professions, such as social work, education, nursing, and ECEC, mental illness and madness are commonly constructed through medicalized and individualized models that emphasize medical interventions through diagnosis and pharmaceutical treatment by pathologizing individual behaviours (Chapman et al., 2016; Chapman & Withers, 2019; Hosken, 2018). Here, we use both "mental illness" and "madness" to refer to experiences of mental distress and/or mental differences. Recent Canadian research has begun to address the experiences of K–12 teachers who experience high burnout rates and exhausting workplace expectations (Frost et al., 2020; Kassen, 2016); however, little to no Canadian research exists discussing ECEs who live with mental illness or mental distress through Mad Studies frameworks. We situate ourselves within Mad Studies, a field of inquiry that rejects medicalized and scientized ideas of mental difference and distress and seeks forms of relational and social support outside psychiatry (Beresford, 2020; LeFrançois et al., 2013). Most research that does exist pathologizes mental distress or difference by seeing such experiences as always abnormal, undesirable, or only the result of challenging working conditions. These limited understandings of individuals' experiences with madness—a term that moves away from the medicalized terminology of "mental illness"—necessitate a consideration of the larger socio-cultural and political contexts in which such distress occurs (Beresford, 2005).

While we – the authors – use the term "mental illness" often in this article, we acknowledge that ideas of "illness" foster notions of pathology, medicalization, and the subordination of diverse ways of knowing and being (LeFrançois et al., 2013). Such commonly pathologizing interventionist approaches to experiences of mental differences and/or distress individualize structural inequalities – including but also beyond working conditions - that produce mental distress within individuals (Beresford, 2005). Wherever possible, we use the reclaimed terms "Mad" or "madness" when discussing those who have experienced mental distress or difference.[iii] For example, despite conversations about the low respect the field of ECEC receives societally, signalled in part by low wages and stressful working conditions, there is little discussion of ECEs who live openly with mental illness or identify as Mad in their respective workplaces. Further lacking are discussions of the sector-wide demands on the ECE workforce under neoliberal capitalism since "ECEs are significantly more likely than teachers to be involved in precarious work, which is both gendered and racialized" (Abawi, 2021, p. 6).

Importantly, there is also a dearth of conversations regarding the immense pressures placed on educators through highly constraining ideas of who *should* be an educator. A "good" ECE is associated with notions of "natural" caring, nurturance, self-sacrifice, and passivity, ultimately embodying the tenets of white hegemonic femininity (Ailwood, 2007; Langford, 2006, 2007, 2008, cited in Davies, submitted). In an Ontario context, provincial Early Years documents, such as *How Does Learning Happen?*, focus on educators' *capability* and *competence* (Ontario Ministry of Education, 2014)[iv]—criteria that practitioners and care workers who experience madness or who are openly diagnosed with mental illness are often *presumed* to be excluded from (Chapman et al., 2016; Davies, submitted, forthcoming; Poole et al., 2021). As such, it is the presumptions of incompetence of educators who encounter psychiatric care, the unrealistic expectations and emotional regulation expected of ECEs, and the medicalization of feelings and experiences of distress, that need to be challenged.

We write this article as individuals, each with our own histories with and narratives surrounding mental illness and madness—the first author openly identifying as a university faculty within the field of pre-service ECE who experiences chronic mental illnesses. Throughout

this paper, we acknowledge the socio-cultural construction of "mental illness" and "madness"—created through hierarchies of race, gender, sexuality, ability, nationality—that are used to pathologize diverse ways of knowing and being (Foucault, 2003; LeFrançois et al., 2013). We do not deny the *reality* of lived experiences with madness but challenge the socially constructed and contested nature of diagnostic categories and how they are used to control populations (Frances, 2013; Harrington, 2019; Szasz, 1960).

Our intention with this article is to highlight how normative perceptions of educators in ECEC, particularly the "good" educator (Langford, 2007), enforce the expectation that educators will silence their humanity to adhere to unrealistic standards and expectations pertaining to emotional regulation while, simultaneously, pathologizing educators who experience mental illness(es) and distress (see also Davies, submitted, forthcoming). Through our experiences working with young children, it is clear that madness amongst educators is omnipresent in early years learning environments. Despite societal efforts to make children docile, children are unpredictable and curious; thus, working with children or within ECEC widely, especially in the current context of the COVID-19 pandemic, can be quite maddening (Davies, submitted).

In this article, we will address the systemic discrimination and pathologization of Mad ECEs through structures of *sanism* that are perpetuated by both normative images of educators in the field and a lack of societal acknowledgement and recognition for the ECEC sector.[v] By re-imagining who is a "good" educator, the field can begin to address the systemic pathologization of madness and educators who live openly with madness. Consequently, the field of ECEC can then move toward considering madness as an embedded everyday component of ECEC.

Sanism in ECEC

What is Sanism?

Sanism is a widely accepted form of systemic discrimination that targets individuals who have been diagnosed with or who are believed to have a diagnosis related to madness (Armstrong & Brandon, 2020; Large & Ryan, 2012; LeBlanc & Kinsella, 2016; Perlin, 1993). Generally, sanism is the overarching belief that those who identify as or who are labeled "Mad" are dangerous and/or incompetent (Armstrong & Brandon, 2020; Chapman et al., 2016; Large & Ryan, 2012; LeBlanc & Kinsella, 2016;

Perlin, 1993; Poole et al., 2021). A sanist belief system allows governing bodies—including, but not limited to, professional licensing committees and colleges, such as the Ontario College of Early Childhood Educators—to justify the discrimination of those who are labeled "Mad" based on concepts of "public health," "public good," and safety (Chapman et al., 2016; Meerai et al., 2016; Poole et al., 2021).

How are Mad Educators Discriminated against in ECEC?

The basis for discrimination based on madness is embedded in the annual requirement for Registered Early Childhood Educators (RECEs) in Ontario to disclose on their registration forms whether they have been diagnosed with a mental health condition to "practise the profession safely." RECEs who disclose a diagnosis are exposed within their profession and can experience heightened scrutiny related to their mental health from governing bodies.

Instances of such scrutiny have been studied by Chapman et al. (2016) within caring and helping professions. Chapman et al. (2016) and Poole et al. (2021) articulate how in social work and nursing, helping professionals either hide their diagnoses and struggles out of fear they will lose their livelihoods or disclose their diagnoses and struggles and accept workplace consequences based on perceptions of how they might potentially act. These consequences can include suspensions or loss of their professional licenses (Chapman et al., 2016; Poole et al., 2021). ECEs are also subjected to such sanist suspicions and investigations due to their work as carers with the wider public (Davies, submitted).

Sanism, "Competence," and "Incompetence"

Helping and caring professions often mention notions of "competence" as a defining factor of a "good" carer (i.e., a good nurse, social worker, teacher, or early childhood educator) (Chapman et al., 2016; Davies, submitted, forthcoming; Langford, 2007; Ontario Ministry of Education, 2014). Research has shown that concepts of competence, or the absence of competence, are continually linked to mental health diagnoses (Chapman, et al., 2016; Perlin, 1993; Poole et al., 2012). However, as argued by Chapman et al. (2016), the concept of "competence" is often weaponized against individuals diagnosed with mental illness within helping and caring professions, despite evidence that suggests competence

and mental illness are unrelated. Those in helping and caring professions face discrimination not based on their actions and abilities to manage or cope with their experiences of mental illness, but through the judgment of regulatory bodies based on perception of what mental illness *could* become (Chapman et al., 2016). In this sense, mental illness signifies a "not yet" (Titchkosky, 2010), or the potential—for example, for violence or "emotional dysregulation" —that has yet to occur. In this case, for educators who experience mental distress or are diagnosed with mental illness, the "not yet" is reflected in both their inability to be open about their mental difference due to fears of isolation and fears that others will perceive them as potentially dangerous or incompetent in their work (Chapman et al., 2016). Titchkosky (2010) describes how "some people are present as potentially always absent" (para. 25), which can be considered in how mental illness "is not yet imagined as an essential aspect of all of our lives" (para. 26) and certainly not a legitimate or *desirable* component of ECEC.[vi] These judgments based on the possibilities of what a mental illness diagnosis could lead to are unacceptably discriminatory and sanist.

Notably, the sanist concept of mental-illness-related "incompetence" can become internalized by the individual who has been diagnosed with a mental illness, mental difference, or who is experiencing a period of mental distress. This means that being diagnosed with a mental illness can impede self-confidence at work due to internalized self-stigma, whereas experiencing notable mental differences or mental distress in the sense of different forms of social, emotional, cognitive, or executive functioning can mean that society can judge one's behaviours and cognitions as "odd" or "abnormal." Of course, both self-stigma and societal stigma overlap. Armstrong and Brandon (2020) distinguish these concepts as "self-stigma" (internal judgments) and "public stigma" (external judgments). Armstrong and Brandon (2020) suggest that self-stigma occurs when individuals are aware of and agree with stereotypes about themselves and adopt a self-critical attitude. This internalization or self-stigmatization might be reflected in how an individual perceives their professional identity as a "good" ECE (Davies, submitted). There is no mention of madness in current ECEC literature (as far as the authors are aware), or how ideas of madness or mental illness intersect with how a "good" ECE is characterized, both from pre-service perspectives and active professionals (with the exception of Davies's work; see also Davies & Neustifter, 2021).

Sanism, Professionalism, and the "Good" ECE

Colley et al., (2003) describe the *vocational habitus* of different professions whereby individuals are indoctrinated into certain values, attitudes, and beliefs, as well as normative ideas about how one should self-present and behave within their respective workplace (as cited and discussed in Vincent & Braun, 2013). Moreover, these pressures are amplified by the increasing professionalization of ECEC whereby ECEs themselves focus on learning and assessment in their work as a way to potentially gain societal respect and translate caring relations into outcomes (Löfdahl & Folke-Fichtelius, 2015). These pressures can be related back to pre-service training programs in the field of ECEC that emphasize developmental knowledges, ideas of assessment, and quantification over equipping students with knowledge that can assist them with disrupting the status quo and structures of oppression within their everyday work environments, such as Mad Studies and other critical theories (Davies, forthcoming, submitted; Davies & Neustifter, 2021; Snyder et al., 2019).

In Osgood's (2006) writing, "professional identity" is described as an external label of "good" characteristics that are expected to be internalized to suit the environment in which an individual works. As previously noted, for ECEs, this professional identity traditionally includes the characteristics of nurturance, care, self-sacrifice, and passivity (Langford, 2007). However, as ECEC facilities are professionalized, ECEs are also expected to take on highly masculinized characteristics such as "rationality," which indicate the capacity to make "rational" decisions in the workplace (Osgood, 2006; see also Davies & Hoskin, 2021). As Osgood (2006) states, the inclusion of rationality in an ECE's professional identity is for the purpose of measuring "competence" of an ECE. These discourses further lead to the devaluation of care work and femininity within ECEC since "rationality" and professionalization are based in positivist and neoliberal ideas of assessment and standardization, which call for the regulation of emotions in the workplace (Davies & Hoskin, forthcoming).

Accreditation by regulatory bodies and assessments by these regulatory bodies require ECEs to take accountability for and justify their professional choices based on developmentalist ideologies (see Johnston, 2019). These notions of being "professional" are therefore directly linked to a sanist concept of "competence" in the ECEC workplace and developmental psychology (Davies, submitted). Since regulatory bodies maintain control

over who is considered "competent" in ECEC (Ontario Ministry of Education, 2014), ECEs are expected to internalize and identify with the "good" and therefore "competent" ECE ideal. This pre-determined and fixed identity excludes madness and may lead to the self-stigmatization of one's own Mad identity or experiences with madness and mental difference that conflict with notions of what a "good" ECE is.

Much of this discrimination of Mad educators and the standardization and professionalization processes that regulate ECEs can be attributed to neoliberalism as both an economic and social structure (Davies, submitted; Osgood, 2006). Neoliberalism—an economic and social focus on the individual, notions of personal responsibility, and privatization (Harvey, 2007)—is embedded within ideas of "good" educators being those who take responsibility for their health and well-being by internalizing their emotions, feelings, and mental distress. Involved is the demand for emotional labour (Hochschild, 1983) from educators as they regulate their feelings, emotions, and mental distress to perform the work of care, nurturance, and ultimately, happiness (Langford, 2007; Monrad, 2017; Zhang et al., 2020).

How Is Sanism Embedded in Normative Ideas of Educators in ECEC?

Since happiness and madness are societally considered antithetical to one another, and educators are still steeped and trained in values connected to white hegemonic femininity and caring as "natural" processes, madness is perceived as disruptive to normative ECE identification (Davies, submitted). As well, the neoliberal demand for evaluating educators' performance against set criteria through assessments in the early years reinforces masculinist and standardized values (Davies & Hoskin, 2021, forthcoming; Johnston, 2019; Langford, 2006, 2007). These conformist values place ECEs in a double bind whereby professional care for children is predominately valued by meeting external assessment and curricular expectations to ensure developmental milestones, while caring for children naturally, being responsive to their needs, and cultivating their lively curiosity without formal program planning is conceptualized as "unprofessional" (Campbell-Barr, 2019; Davies, forthcoming; Davies & Hoskin, 2021, forthcoming; Johnston, 2019).

Normative societal depictions of ECEs are associated with ideas of mothering and nurturance that commonly lead ECEs to portray themselves as "caring," "compassionate,"

and "nurturing" (Atkin, 2001; Monrad, 2017). For example, Langford's (2007) study of pre-service Early Childhood Education students' explored how ideas of the "good" ECE were constructed through notions of inner passion, alertness to children's needs, and the disavowal of one's own needs or ideas of neediness. ECEs are societally encouraged to deny their own needs or to not care for themselves in order to present themselves as attentive and caring for children in their care (Cumming et al., 2020; Langford, 2006, 2007). This issue is particularly salient in the context of COVID-19 whereby ECEs are relied upon to maintain the functioning of the economy by providing childcare, yet their own well-being and health is given little regard (Timmons et al., 2021). In the Ontario context, the provincial response to the early years sector, including during COVID-19, provides an example of the vastly under-supported working conditions many early years professionals are forced to work within—there was little government provision of N-95 masks, poor ventilation systems in workplaces, and no provincial–federal childcare agreement until March 2022 (Child Care Now, 2022).

The assumption that ECEs receive intrinsic affirmation from their work or that all educators are naturally caring (Kwon et al., 2021) does not excuse inadequate acknowledgement of or compensation for their work. It is important to provide ECEs with better working conditions to maintain the overall well-being of those who work in childcare centres on a day-to-day basis (Kwon et al., 2021) while also carving out space for educators to embody and express themselves outside of hegemonic ideas of positive affect and constant emotional nurturance. As well, while it is necessary to address the inequities created during COVID-19, it is crucial to note that these under-supported working conditions and the low societal respect for ECEC existed before the global pandemic and need to be addressed both within and outside of the context of COVID-19 (Eadie et al., 2021). We believe this work starts with addressing the sanism that is widespread within ECEC and society widely.

Sanism is embedded within discourses associated with ECEs that are gender essentialist and assume women hold forms of innate caring, kindness, and "motherly" care (Ailwood, 2007; Davies, submitted). These ideas propagate notions that educators should be always able to regulate any feelings of emotional distress that they might experience, internalize their feelings by hiding them within themselves, and maintain children's care as their only priority through the disregard of their own

needs. For Mad ECEs who already experience mental distress, the emotional labour involved in regulating their own feelings without any structural supports for their well-being can result in additional barriers to presenting as "competent" in their day-to-day work (Cumming & Wong, 2019; Zhang et al., 2020). Furthermore, this lack of support can potentially create work environments whereby Mad ECEs experiencing mental distress might feel uncomfortable expressing their wellness needs (Corr et al., 2017; Kwon et al., 2021).

Sanism operates by both encouraging ECEs to continually present as happy, self-regulated, and confident while simultaneously forwarding ideas that Mad educators *cannot* present as happy, confident, or regulate their emotional states—if desired. Importantly, the demand for *authentic* emotional engagement and *authenticity* in interactions with children—embedded within Ontario Ministry of Education pedagogical documents such as *How Does Learning Happen?* (Ontario Ministry of Education, 2014)—communicates the expectation that educators are to emphasize authenticity in their interactions with children while simultaneously regulating their own feelings and sensations, particularly if they are deemed negative (Boyer et al., 2013; Vincent & Braun, 2013). In this sense, emotional labour and ECE identity are intricately linked (Monrad, 2017). This means that ECEs must enact emotional self-management to abide by the described outdated romanticized notions of both educators and children that forward innocence, purity, and joy as the ideal states (Davies & Neustifter, 2021; Davies et al., 2021; Davies, submitted; Monrad, 2017; Zhang et al., 2020).

Re-Thinking the "Good" Educator in ECEC

Considering the Mad Educator

It is crucial to acknowledge how powerful norms that encourage emotional regulation can lead to forms of sanism that are internalized by the educators themselves, or that can result in self-stigmatization (Armstrong & Brandon, 2020). Considering that the societal pathologization of madness is widespread, employees with experiences of psychiatric care or diagnoses might experience internal conflict regarding their ability to be a professional, even if they do not share their own experiences of mental distress or

Madness with others at their workplace (Armstrong & Brandon, 2020). Language is powerful in shaping everyday ideas about identity (Butler, 1990; Foucault, 1977) and, as noted, Ontario ECEC curricula (Ontario Ministry of Education, 2014) focuses on ideas of "capability" and "competence," which are discursively linked to narratives of compulsory sound-mindedness (Chapman, 2013). Chapman (2013) defines *compulsory sound-mindedness* as a "force that morally denigrates, pathologizes, and discourages diverse experiences that fall outside of contentment, alongside those that fall outside of reason and the parameters of liberal individualism" (p. 183).

Compulsory sound-mindedness as a form of sanist oppression enacts a specific kind of violence within the ECEC field— especially considering that ECEC is predominately composed of cisgender women (Atkin, 2001; Halfon & Langford, 2015), a demographic who have historically and continue to be pathologized through patriarchal violence within and outside of the field of psychiatry (Ussher, 2006, 2011). Prominent historical figures in the foundation of ECEC, such as Froebel, theorized ECEs and childcare teachers as holding a motherly consciousness that needed to be trained to ensure "good" motherhood that would both emphasize "motherly" qualities in ECEs and ensure the "healthy" development of children in ECEs' care (Ailwood, 2007). Moreover, the emphasis on "good mothering" in association with ideas of white femininity were translated through pre-service training programs to future childcare workers in the early twentieth century as infant and child health concerns became associated with eugenics practices (Atkin, 2001; Kelly et al., 2021; Swift, 1995). These ideas still percolate in pre-service training in ECEC in current times (Davies, submitted; Davies, 2021). As described by Ailwood (2007), "motherhood" therefore becomes a regulatory mechanism in ECEC whereby educators who are not cisgender women, who do not perform the "appropriate" amount of care or are deemed not conforming to dominant norms for ECEs, are othered and deemed potentially unsuitable for the field (Davies, 2021, submitted). In ECEC, compulsory sound-mindedness places gendered expectations on ECEs to continually be "strong" and "capable" mother figures who provide the appropriate care and nurturance for children through assuming responsibility for their development (Ailwood, 2007; Swift, 1995).

Incorporating Madness into ECEC

Individuals who have experiences with psychiatric care and mental illness diagnoses deserve spaces where they can share their experiences—if desired—and challenge the status quo in terms of dominant knowledge formations within the field of ECEC that continue to forward the oppression and subjugation of Mad people (Davies, submitted, forthcoming). Madness and experiences of emotional distress are presented as incompatible with being a "good educator," "good mother," or helping professional (Chapman et al., 2016; Davies, submitted, forthcoming; Douglas et al., 2021; Swift, 1995). We suggest that this binary be dismantled and ask what madness could offer the field of ECEC and how it could be beneficial for the profession to see madness as an everyday component of working with children. Mad Studies (LeFrançois et al., 2013) critiques developmentalist and psychological logics that focus on therapeutic treatment and pharmaceutical interventions—particularly for children—by illustrating how developmental and interventionist knowledges aim to normalize and regulate children instead of promoting mental diversity (LeFrançois, 2020). As described by Mills & LeFrançois (2018), developmentalism—in its various logics, whether within child psychology, international development, or political studies—is about paternalism and the enforcement of control and regulation upon bodies. Mad people continue to experience paternalistic control of their bodies and personhood—one does not need to look further than the recent custody battle involving the famous pop singer Britney Spears to understand how mental illness is weaponized against people to justify the loss of their autonomy (Schwiegershausen, 2021). Whether one identifies as Mad, or not, is not the focus—people can identify with their own experiences of madness in various ways (Beresford, 2020; Spandler & Poursanidou, 2019).

Mad Studies provide a framework for students and practitioners to critique the common logics of the pharmaceutical industries and how developmental ideas are used to promote the regulation of people deemed Mad (Davies, submitted; LeFrançois, 2020; Snyder et al., 2019). For example, "early intervention" is an embedded conversation within ECEC and while it is important that children with physical, cognitive, emotional, and/or behavioural differences be in supportive environments to encourage their inclusion, the psychiatrization of young children through intervention is accompanied with pharmaceutical interventions based on unfounded ideas of biochemical differences (LeFrançois, 2020).

Langford (2006, 2007, 2008) notes how pre-service early childhood education students often associate the image of the "good ECE" with one who has extensive knowledge of children's development and whose responsiveness and attentiveness impacts the neurological development of children's brains. Langford articulates this focus on developmentalism by writing that

> a teacher's responsibility to make a difference has historically broadened and thus intensified from the emotional and social development of the individual child to include the inner development of the brain—the wiring of the neurons and the sculpting of excess connection (Langford, 2008, p. 85).

Thus, sanism is enacted in ECEC through the forms of knowledges that dominate the field (Davies, submitted). The predominance of developmentalism in ECEC practice, curricula, and training is intricately connected to the reinforcement of normative and hegemonic ways of knowing and being and the limiting of practitioners' possibilities for imagining children and professional practice differently (Davies et al., 2021; Zaman & Anderson-Nathe, 2021).

We explicitly critique the focus on developmentalism in pre-service ECEC and consider developmentalism as intricately connected to the exclusion of madness and Mad ECEs and the continual linkage between ideas of children's future and cognitions and the emotional labour and regulation involved in being an ECE (Davies, submitted, forthcoming). For example, Delgado et al. (2020) describe how the connection between developmentalism and being a "good" ECE reduce ECEC pedagogy to developmental outcomes and standards that constrain both educator and children's subjectivities. The continued predominance of developmental psychology in ECEC as the standard knowledge foundation has been critiqued numerous times over the last half-century (Johnston et al., 2020)—including Valerie Walkerdine's (1984, 1993) work in the 1980s and 1990s critiquing child-centred approaches and by many ECEC scholars who identify as reconceptualists (e.g., Delgado et al., 2020)—yet, developmental knowledges still remain the dominant form of "applied" knowledge in the field and pre-service training (Davies, submitted, forthcoming). How can turning to the Mad Educator— similar to Johnston's (2019) figure of the "(not) good educator"— provide a reconceptualization of the normative image of the educator in ECEC?

Historically and currently, madness has been socio-culturally constructed through ideas of "sickness" and "badness," whereby madness is seen as either an intentional individual failure to perform socially sanctioned behaviours or a sickness and medical condition that requires medical intervention (Foucault, 2003; Gomory & Dunleavy, 2017). Whomever the "good" ECE is, they are not able to openly identify as Mad (Davies, submitted). This image of the "bad mad" ECE is considered antithetical to the highly romanticized version of the motherly and caring white cisgender female educator that has been forwarded by ideas of early years settings being a "replacement home" (Atkin, 2001; Varga, 1997). Thus, the "bad mad" ECE is the educator who is unable to regulate their feelings of emotional distress to reproduce such positive feelings, or who is potentially seen as "manic" or dangerous even—notions that have been associated with women who experience mental distress or are seen as potentially mad (Ussher, 2006, 2011).

Ironically, performing the "good" ECE role can encourage ECEs to engage in the same harmful self-sacrifice, including ignoring their own health needs (Cumming et al., 2020; Langford, 2007; Kwon et al., 2021). Since self-sacrifice through care (i.e., being selfless and denying one's own needs for the care of others) is often associated with being "naturally" feminine and possessing "womanly" traits through gender essentialist tropes, both students in pre-service ECEC programs, as well as educators in the field, might see this as a necessity for their job (Davies, submitted; Vincent & Braun, 2013). There might easily be a societal stigma that, perhaps, educators who experience mental distress are unable to care for children or prioritize their needs due to struggles with mental illness. Therefore, the "bad mad" ECE is a moral and personal failure within neoliberal ideas of ECE subjectivity—one who is both morally unable to live up to the image of the "good ECE" and is also a personal failure at their job. This kind of sanist stigmatization further perpetuates the erasure of discussions of mental health and illness and the notion that being a "good" ECE is inherently incompatible with experiencing any mental distress.

Sanism is a form of othering that marks people through not only societal stigmatization, surveillance, and ideas that individuals with mental illness are dangerous—it is a prejudice that promotes exclusion, shame, and the separation of individuals with mental illness (Large & Ryan, 2012). Sanism targets populations that are already societally constructed as dangerous, such as Black and Indigenous communities and results in the over-diagnosis of such societally subjugated populations with higher rates of mental illness (Meerai et al., 2016). As such, the "bad mad" ECE is not a racially neutral construct and more likely intersects with anti-Black racism and colonial forms of violence against racialized populations. Moreover, it is necessary to note that individuals are more likely able to identify with their experiences of mental distress openly if they are white due to white privilege and colonial racial hierarchies (Meerai et al., 2016, as cited in Poole et al., 2021). This has implications and considerations due to the highly gendered and racialized nature of care work (Abawi, 2021).

Rethinking Current Norms

What would it mean to consider the "bad mad" educator—or the (not) good educator (Johnston, 2019)—as beginning places for rethinking the current norms that regulate and police ECEs and reinforce unrealistic expectations on an already under-appreciated and under-supported workforce? We propose that addressing sanism within professionalized expectations of ECEs also necessitates reconceptualizing the figure of the ECE (Langford, 2006, 2007, 2008; Moss, 2006). This reconceptualization might consider madness as an everyday component of daily life and involve moving away from the taken-for-granted through an "audacious step into the unknown" (LeFrançois et al., 2013, p. 11). Such a step is away from what Johnston (2019) terms "the educator-as-technician" who is "reduced to checklists, predetermined developmental outcomes, and curriculum that is not necessarily responsive to specific local contexts" (p. 45; see also Delgado et al., 2020; Moss, 2006). This step into the unknown (LeFrançois et al., 2013) and movement away from reducing educators to neoliberal ideas of assessment, checklists, development, and outcomes might seem "mad" to some. However, perhaps the "bad mad" educator can offer some new directions in ECEC through a Mad Studies perspective, which can always keep us questioning the taken-for-granted and everyday assumptions we might hold about who belongs or *should* be an educator (Davies, submitted; Delgado et al., 2020; Snyder et al., 2019).

Conclusion

We propose that Mad Studies provides important contributions to ECEC as "a project of inquiry, knowledge production, and political action devoted to the critique and transcendence of psy-centred ways of thinking, behaving, relating, and being" (LeFrancois et al., 2013, p. 13). The systemic exclusion and pathologization of ECEs with mental illness through structures of sanism is evident and reinforced through popular notions of what it means to be a "good" educator (Davies, submitted). Such harmful values that percolate within the field encourage ECEs with mental distress to silence their lived experiences while further forwarding forms of self-stigma and stigmatization within workplace environments. Within an already under-valued, over-worked, and under-paid sector, this is unacceptable. It is important that adequate societal recognition for ECEs is provided alongside a deconstruction of exclusionary sanist norms for professionalism that reify outdated ideals for care and nurturance in the field. We propose that in re-defining what constitutes a "good" educator and by explicitly centralizing madness in ECEC, we can actively work to both destigmatize madness and challenge the notion of which educator "differences" are considered acceptable (Davies, submitted, forthcoming; Langford, 2007).

Considering the Mad Educator in ECEC might reconceptualize identificatory norms for ECEs. Johnston (2019) describes how "the (not) good educator is one who resists the dominant discourses of developmentalism and neoliberalism that shape their identity as a technician" (p. 46). The Mad Educator resists the normalizing gaze of developmentalism and neoliberal ideas of accountability and assessment to step into the unknown (LeFrançois et al., 2013). The Mad Educator dismantles and disrupts the hegemonic norms that regulate and police ECEs through ideas of professionalism and standardization by "redefining what 'good' means and who a 'good' educator is" (Johnston, 2019, p. 46-47). Despite the ECEC field considering the Mad Educator a "not-yet" (Titchkosky, 2010)—or even potentially, a "not ever"—madness is a *necessary* starting point for thinking of new ways of imagining ECEC and the "madness" of working within ECEC in current neoliberal times.

Endnotes

i) We put quotation marks around "mental illness" the first time we use it to illustrate how it is socially constructed and produced through biomedical knowledges and socio-cultural inequalities and to challenge any biomedicalization of the term. Throughout the rest of the paper, we do not put quotation marks around the term but wish to start our paper by situating ourselves within Mad Studies and scholarship that challenges positivist and medicalized ideas of mental distress and/or difference.

ii) Throughout this paper, we use "Mad" to indicate identification with mental difference in order to reclaim "the language of madness to challenge the contemporary medical monopoly on the labeling and description of unusual mental states" (Schrader et al., 2013, p. 62).

iii) We do not neatly distinguish between "mental illness" and "madness" in this article; however, it is important to note that since the evolution of modern science and Enlightenment (17th–18th century) philosophy, behaviours, thoughts, feelings, and sensations deemed irregular or abnormal have been medicalized and deemed mad (Foucault, 1977, 2003). As such, madness can be a socio-cultural frame for analyzing the pathologization and marking of such behaviours, thoughts, feelings, and sensations and interventions or forms of medical "treatment" and "care" (Gomory & Dunleavy, 2017).

iv) We would like to thank Agnieszka Wozniak-Molnar, RECE, PhD for this thoughtful observation.

v) By articulating this point, we do not present mental "illness" or madness as a "negative outcome" of under-supported working conditions—or merely this—as we consider madness a different way of viewing the world, a unique perspective and knowledge framework, and not incompatible with being a "good" educator. We acknowledge the lack of support for the ECEC sector as an important discussion while not presenting madness as only a negative outcome of under-supported work. This argumentation can lead to lines of thinking that madness is undesirable and thus always needs to be ameliorated through psychiatric or psychological intervention or enhanced working conditions. We see madness as something that is desirable in ECEC while also advocating for better working conditions for ECEs. We believe a focus on the social conditions that produce mental distress without an explicit critique of the psy-disciplines (psychology and psychiatry) can reinforce ideas of biologization of mental illness. (Beresford, 2005) We contend that mental illness should be considered a social construct in itself but acknowledge the reality and impact of experiences and feelings of mental distress (Voronka, 2022).

vi) Titchkosky (2010) describes this argument in the context of bureaucratic constructions of disability, which seek to produce disability as a "not-yet" temporally in terms of bureaucratic forms of exclusion that are normalized within educational institutions. We feel this argument also applies to bureaucratic and administrative ideas of madness and mental illness, which seek to exclude madness and Mad people due to fears of what they could *become.* Therefore, our argument draws on the temporal nature of Titchkosky's work but argues that madness is excluded through what it is imagined to be in the future.

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