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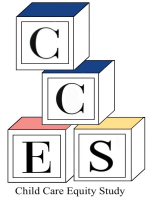
Advancing a More Just and Humane Society

# Child Care Providers Respond to the COVID-19 Pandemic: Adapting Caregiving Practices and Managing Financial Uncertainty

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## Child Care Providers Responding to COVID-19



- Interview study with child care program directors/owners that explores the implications of the pandemic in two regions of Illinois.
  - Focuses on:
    - Director/owner decision-making about opening/closing/reopening
    - Experiences with govt programs/emergency assistance
    - How financial and operational practices have been affected
- 
- Generous support from the Robert Wood Johnson Foundation (*PIs: Henly, Alexander*)
  - Child Care Resource Service, Urbana-Champaign (B. Eastham, R. Hughes);
  - IAFC and UC research assistants (L. Lara, V. Luna, M. Stoll, K. Gehring, F. Shokry, J. Lewittes, N. Mtanous, S. Colt, S. Feinstein, AM Jones, A. Zindl, S. Steinmetz)



## Outline for today

- Problems facing CC-EE field prior to pandemic
- Concerns about pandemic exacerbating challenges of this already fragile system
- Illinois response to pandemic, in terms of public health directives; government supports for CC-EE system
- Current study, Preliminary findings
- Concluding thoughts



## Prior to Pandemic

### Problems facing child care and early education prior to pandemic

- For families

- unevenness in quality
- high costs
- inequities in access

(Vandell & Wolfe, 2000; Child Care Aware, 2019; Laughlin, 2013; Henly & Adams, 2018)

- For providers; program directors/owners

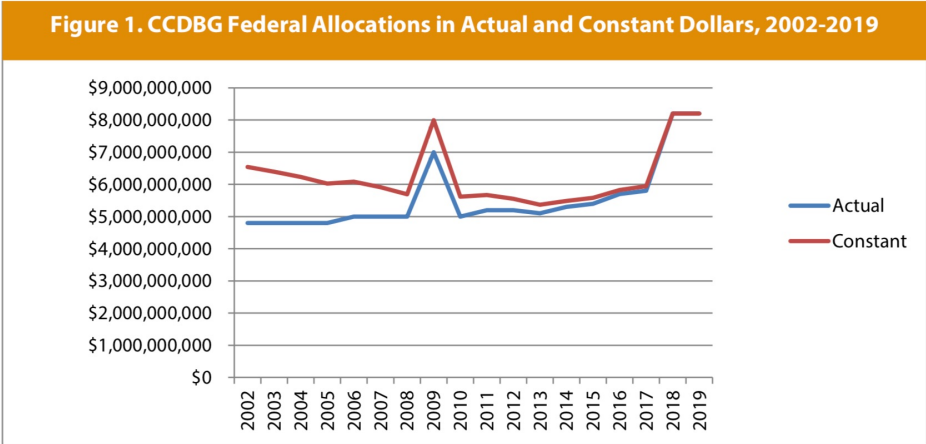
- low wages, limited benefits, high turnover
- small profit margins

(BLS, 2021; Whitebook, 2018; Grunewald et al., 2020; Workman & Jessen-Howard, 2018)



# Prior to Pandemic

- Policy conundrum prior to pandemic:
  - How to build an affordable, high-quality cc-ee infrastructure that serves as a work support to parents, a developmental investment for children, and high quality, stable employment for providers?





# Context of COVID-19

Pandemic exacerbates challenges of already fragile CC-EE system

- Several small scale studies conducted since March 2020
- Timing matters a lot in interpretation of results



# Context of COVID-19

## Pandemic exacerbates challenges of already fragile CC-EE system (cont)

<p><b>Job Loss, Unemployment</b></p>	<p><u>BLS</u> estimates child care sector lost 170,000 jobs in 2020 and as of Dec 2020, child care workforce shrunk 17% compared to before the pandemic. (See Adams et al, 2021; Tout, 2021)</p>
<p><b>Program Closures</b></p>	<p>Not as severe as expected based on early estimates (NAEY 2020) Centers more likely to close than homes</p> <ul style="list-style-type: none"> <li>• Illinois July 2020 – March 2021: Centers -2.6%, Homes +1.5%</li> </ul>
<p><b>Increased Program Costs</b> up by 47% centers; 70% homes (CAP)</p>	<ol style="list-style-type: none"> <li>1. Reduced Capacity, <b>Enrollment Declines</b> → Lost revenue</li> <li>2. Increased Personnel Costs</li> <li>3. Increased Supply Costs</li> </ol> <p>(Workman &amp; Jessen-Howard, 2018)</p>



## IL CCAP Enrollment 2/20-3/21

Type of Care	Children	
Total	-23%	-28,837
Center (Lic & LE)	-29%	-18,984
Licensed Home	-16%	-5,718
Non-relative FFN	-23%	-1,523
Relative FFN	-15%	-3,051

Enrollment declines lowest in licensed FCC and relative FFN. Other studies suggest this as well





## Pandemic exacerbates challenges of already fragile CC-EE system (cont)

<b>Supply access</b>	Difficulties getting PPE; Sanitation supplies
<b>Poor communication</b>	Uncertainty about rules and guidelines; awareness about qualification for available supports
<b>Provider health and wellbeing</b>	Food and financial insecurity Stress, depressive symptoms, anxiety Personal health risks, disproportionately affecting BIPOC child care workforce
<b>Service quality</b>	Declining service quality, children's wellbeing

(NAEYC, 2020; Doocy et al., 2020; Parr et al., 2020; Home Grown Childcare, 2020; Gilliam et al., 2020; Daro & Gallagher, 2020; Markowitz et al., 2020; Bassok et al, 2020; Patrick et al., 2020; Johnson et al, 2020; Tout, 2021)



- Key supports through federal stimulus and state funding efforts to child care and early education sector



# Federal COVID-19 Stimulus Funding CC-EE

- Pandemic stimulus funding and child care
  - CARES Act \$3.5 billion CCDBG; \$750 million for Head Start
  - December 2020 COVID Relief Package included \$10 billion emergency CCDBG funds
  - American Rescue Plan of 2021 \$15 billion for CCDBG and \$24 billion to stabilize child care sector; 1 billion for Head Start



<b>March 21, 2020 SAHO closed all child care centers and homes</b>	Emergency child care homes and centers to operate to care for children of essential workers. By end May, all providers permitted to resume operation in compliance with DCFS “emergency rules” related to proper sanitation, PPE, social distancing, etc. 30% capacity permitted.
<b>CCAP Attendance Waiver</b>	All CCAP payments continued, regardless of child attendance(til July)
<b>Emergency child care stipend</b>	one-time stipend (\$750-\$3000) to defray costs for open programs serving essential workers
<b>Child Care Restoration Grant (through federal stimulus)</b>	2 rounds (Jul-Aug 2020; Jan-Mar 2021) Grant to programs with reduced capacity. Must show business interruption to revenue due to licensing guidelines.
<b>Paycheck Protection Program, PPP (through federal stimulus)</b>	Loan is forgivable if 75% spent on payroll and employees are retained



# Our Study Research Questions

1. How have child care programs made decisions about staying open or closing (or reopening after closure) during the pandemic? Do they have access to necessary information to make informed decisions?
2. Do child care center directors and family child care providers know about the emergency assistance available, are they accessing it, and what are the barriers to access they are experiencing?
3. We expect financial and operational challenges to be great. How are program owners/directors responding to the COVID-19 pandemic, both from an operational and a financial point of view? What kinds of changes have they made to the care they provide (if still open)? How are families, staff, and children responding to these changes?
4. How have programs experienced the pandemic over time, especially since the Stay-at-Home order was issued in March 2020? What are their plans moving forward?



# Sample

- Two Regions in Illinois
  - Cook County (Service District Area 6) and Downstate (SDA 10, a 6 county region including Urbana-Champaign)
- Sample N=76 Directors/Owners of child care programs
  - 50 Cook County (25 centers, 25 FCC homes)
  - 26 Downstate (14 centers, 12 FCC homes)
  - Stratified by cc type & whether opened or closed during SAHO
  - The sample is diverse in terms of its geography, size, quality-rating, CCAP-reliance, and for-profit/not-for-profit status



# Sample

## Sample characteristics

	<b>Cook County</b>		<b>Downstate</b>	
	Centers 25/50%	Homes 25/50%	Centers 14/54%	Homes 12/46%
<b>Closed after SAHO</b>	14	15	8	2
<b>Open during SAHO</b>	11	10	6	10
<b>High CCAP</b>	15	19	3	8
<b>Low CCAP</b>	10	6	11	4
<b>For Profit</b>	13	25	4	12
<b>Not for Profit</b>	12	0	10	0



# Data Collection

- Data
  - Brief Qualtrics survey, basic demographic and program info
  - Qualitative Interviews (English and Spanish)
  - Post-interview memo from interviewer
- ~60 minutes, Zoom, transcribed and to-be-coded in Dedoose
  - Fielded Sept 20 to April 21
  - Recently out of field and started coding interviews
- “Analyses” today are very preliminary; not really findings but hunches from data





# Preliminary Themes

- Financial pressures
- Responses to financial pressures
- Adapting to public health measures
- Changes to curriculum and programming



# Financial Pressures

- We expected financial pressures to be great due to preexisting fragility, steep enrollment drops, and increased costs
  - Some variation, but many describe current financial situation to be worse than before, and many describe as very difficult



# Financial Pressures

- New costs (related to public health/safety, personnel)

*New Costs: “So I think the biggest struggle right now is that um, we do need additional funding because we need additional staff. ...more staff is needed to run a program than before. So before COVID we could combine classrooms or share teachers and things like that we cannot do any longer. And so it's going to cost us more money because we need more staff...There's not much efficiency now, to how we can do things. And so more funding to cover staff roles that could be shared before but cannot be shared now.” (C206.1)*

*“I wouldn't be spending the money I'm spending on PPE if COVID didn't hit us.” (C121.1)*

*“...instead of having parents bring in everything, we're buying lunch for all our school...We purchased blankets for all our children so we don't have to have blankets in and out.” (C201.1)*



# Financial Pressures

- Revenue down due to limited enrollment (almost everyone)

*“But, I’m down very, very low right now. I mean when I say low, I mean like 14 kids, so and I still have the same staff and I’m still paying them the same salary and the mortgage so hopefully we’ll get the second (Child Care Restoration Grant), because that will carry me through until they pick back up, I’m hoping.” (C121.1)*

“Parents haven’t gone back to work, some are still at home drawing unemployment, some is nervous now that COVID has went up, some have a sibling that’s out of school, the older ones, their home so they are babysitting the young siblings and that way, they don’t have to, uh the parents don’t have to pay out of their pocket or pay a copay or whatever the case may be.”



# Responses to Financial Pressures

- Government Supports

*“If it weren’t for the grant, we would not be—we would be losing a lot more than—we wouldn’t have enough to cover the salaries to tell you the truth. Right now, the restoration grant is helping us support salaries and to pay the rent.”*

- Most of the interviews I have looked at thus far, report having received at least some govt assistance and report that business could not have survived without it.
- Many report the process of applying for government assistance was relatively easy and the communication from the state ok (even good), especially in comparison to past experience.
- But definitely variation in experiences (frustration with waiting; no response; confusing applications); we will try to understand that variation in the analysis moving forward.



# Responses to Financial Pressures

- Using savings/personal income to stay afloat

Paying personally: *“The owner pretty much paid for everything out of her own pocket....Um like she was buying masks for the kids and the parents to put on when you come in. The gloves, sanitation, I mean the hand sanitation and things like that. Like pretty much all the PPE gear.”* RC110.1

- Donated supplies, including from nonprofits, foundations, individuals, parents relatively common
- Taking in new kids, e.g., kids of essential workers; older CPS children



# Adapting to public health measures

- Providers have a lot to say about how they are adapting to public health measures
    - Access to PPE/Sanitation (ordering bulk; relying on parents; etc)
    - Training self and staff (importance of web-based information about pandemic requirements)
    - New procedures for parents (especially drop off/pick up; also changes to meal administration and blankets; emailing parents)
    - New policies and practices in the classroom (social distancing, mask wearing, hand washing, sanitizing, less touching)
- Changes can affect programming and curriculum (next page)



# Adapting to public health measures

- Cleaning practices change availability of activities/toys

*P: Umm, my sanitation practices have definitely changed.... I sanitize twice a day now, and I don't bring all those toys out at one time. So, I just rotate the toys out and sanitize twice a day. (F507.1)*

- Having to give up activities, like field trips

*"We've cancelled all our field trips because of the COVID, we canceled all of us birthday parties, we canceled...everything we normally used to do..because of social distance we don't do it any longer. Taffy Apple sales, none of that. Kids can't go to the pumpkin farm anymore. I mean, it's been a hardship on all of us, including the children." C121.1*





# Changes to programming/curriculum

Many examples of how programming and curriculum have changed. Focus here on School-aged E-learning and Remote programming, which both came up a lot.

- E-Learning, Extending care to school-aged kids and helping with school
  - ”Right now we’re trying to help some of them, um, our parent with the e-learning. We have some e-learning students. So that’s very time consuming. So we’re trying to help them so they can go to work. (C121.1)*
    - Extra costs (purchased chargers; update internet)
    - New expectations (parents want homework done by end of day)
    - Interrupts programming and younger kids needs



# Changes to programming/curriculum

- Remote learning, sending curriculum home with families when closed or when kids aren't attending

*AZ: are you still continuing to do remote engagement with families who aren't attending?*

*P: We are. So we're doing remote learning. Families are able to log on to Zoom classroom activities and participate that way. We also utilize Ready Rosie. Um, so it's a tool that has some e learning options that parents can use pretty easily with children at home. We use that as well within our programming. (C609.1)*

*"Yeah. [I do remote learning] A few of them over phone. I would call and we would Face Time and sing and stuff. But I feel like the parents kind of got annoyed with that, so I was like "okay". ...before they left I made them some little packets with flash cards and all the things that we do during circle time was sent home with them. So Hopefully they did that with them. Yeah." (F515.1)*



## Conclusion

- A lot more to do!
  - Complete coding/analysis
  - Homes vs Centers; other comparisons (CCAP/priv pay)
  - Teasing out timing (our interviews went Sept 20 to April 21; a lot changed during that time)
- Hope to do a second interview with homes and add a FFN sample (writing that grant proposal now)



# Conclusion

- Pandemic draws renewed attention to the critical role of child care for a healthy economy, and for gender and racial equity.
- It underscores financial fragility of the cc-ee system as it has created enormous pressure on the low-wage child care workforce and the poorly resourced child care infrastructure more broadly.
- Return to policy conundrum we started with:
  - How to build an affordable, high-quality cc-ee infrastructure that serves as a work support to parents, a developmental investment for children, and high quality, stable employment for providers?



# Conclusion

- COVID might be policy window for more substantial public investment
  - Infusion of funds even before COVID, and more with stimulus.
  - Will any of these investments be made permanent?
  - Research during pandemic might help move that agenda forward.
    - Providing empirical work to demonstrate need
    - but also to help determine appropriate direction for new investments to take.



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