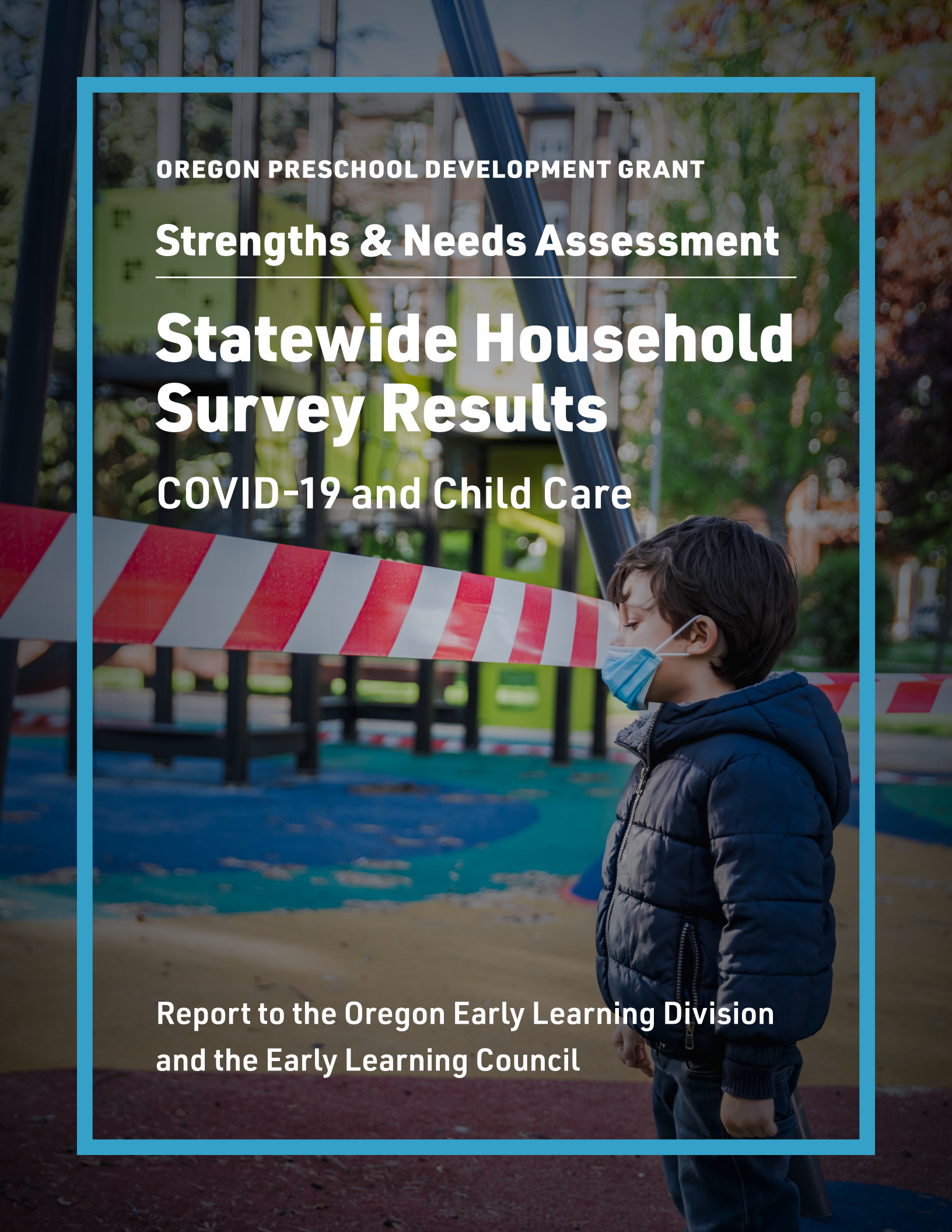

OREGON PRESCHOOL DEVELOPMENT GRANT

Strengths & Needs Assessment

Statewide Household Survey Results

COVID-19 and Child Care

Report to the Oregon Early Learning Division and the Early Learning Council

Acknowledgements

We are grateful for the input and advice shared with us by our partners at the Early Learning Division.

Our deepest appreciation to the families who participated in the 2020 Household Survey and to the members of Oregon's early learning community who passed on information about the survey to families throughout the state: the Early Learning Hubs, Child Care Resource and Referral Networks, Head Start/OPK program directors and staff, Preschool Promise directors and staff, and all of the other child care programs and providers who helped support this project.

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Introduction

Project Overview

The State of Oregon Early Learning Division (ELD) received a one-year planning Preschool Development Grant Birth through 5 (PDG B-5) from the Administration for Children and Families, in coordination with the Department of Education, in 2019. The planning grant supported several state-level planning activities, with a primary emphasis on conducting a comprehensive statewide needs assessment to identify the current strengths and challenges of the existing landscape of services and supports for families with children from birth through age 5 years. As part of that strength and needs assessment, a statewide PDG B-5 Household Survey was conducted between December 2019 and January 2020. The report on that survey was completed in February 2020. In March of 2020, many services and supports for families were suspended or otherwise disrupted due to the global COVID-19 pandemic. This report presents the results of a Household Survey that was conducted in Fall 2020 to learn about how the landscape of child care services and supports changed in Oregon during the pandemic and related statewide closures that occurred in the spring, summer and fall of 2020.

Purpose of the Phase 3 PDG B-5 Household Survey

As noted above, the first PDG B-5 Household Survey (referred to throughout this report as the "2019 Household Survey") was completed between December 2019 and January 2020. A representative sample of families with children between the ages of 0 and 5 years provided information on the early childhood care and education services they had used in the past year, their satisfaction and challenges with finding and using these services, whether these services were culturally responsive to the family's background and/or home language, and the rates of suspension and expulsion from these services that families might have experienced.

In March 2020, the nation experienced an unprecedented pandemic as the novel coronavirus, COVID-19, began to spread through the U.S. On March 23, 2020, Oregon Governor Kate Brown issued Executive Order 20-12 directing Oregonians to stay at home to the maximum extent possible and closing or limiting the capacity of a range of businesses, including retail stores, restaurants, offices, and schools. Child care and early education providers were ordered to close unless they were providing Emergency Child Care (ECC) which required that the providers be licensed to provide such care, give priority to the children of essential workers, follow additional cleaning and sanitation protocols, keep groups of children and staff stable, and limit their maximum capacity to 10 or fewer children. Of the approximately 3,800 licensed center- and family-based child care and early education providers operating in Oregon at the time, about 2,100 programs applied for and were granted an ECC license. In August 2020, new health and safety guidelines for early childhood care and education providers were released which took effect in September 2020. These guidelines included requirements for health and safety protocols and increased the maximum capacity for groups of children dependent on age although requirements for stability of group members and teachers were maintained.

Given the COVID-19 pandemic, the ELD and its research partners from OSLC Developments Incorporated (ODI) and Portland State University (PSU) decided to conduct a second round of the Household Survey (referred to throughout this report as the "2020 Household Survey") to provide information about:

1. Whether and how the pandemic had affected families' usage of child care and early education, including type, frequency, and hours of care;
2. Whether families whose care had been disrupted by the pandemic received any services from their former early childhood care and education providers and what types of services they might have received;
3. Whether children experiencing disabilities and/or chronic health care needs were able to continue to receive any services they needed;
4. The challenges and barriers that families may have faced with finding early childhood care and education services for their child during this time as well as whether the services obtained were culturally responsive to the family's background and/or home language;
5. Families' concerns about and preferences for child care and early education programming in the future;
6. Rates of suspension and expulsions from early childhood care experienced by families and reasons for these experiences.

Importantly, the survey presented the opportunity to examine the pandemic experiences of families who are often underrepresented, such as those from rural and frontier areas, low-income backgrounds, and families of color or linguistically diverse families. The information and recommendations presented here can

be used to strengthen the reach and impact of Oregon's B-5 early learning and support system moving forward during and after the COVID-19 pandemic.

Methodology

Sampling Plan

The purpose of the sampling approach was to include respondents from across the state who were parents, guardians, or primary caregivers of young children not yet enrolled in kindergarten and elementary school. Respondents were eligible to participate in this survey if they were:

- an Oregon resident;
- age 18 years or older; and,
- the parent or guardian of a child under the age of 6 years who had not yet started kindergarten.

Prior efforts for the 2019 Household Survey began with a sampling plan to obtain a probability sample using a Random Digit Dial (DLL) sample and a non-probability convenience sample thought to include eligible persons. These efforts, managed by a contracted survey research firm, resulted in a smaller-than-anticipated sample, and thus was supplemented by recruitment through community partner organizations and advertisements. In the end, the response rate for the probability sample was 1.8%, and the 2019 Household Survey was largely composed of participants recruited by the research team, the ELD, and local partners during the second half of the data collection effort. In the 2019 Household Survey, responses were weighted based on the probability sample.

Given this background and prior experience, the plan for the 2020 Household Survey focused on recruiting eligible participants to obtain a non-probability sample using outreach and advertising efforts similar to those employed during the latter part of data collection for the 2019 Household Survey. Additionally, the current sampling approach included an aim to oversample historically underrepresented or marginalized groups, including families with incomes within 200% of the federal poverty line, families living in frontier and rural communities, Black, Indigenous, and People of Color (BIPOC), linguistically diverse families, and families with a child experiencing disabilities and/or chronic health care needs. Outreach and engagement efforts aligned with this aim.

Outreach & Engagement

Participants were recruited by the research team and community partner organizations involved in the state's early learning system (such as Early Learning Hubs, Child Care Resource and Referral Networks, and the ELD) and through community agencies working directly with members of historically underrepresented or marginalized groups. These community partners advertised the survey on their various social media accounts (e.g., Facebook, Twitter, etc.) and through emails and flyers. Advertisements were also posted on an internet search engine. Any person who received information from one of these sources was provided with information for how to access the survey—either a paper survey or the URL for the online web survey. Individuals were also provided contact information to call, text, or email research staff for questions or to aid in the facilitation of administering the survey.

Survey Tool Description

The survey was made available in English and Spanish, and administered primarily online. Some respondents completed paper surveys that were made available through partner organizations or by mail. Some respondents completed the interview by speaking to a research assistant over the phone. The online survey was open for 3 weeks in October 2020. Respondents were determined to be eligible through the use of screening questions at the beginning of the survey. The full set of questions in the survey can be found in Appendix A. Each eligible respondent who completed the survey received a $20 digital gift card.

Data Collection

During the data collection period, survey responses were closely monitored. At approximately the end of each week that the survey was open, the research team discussed the representativeness of the sample obtained to that point. Further outreach and engagement were extended to communities if response rates did not include adequate representation from the identified marginalized groups. Additionally, responses were screened for validity throughout the data collection process. A team of research staff reviewed responses using standard procedures to ensure that respondents met eligibility requirements. In cases where more than one respondent from a household completed the survey, data was kept for the mother of the child or the respondent with the most complete data.

1 Sample Description

The final sample of 2,105 participants was 87.7% female, 11.9% male, 0.3% nonbinary, and 0.1% gender nonconforming (see Table 1-1 for all respondent demographics). The majority of respondents, 78.5%, were between 25 and 39 years old and were married (69%). Respondents self-identified as White (61.7%), Hispanic or Latinx (20.3%), African American or Black (5.3%), American Indian or Alska Native (4.3%), Asian (3.3%), multiracial or multiethnic (3.2%), Middle Eastern or North African (1.1%), Native Hawaiian or Pacific Islander (0.4%), or another race or ethnicity (0.3%). English was the language spoken at home for 73.8% of the sample, and 20.3% of the sample spoke Spanish at home (Figure 1-1). When the number of languages spoken at home were analyzed, 4.9% of the sample spoke only Spanish at home and 1.6% spoke only a language other than English or Spanish (e.g., Russian, Chinese, Vietnamese, Swahili, and Arabic), while 15.4% spoke Spanish as well as English and 4.3% spoke another language other than Spanish in addition to English.

Approximately 41.6% of respondents had a 4-year college degree or more. In 78.7% of households, either the respondent or their partner was employed full time. Households were considered to be "lower income" if household earnings were at or below 200% of the federal poverty level (FPL), which translates into an annual household income of $51,500 for a family of four in 2020. According to this definition, 58.2% of the sample was lower income (Figure 1-2). Regionally, 66% of the sample lived in urban areas, with the remainder living in rural or frontier areas (Figure 1-3). All 36 counties in Oregon were represented in the sample.

The majority of the sample (66.1%) reported having more than one child in the household. Respondents were asked in-depth questions about their child care needs for **one focal child** in their household. The focal child was the oldest child in the household who had not yet started kindergarten. The majority of respondents (82.5%) were biological, step, or adoptive mothers of the children. The term "parents" is used from this point forward to refer to all possible caregivers of children who responded to the survey. Focal children were identified by their parents as White (56.5%), Hispanic or Latinx (21.8%), African American or Black (6.4%), maultiracial or multiethnic (5.8%), American Indian or Alaskan Native (3.8%), Asian (3.8%), Middle Eastern or North African (1.0%), Native Hawaiian or Pacific Islander (0.5%) or another race or ethnicity (0.3%) (Figure 1-4). Parents were asked whether their children "had an Individualized Family Service Plan (IFSP) or special developmental or medical needs" and 15.6% of parents indicated that this was the case (see Figure 1-5).

To examine the representativeness of the sample for Oregon families overall, a set of selected sample proportions were compared to other national and statewide publicly available data sources. While none of these comparisons can equate the sample directly to the Oregon population due to differences in each proportion examined, they can provide a general sense of the data and paint a picture of this unweighted nonprobability sample within the context of Oregon. With these caveats in mind, the current sample is somewhat over-representative of some, but not all, of Oregon's marginalized populations overall. These marginalized

Figure 1-1. Respondent home language n=2,101

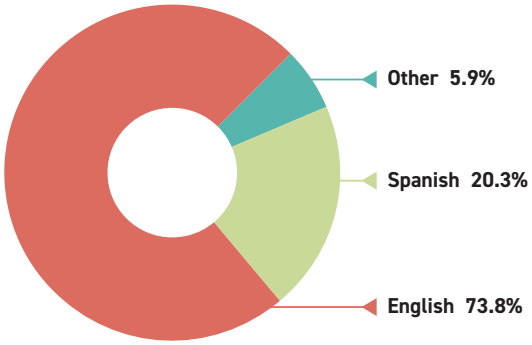
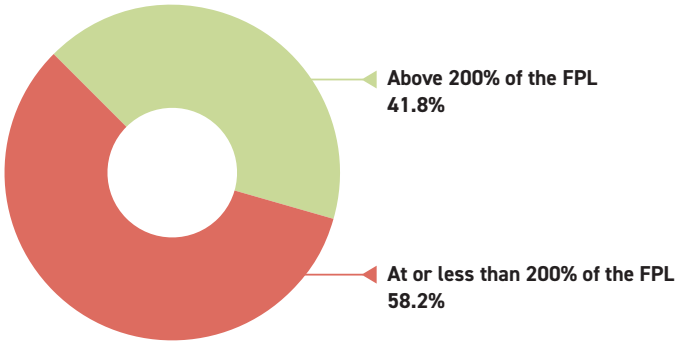


Figure 1-2. Respondent income, based on 200% of Federal Poverty Level n=2,098



populations include Oregonians who are lower income, American Indian or Alaska Native, African American or Black, or living in frontier areas. For instance, the percentage of the sample at or below 200% FPL (58.2%) is higher than the percentage of children under age 6 years in Oregon living at or below 200% FPL (33.0%).[1] The sample proportions of American Indian or Alaska Native (3.8%) and African American or Black (6.4%) children under age 6 years are also elevated.[2] Similar comparisons show the sample to be slightly more representative for Hispanic or Latinx (21.8% this sample; 21.7% PUMS), Asian (3.8% this sample; 3.3% PUMS), and Native Hawaiian or Pacific Islander (0.5% this sample; 0.2% PUMS) children under 6 years. Further, the percentage of respondents in the sample living in urban areas (65.9%) is similar to the population of Oregonians estimated to live in urban areas (65.4%) in 2019.[3] Additionally, respondents living in frontier areas (3.9%) are somewhat over-represented in the sample.[4] To reiterate, the participants and methodology of these publicly available data sources are clearly not equal to those of the current sample, but are presented with the intention of situating the study within the context of other data, samples, or reports relevant to Oregon's families.

Throughout this report, we present findings disaggregated by race/ethnicity, language, income, geographic region, and whether the focal child had a disability or special medical needs when possible with the goal of examining how equitably the child care system is serving families across these different communities. It should be noted that such disaggregation can lead to very small sample sizes for some groups, and that any findings based on such small sample sizes should be interpreted with caution and treated as exploratory. Identifying inequities can help the ELD to understand the kinds of supports and resources that should be provided to families so that we can reach our ultimate goal of ALL families being able to access and use affordable, high-quality child care.

1 Data were derived from the U.S. Census Bureau's American Community Survey 2019 Public Use Microdata Sample (PUMS) 1-year estimates, with PUMS person weights applied.
2 This is in comparison to 2019 PUMS person-weighted estimates for American Indianor Alaska Native (0.8%) and African American or Black (0.8%) children under age 6, although the latter PUMS estimate may or may not include populations identifying as North African (the current survey included a separate category for Middle Eastern or North African).
3 Estimates derived from zip code data from the Population Research Center (PRC) at Portland State University.
4 This is in comparison to estimates for the population living in frontier areas in Oregon (2.2%) derived from PRC data.

Figure 1-3. Respondent region n=2,105

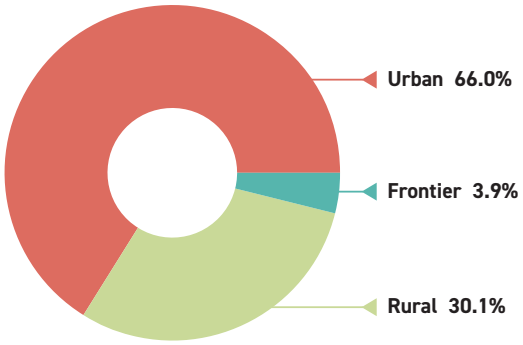


Figure 1-4. Race/ethnicity of respondent's focal child n=2,029

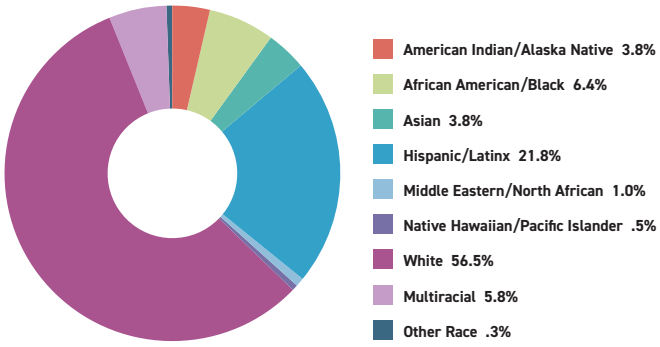


Figure 1-5. Children experiencing disabilities and/or chronic health care needs n=2,099

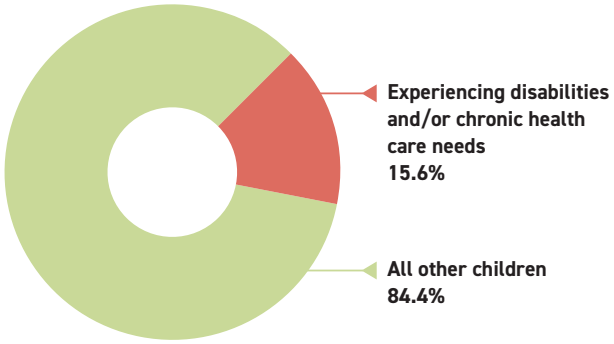


Table 1-1. Respondent demographics

Respondent Category		Percent
Gender	Female	87.7
n=2,097	Male	11.9
	Nonbinary	0.3
	Nonconforming	0.1
Age	18 to 24	6.2
n=2,103	25 to 39	78.5
	40 to 54	14.0
	55 +	1.3
Marital Status	Married	69.0
n=2,040	Not married but living with a partner	12.0
	Single	19.0
Race / Ethnicity	American Indian / Alaska Native	4.3
n=2,039	African American / Black	5.3
	Asian	3.3
	Hispanic / Latino/a/x	20.3
	Middle Eastern / North African	1.1
	Native Hawaiian / Pacific Islander	0.4
	White	61.7
	Other	0.3
	Multiracial / Multiethnic	3.2
Education	Some schooling but no high school diploma or GED	6.1
n=2,069	High school diploma or GED	19.7
	Some college or 2-year degree/certificate	32.6
	4-year college degree or more advanced degree	41.6
Full-time Employment	Yes	78.7
n=2,104	No	21.3
Annual Income	Less than $10,000	9.2
n=2,098	$10,000 to $24,999	17.1
	$25,000 to $39,999	17.0
	$40,000 to $59,999	16.6
	$60,000 to $79,999	13.3
	$80,000 to $99,999	8.4
	$100,000+	18.5
Children	1	33.9
n=2,102	2	37.5
	3	17.6
	4	7.3
	5	2.0
	6 or more	3.2
Relationship to Focal Child	Mother / Step Mother / Adoptive Mother	82.5
n=2,388	Father / Step Father / Adoptive Father	11.7
	Foster Parent	1.9
	Grandparent	2.6
	Other	1.3

2 Use of Early Care & Education Services

Survey respondents were asked questions about their use of and experiences with early care and education services since March of 2020. While it was not specified that this is when many of the COVID-19 precautions and shutdowns took effect, this time-frame corresponded to the Governor's first "shelter in place" order and corresponding shut-down of most retail, schools, and other businesses. Since March 2020, over one half of the respondents (53.2%) reported having their child in child care for 8 or more hours per week in the prior year. Of the parents who said they did not have their child in care, over a third (35.1%) had tried to find care during the prior year. Figure 2-1 shows the percentage of children within each race/ethnicity who were in child care for 8 or more hours per week. Note that responses for children identified in the other race/ethnicity category are suppressed due to small sample size. All results with a sample size of 5 or fewer respondents are suppressed throughout this report. White children had the highest percentage of being in child care. Families with children identified as American Indian or Alaska Native, Asian, and Middle Eastern or North African were least likely to have their child in child care. When responses were reviewed separately by family income, region, and language (Appendix B), the highest percentages of children in child care were among families with higher income, families living in frontier areas, and families who spoke English.

Of those who did not have their child in child care, White and African American or Black children had the highest percentages of parents who had tried to find care in the past year (see Figure 2-2). When responses were reviewed separately by home language and income (Appendix B), fewer Spanish-speaking parents and parents with lower income had tried to find care in the past year. English-speaking parents were more likely to have tried to find care than parents who spoke a language other than English.

For respondents who had their child in child care, additional questions were asked about that child care arrangement. Questions included information about the child care setting and their satisfaction with care. Figure 2-3 shows that, overall, more than one half of children were being cared for in the child's home by a friend, relative, neighbor, or nanny. Close to one third of children were cared for by a non-relative in someone else's home, and just under half were in care in a child care center or preschool. The majority of children in child care were in a single type of child care arrangement (Appendix B). Almost a third of children in child care were in two types of child care arrangements, and more than 6% were in 3 or more different types of child care arrangements. This suggests that at least of third of families may not have been able to get their child care needs met with just one arrangement.

Figure 2-1. Percentage of children in care 8+ hours per week, by race/ethnicity

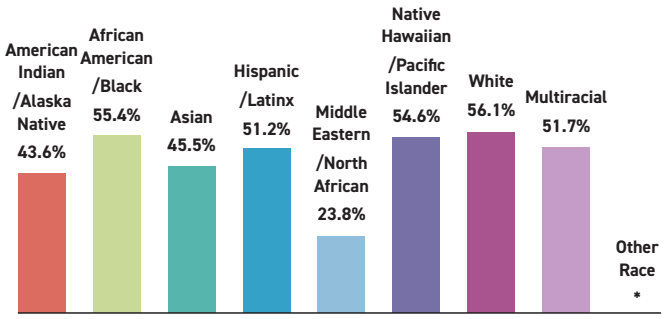


Figure 2-2. Percentage of respondents that tried to find care in the past year, by child's race/ethnicity

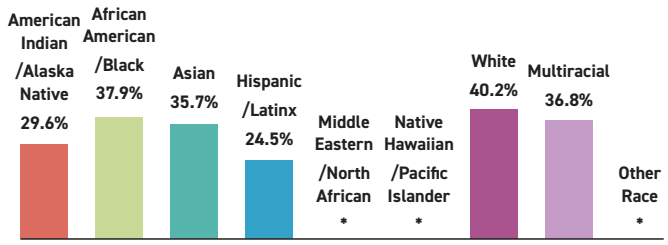
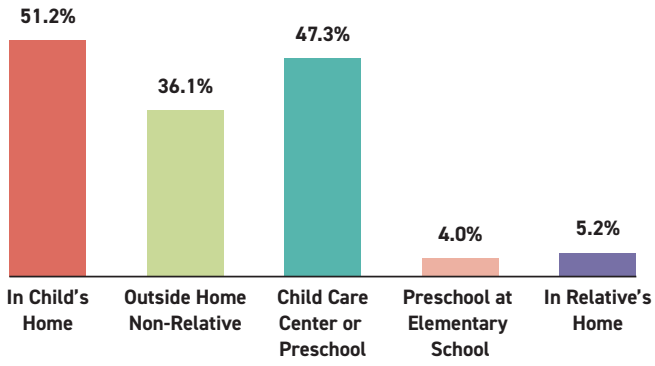


Figure 2-3. Respondent child care arrangement settings



The use of different kinds of child care settings for families with different racial/ethnic backgrounds is shown in Figure 2-4. The highest percentage of children in a care arrangement in the child's home were African American or Black, or Hispanic or Latinx. American Indian or Alaska Native children were most likely to be in a care arrangement outside of the home with a non-relative. White, Asian, and multiracial/multiethnic children were more likely to be in a child care center or preschool. Regionally, respondents living in frontier areas were less likely to have care in the child's home and most likely to have care outside of the home in a child care center or preschool, while rural respondents were most likely to be using care in someone else's home by a non-relative (Appendix B). Spanish-speaking respondents were most likely to have their child in care in the child's home, and English-speaking respondents were most likely to have their child in a child care center or preschool. These differences may be better understood in light of differences in families' COVID-19-related concerns about and preferences for child care, which we present in Section 4 of this report.

The amount of time children spent in child care in a typical week varied; although, on average, families reported something similar to full-day, full-week care. Survey respondents were asked about their satisfaction with the amount of care they received. Most parents said that the days and hours of their child care were "about right" (Figure 2-5). When answers were reviewed by race/ethnicity (Appendix B), American Indian or Alaska Native, Hispanic or Latinx, and multiracial or multiethnic children were most likely to have parents who said that they did not have enough hours per day of care. Native Hawaiian or Pacific Islander, African American or Black, and White children were most likely to have parents who said that their number of hours per day in care was "about right". A higher percentage of families with either lower income or who reported their children had experienced disabilities and/or chronic health care needs said that they did not have enough hours per day and days per week of care compared to other families.

When asked what one thing they would change about their child care arrangement if they could, other than cost, parents provided a variety of answers. Ten response options were listed, including one option for "something else not listed" where an answer that did not fit into one of the categories could be described. Many parents said that their current arrangements were just right (see Figure 2-6). The next top-four options selected were fewer different arrangements, a different type of setting or facility, a care arrangement that was more convenient, and a higher-quality environment. Overall, multiracial or multiethnic children had parents who were most likely to report that they would not change anything about their child care arrangement; other top changes varied among different races/ethnicities. Families with a home language other than English were more likely to want a provider who better represented their child's culture, language, or ethnicity (Figure 2-7). Families with lower income and families whose child was experiencing disabilities and/or chronic health care needs were more likely to want a different type of setting or facility and fewer different arrangements. Regionally, parents in frontier regions were more likely than those in other regions to say that they would not change anything, and their current arrangements were just right (Figure 2-8).

Parents were also asked about the health and safety procedures that their child care provides. Most parents said their child care providers' health and safety procedures were "about right" (Appendix B). Regionally, the highest percentage of families who said health and safety procedures were about right lived in frontier areas. Parents whose children were experiencing disabilities and/or chronic health care needs were more than twice as likely to say health and safety procedures were "not enough" (Figure 2-9).

Figure 2-4. Percentage of children in each child care setting, by race/ethnicity

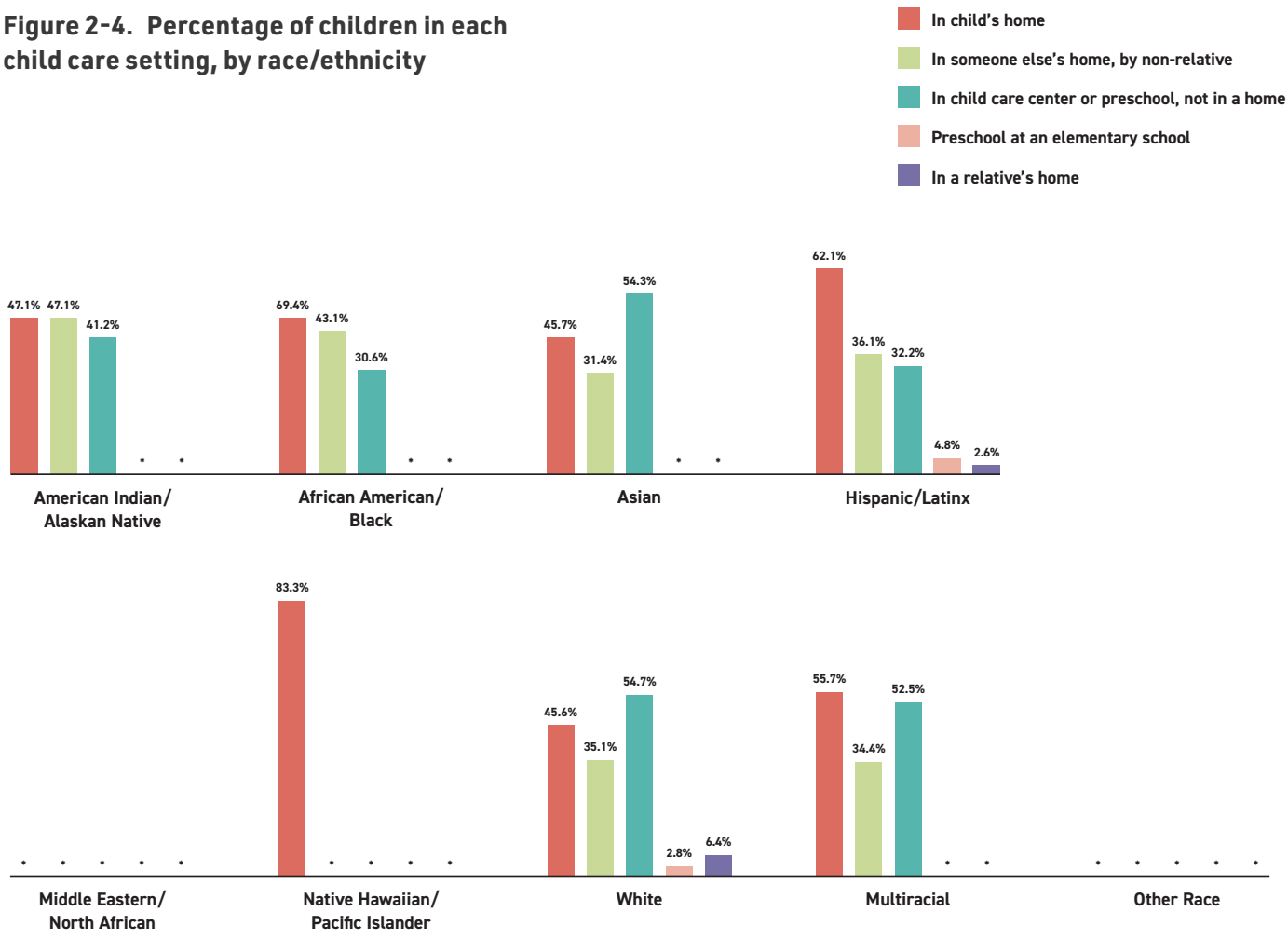


Figure 2-5. Percentage of respondents who are satisfied with amount of care received

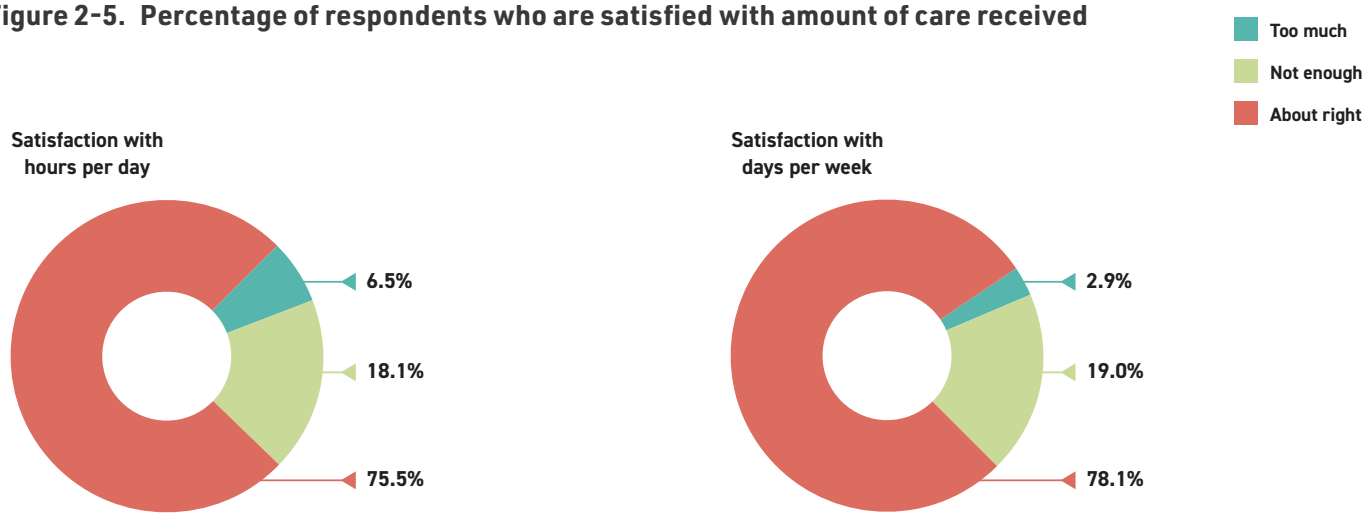


Figure 2-6. The one thing respondents would change about care (other than cost), statewide

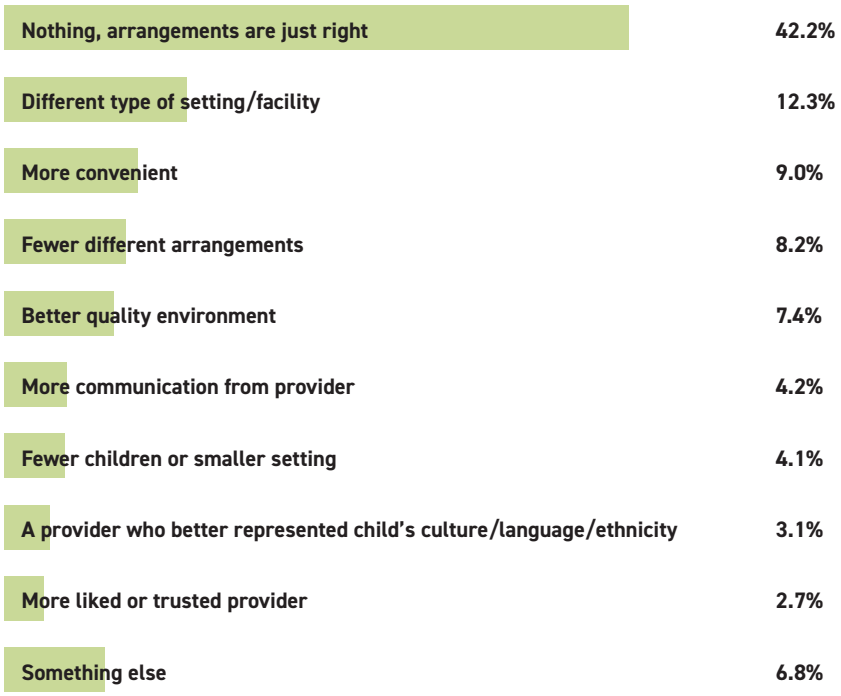


Figure 2-7. Parents who wanted a provider who better represents child's culture/language/ethnicity, by home language

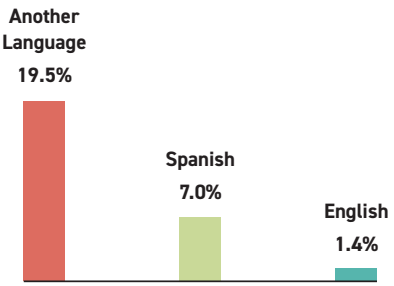


Figure 2-8. The one thing respondents would change about care (other than cost), by region

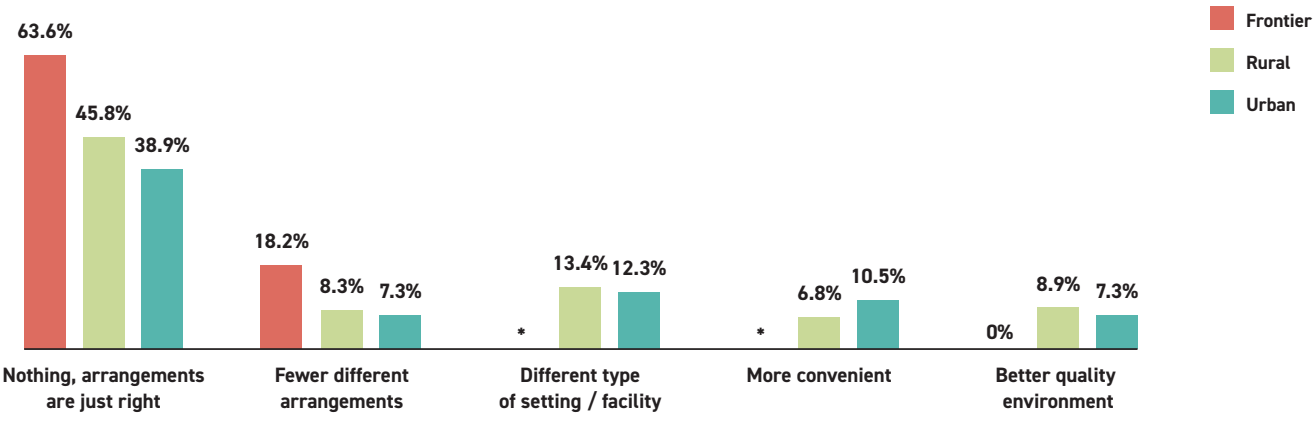
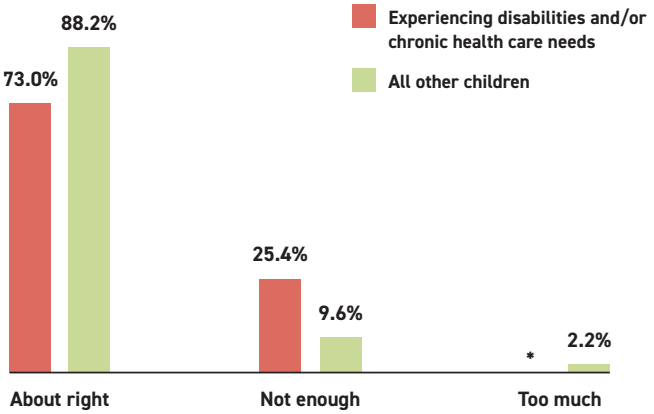


Figure 2-9. Respondents' feeling about health and safety procedures, by experience of disabilities and/or chronic health care needs



Reflections on the 2019 Household Survey

As previously noted, the 2019 and 2020 Oregon Household Surveys featured different sampling methodology and survey weighting was applied to the 2019 data but not the 2020 data. In light of these caveats, comparisons between the two are reflections upon differences rather than statistically equivalent analyses or tests of change. We note that the percentage of parents who said their child was in child care in the 2020 Household Survey was lower overall statewide (59.4% in 2019 vs. 53.2% in 2020), generally as well as when reviewed separately by race/ethnicity categories. When looking at the current survey by home language and region, only families living in frontier areas reported a higher percentage of having a child in child care (66.3%) than in 2019 (53%). The percentage of families with lower income having had a child in child care fell about 7% from 2019 to 2020 (54.7% vs. 41.5%). Slightly more families tried to find child care in 2020 (35.1%) than 2019 (32.2%). The percentage of families with a child in care in the child's home was about 14% higher (37.4% in 2019 vs. 51.2% in 2020), with a smaller increase in the percentage of families with a child in care by a non-relative in someone else's home (31.7% in 2019 vs. 36.1% in 2020). The percentage of children in a child care center or preschool was 5% lower in the 2020 Household Survey (47.3%) than it was in the 2019 Household Survey (52.3%). The finding that families have shifted to using care options in their own homes likely reflects an impact of the COVID-19 pandemic and is further discussed in Section 4. While families, providers, and state employees working within the early learning system have suspected this shift in types of care used and preferred by families, these are the first data to document a shift.

3 Challenges Finding Care

Respondents who indicated that they had used or tried to find child care since March 2020 (73.9%) were given a list of 10 potential challenges families may experience finding high-quality child care that meets their needs. For each of the listed challenges, parents indicated whether each was "not a challenge," "somewhat challenging," or "a big challenge." A response of "not applicable" was made available for one of the listed challenges, "finding a provider who could support your child's needs related to a physical or other disability". For the purposes of analysis, the responses "somewhat challenging" and "a big challenge" were combined to "yes, a challenge". Figure 3-1 shows the 10 challenges to finding child care ranked in order of the percentage of parents who said that the challenge was a barrier. By far the two greatest challenges that parents reported were finding the **type of care setting** (e.g., center-based, home-based, in-home) they wanted and **finding a provider with availability**. This was followed by finding a provider who they felt could help their child learn and develop, finding a provider in a location that was easy to access, and finding a well-qualified provider.

Notably, during this pandemic period, over one half of parents (60.3%) said that finding a provider who used health and safety standards they agreed with was a challenge. Finding a provider who could meet the child's health needs, finding a provider who reflected the family's cultural background, finding a provider who could support the child's needs related to a physical or other disability, and finding a provider who spoke the child's home language were the least often named challenges for parents across the state as a whole. Differences emerged, however, for a number of these factors when data were examined by children's racial or ethnic background, geographic area, home language, and whether the child was experiencing disabilities and/or chronic health care needs. Examining how challenges differed across these different groups of families help to identify potential systemic inequities and inform policy and decision makers about how to equitably provide supports and resources to families in these communities.

Challenges Differed for Children with Different Backgrounds

When responses were examined by child race/ethnicity, type of care setting continued to be the major challenge across most groups. Challenges related to "finding a provider who reflected your family's cultural background" were much more likely for children of color than for those identified as White, and parents of Hispanic or Latinx children were more like to report "finding a provider who spoke your child's language" was a challenge (Figures 3-2 and 3-3). These results were mirrored when data were examined by home language (see Appendix B).

The relative ranking of challenges for families with different income levels was mostly similar overall; however, families with lower income consistently reported experiencing each of the 10 challenges as a barrier at higher rates than families with higher income (see Appendix B). Families with a child experiencing disabilities and/or chronic health care needs also reported higher rates of the listed challenges than other families. Finding a provider who could support their child's needs related to a physical or other disability was much more likely to be challenging for families with a child experiencing disabilities and/or chronic health care needs (Figure 3-4).

When geographic region was examined, families living in frontier areas were least likely to cite finding a provider with available slots as a challenge (81.3%) compared to families living in rural (87.8%) and urban (83.5%) areas. Families in frontier areas were most likely to say that it was a challenge to find a provider who could support the needs of a child with a physical or other disability (31.3%) as compared to those living in urban areas (25.9%) and rural areas (20.7%). Parents in frontier areas were also more likely to say that finding a provider who could meet their child's health needs was a challenge (47.9%) than rural- (39.1%) and urban- (39.8%) dwelling parents. Please refer to Appendix B for further information.

Figure 3-1. Top ten challenges to finding care

Finding the type of child care setting you wanted	86.4%
Finding a provider with open slots or availability	85.9%
Finding a provider who you felt could help your child learn and develop	74.9%
Finding a provider in a location that was easy for you to get to	73.8%
Finding a provider who was well-qualified in terms of experience and/or education	72.5%
Finding a provider who uses health and safety standards you agree with	60.3%
Finding a provider who could meet your child's health needs	40.0%
Finding a provider who reflected your family's cultural background	31.0%
Finding a provider who could support your child's needs related to a physical or other disability	24.6%
Finding a provider who spoke your child's home language	15.6%

Figure 3-2. Challenges to finding a provider who reflected family's background, by race/ethnicity

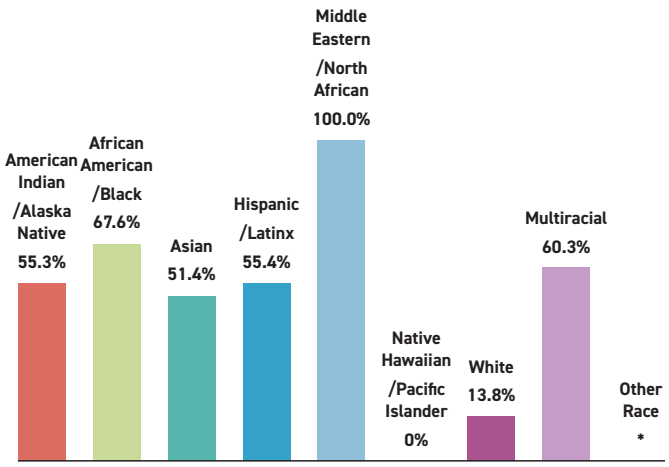


Figure 3-3. Challenges to finding a provider who spoke child's home language, by race/ethnicity

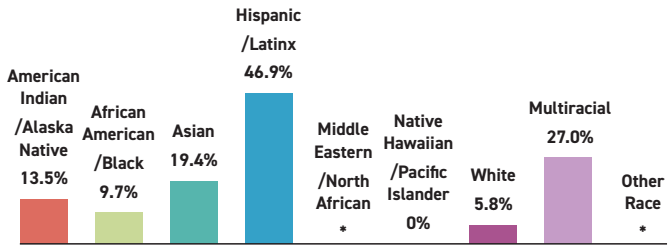


Figure 3-4. Challenges to finding care for children experiencing disabilities and/or chronic health care needs

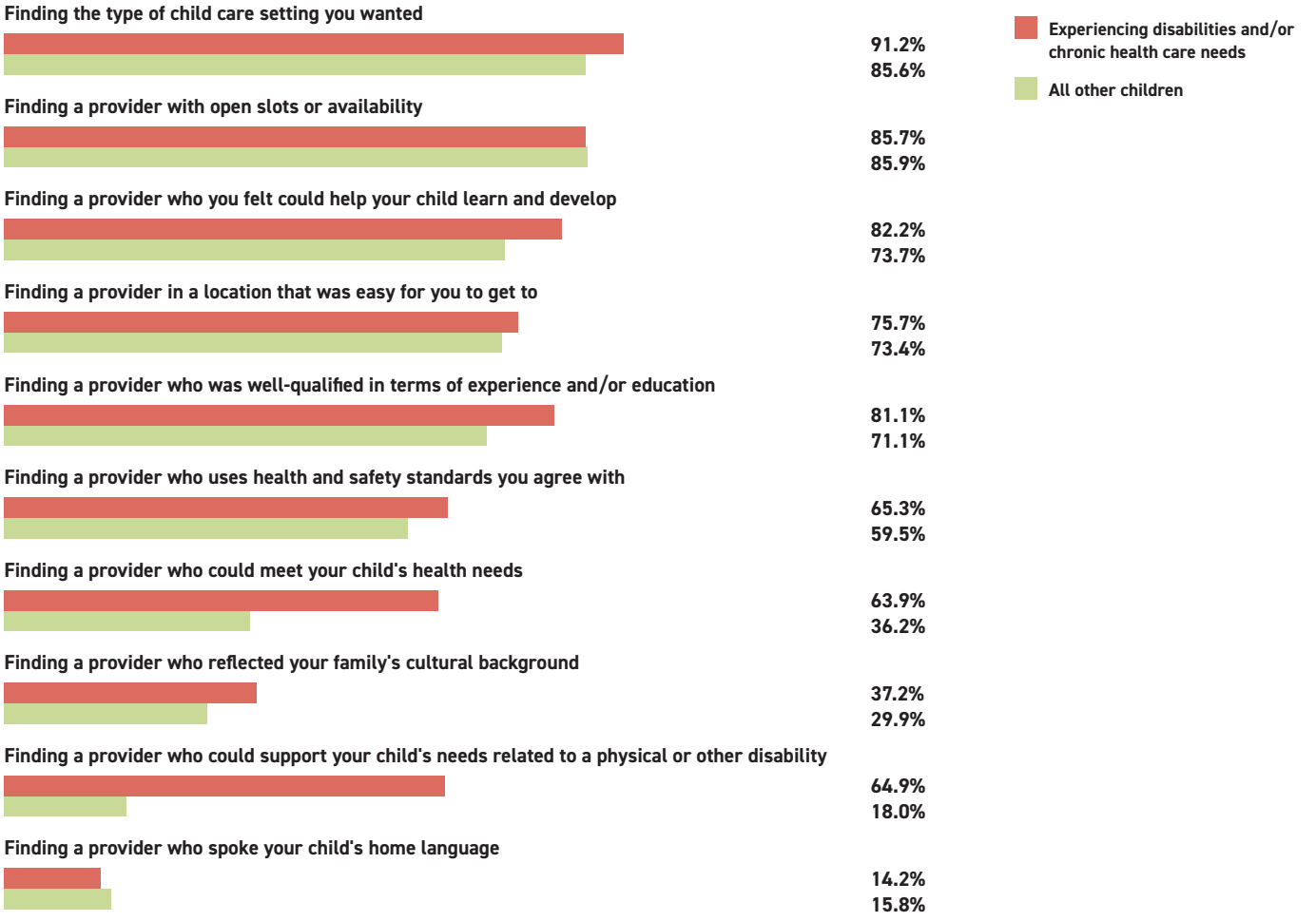
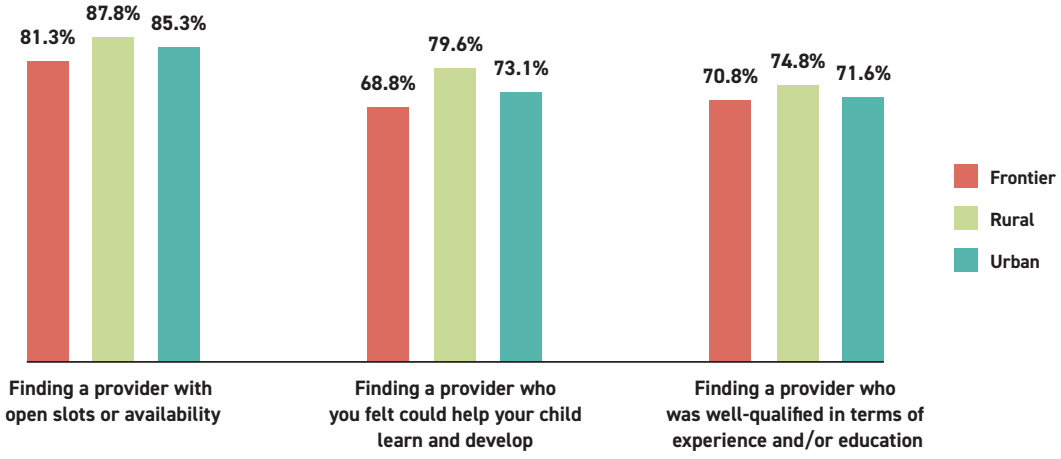


Figure 3-5. Challenges to finding care, by region



Reflections on the 2019 Household Survey

The 2019 Household Survey listed 10 potential challenges to finding child care with the same response options as those provided for the 2020 Household Survey. The top challenge in 2019, "finding a provider that you could afford", was not listed in the 2020 Household Survey. The remaining nine challenges from 2019 were listed in the 2020 Household Survey; in addition, the 2020 Household Survey listed "finding a provider who uses health and safety standards you agree with" as an additional challenge not included in the 2019 Household Survey. This item is important in order to explore, in part, respondents' views on health and safety in the context of COVID-19 pandemic conditions. Many of the findings of the 2019 Household Survey were consistent with the 2020 Household Survey when reviewing challenges to finding child care, overall, statewide. Differences, however, were notable when responses were examined by geographic area. Specifically, in 2019 families living in rural and urban areas were less likely to report challenges for finding a provider with availability (76.1% and 72%, respectively), finding a provider they felt could help their child learn and develop (60.0% and 60.9%) or who was well-qualified (63.9% and 58.9%) than in 2020 (see Figure 3-5 for percentages). Additionally, looking at challenges to finding care by child race/ethnicity, finding a provider who reflected their family's cultural background was reported by families with a child who was African American or Black at higher rates in the current survey (67.6%) than in the 2019 Household Survey (40.8%). Respondents with a child who was Asian reported finding a provider who spoke their child's home language was a challenge at lower rates in the current 2020 survey (19.4%) than in the 2019 Household Survey (43.1%), which may have been partially due to the classification of the 2019 survey of Asian also including Pacific Islanders (which are included in a different category, Native Hawaiian or Pacific Islanders, in the 2020 Household Survey).

4 Effects of COVID-19 & Future Plans

At the start of the COVID-19 pandemic in the United States, many child care centers and home-based providers were closed, at least temporarily, as states put rules and procedures into place designed to protect against COVID-19. Not all of the providers who closed their doors were able to re-open as restrictions eased. One national research center found that in July 2020, 35% of center-based providers and 21% of family-based providers remained closed nationwide.[1] Further, enrollment in early childhood education and care decreased; estimates of the size of that decrease range from 49% to 67%.[2] This may have been due in part to parents' feelings that it might not be safe for their children to return to care.[3]

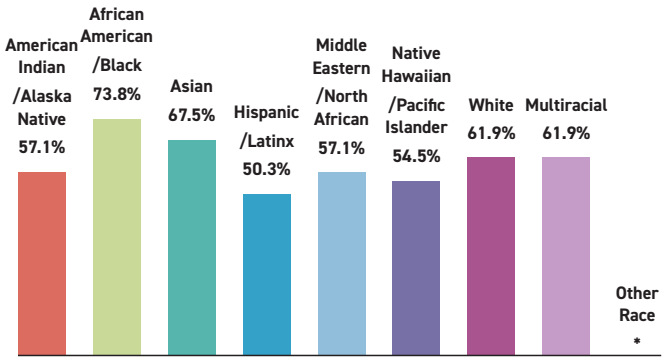
In Oregon, child care capacity declined to about 21% of pre-COVID capacity in April 2020 but had returned to 45% of pre-COVID capacity by October 2020.[4] Questions remained about how parents had coped during the downturn in capacity and how parents felt about having their children return to child care. The 2020 Household Survey provided parent perspectives on these questions. Further, it allowed information to be captured about parents from different racial and ethnic groups, income groups, and geographical regions—as well as about parents speaking different languages and those with children with disabilities and/or chronic health care needs.

Disruptions in Care Due to COVID-19

Parents were asked whether their child's early education and care had been interrupted due to COVID-19. They could answer that it had not been interrupted, that the program was not providing onsite services or had closed, that the program had reduced onsite hours, or that the center was serving only essential workers. Almost 60% of parents said that their child's care had been disrupted by COVID-19. The majority of parents who reported a disruption said that their provider was either not providing onsite care or had closed (34.3%). Smaller percentages of parents noted that their child's program had reduced onsite hours (12.7%) or was serving only essential workers (12.6%). When results were examined by the identified race/ethnicity of the child (Figure 4-1), children identified as African American or Black were most likely to have had their care disrupted by COVID-19 (73.8%) and children who were identified as Hispanic or Latinx were the least likely to have had care disrupted (50.3%). When family income was examined, fewer children in families with lower incomes experienced a disruption in care (52.0%) than their peers in families with higher incomes (70.3%). Children in frontier areas had the least likelihood of having their care disrupted (47.6%) while those in urban areas were the most likely to have a disruption (61.5%), with children from rural areas falling in between (56.8%). Children experiencing disabilities and/or chronic health care needs were more likely to experience a disruption in care (63.5%) than their peers (58.8%). See Appendix B for further information about differences between subgroups.

1 Child Care Aware. (2020). Picking up the pieces: Building a better child care system post COVID-19. Arlington, VA: Child Care Aware.
2 Procare. (2021, January). Tracking the Impact of COVID-19 on the Child Care Industry. Denver, CO: Procare Software, LLC.
National Association for the Education of Young Children. (2020). Holding on Until Help Comes. Washington, DC: NAEYC.
3 Care.com. (2020). Child care costs more in 2020, and the pandemic has parents scrambling for solutions.
https://www.care.com/c/stories/2423/how-much-does-child-care-cost/
4 Calderon, M. (2020, November). Covid-19 Update to the Child Care Task Force. Retrieved from
https://olis.oregonlegislature.gov/liz/2019I1/Downloads/CommitteeMeetingDocument/226880

Figure 4-1. Interruption of child care due to COVID-19, by race/ethnicity



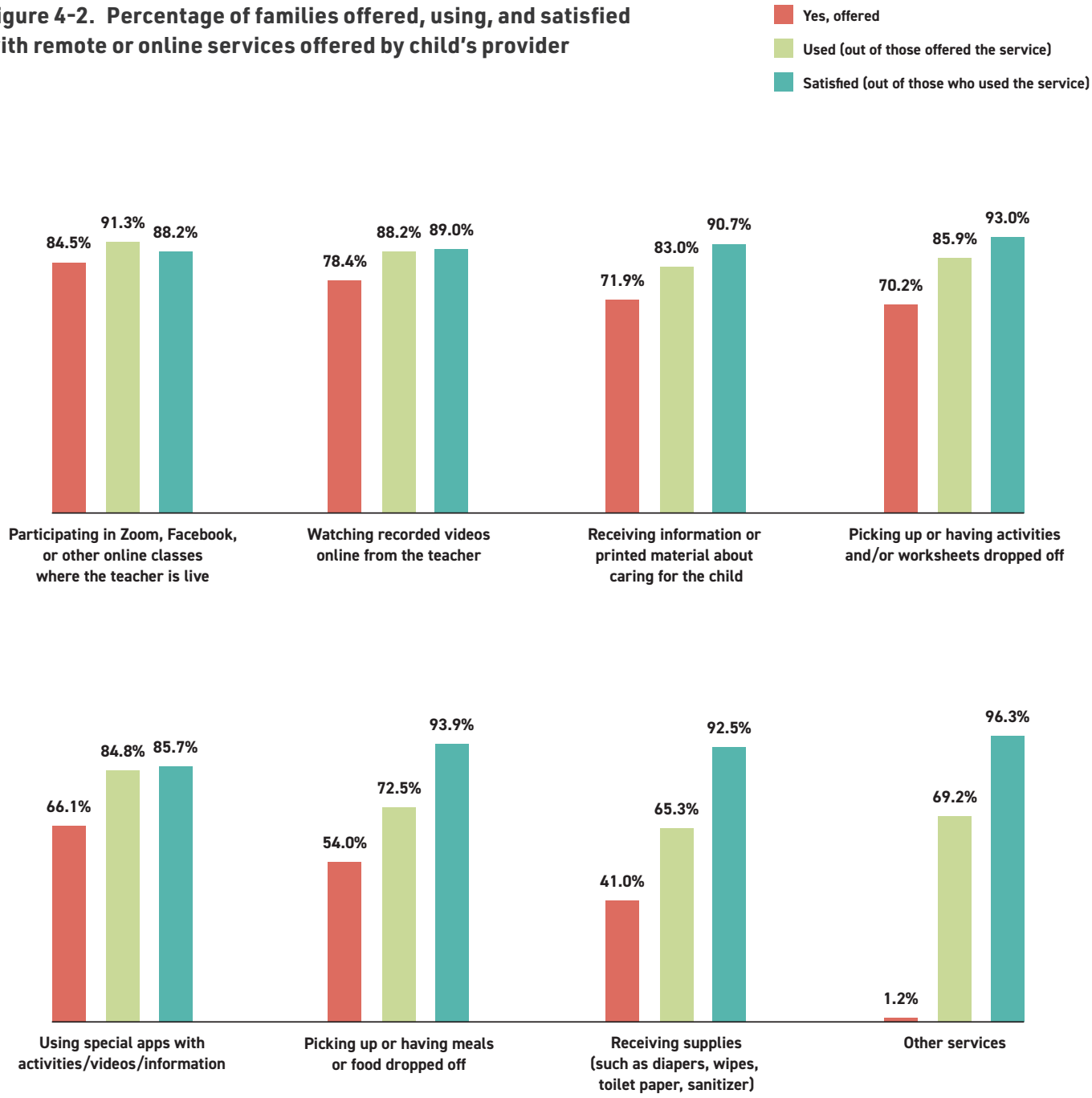
Use of Remote or Online Services During COVID-19

All parents, regardless of whether their child's care had been disrupted by COVID-19, were asked whether their child's program had provided any remote or online services during the COVID-19 pandemic. Only 36.5% of parents responded that they had been offered any such services. Children identified as Middle Eastern or North African (52.4%), Asian (46.8%), and American Indian or Alaska Native (42.9%) were most likely to have been offered these services, while children who were identified as African American or Black (32.3%) and Native Hawaiian or Pacific Islander (number suppressed because fewer than five respondents) were least likely to have been offered such services. Children who were experiencing disabilities and/or chronic health care needs (40.5%) were slightly more likely than their peers (35.8%) to be offered services. Please see Appendix B for more information.

Parents who indicated that they had been offered any services were then asked if they had had access to a range of specific services—including picking up or having meals or food dropped off, participating in Zoom, Facebook, or other online classes with a live teacher, and using special apps with activities, videos, or information. In Figure 4-2, these services are listed in order of the frequency that parents reported they were offered. The most common services offered were online classes with a live teacher or online videos recorded by a teacher, and the least commonly offered services were the pick up or drop off of meals or other supplies. For respondents who noted other services, phone calls from the provider were the most commonly listed services. Parents who had been offered a service were asked whether they had used that service and, if they had used the service, whether the services were "somewhat" or "very" useful. The services most likely to have been used were online classes, picking up or receiving worksheets/activities, and utilizing special apps. In contrast, picking up or receiving meals and other supplies were the least utilized services. However, picking up or having meals, worksheets/activities, or other supplies dropped off were the services that the most parents rated as "somewhat" or "very" useful. It should be noted that for every service, the large majority of parents who utilized them rated them as useful.

When use of specific services was examined by the race/ethnicity of the child, children identified as American Indian or Alaska Native, African American or Black, Hispanic or Latinx, Middle Eastern or North African, and multiracial or multiethnic were most likely to be offered the services of picking up or receiving meals, worksheets/activities, supplies, and information about caring for the child. Please refer to Appendix B for specific percentages. Families with lower incomes, those speaking languages other than English, those in frontier and rural areas, and those with children experiencing disabilities and/or chronic health care needs were also more likely to be offered these same services. There were generally not differences in rates of being offered remote classes and videos and special apps between any of the groups of families (e.g., by race/ethnicity, income, home language, region or area, disabilities and/or chronic health care needs). The groups of families who were more likely to be offered meals, supplies, and activities and information were also generally more likely to utilize the services. One exception was that while families of children experiencing disabilities and/or chronic health care needs were more likely to be offered the chance to pick up or have meals dropped off, they were less likely to utilize the service than were others. Across the different groups, the majority of families who utilized services found them to be useful.

Figure 4-2. Percentage of families offered, using, and satisfied with remote or online services offered by child's provider

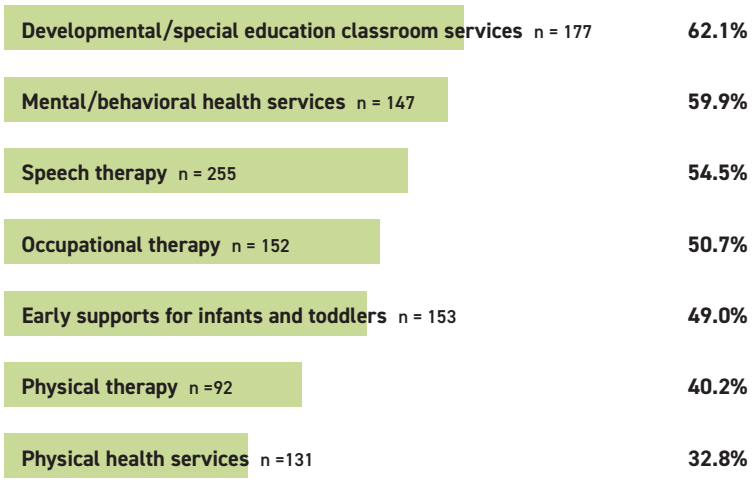


Access to Services for Children Experiencing Disabilities and/or Chronic Health Care Needs

Parents who indicated that their child was experiencing developmental disabilities and/or chronic health care needs were asked whether they typically utilized a number of services. If parents typically utilized a service, they were asked whether their child's access to those services had been affected by COVID-19. As shown in Figure 4-3, the largest percentage of parents reported having problems accessing developmental and special education classroom services. The next largest percentage had difficulties accessing mental and behavioral health services. The smallest percentage of parents reported having difficulties accessing physical health services.

When percentages of families reporting difficulties accessing services were examined by the child's identified race or ethnicity, African American or Black children had the highest rates of difficulty accessing most services (see Appendix B). Families with lower incomes generally had less difficulty accessing services than did families with incomes more than 200% above the FPL.

Figure 4-3. Families' top challenges in accessing services for children with experiencing disabilities and/or chronic health care needs



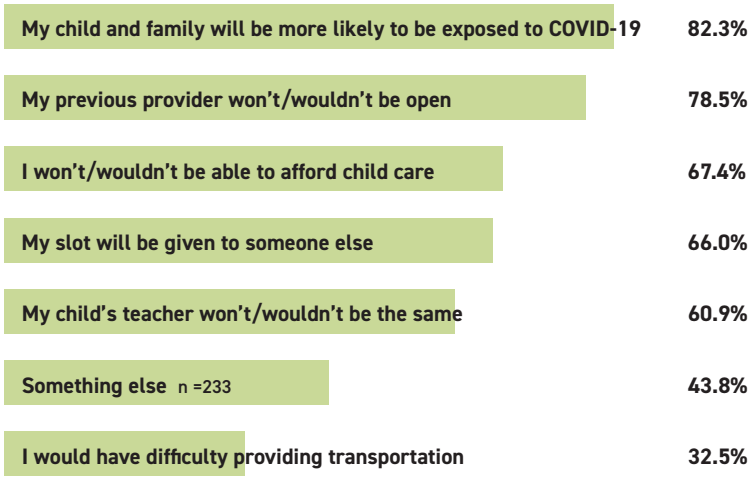
Note: The n values represent the total number of parents who reported using the services at all.

Concerns About Returning to Care

Parents who indicated that their child's early education and care services had been disrupted due to COVID-19 were asked how concerned they were about a number of potential issues when they thought about the child returning to care or if their child had already returned to care. Figure 4-4 lists these issues and the percentages of parents who reported that they were somewhat or very concerned about each issue. The highest percentage of parents reported that they were concerned that "my child or family will be more likely to be exposed to COVID-19", followed by the concern that the child's provider would no longer be open. The smallest percentage of parents were concerned that they would not be able to provide transportation for their child. Among the "other" concerns that parents had were that the schedule would be less predictable, that there would be fewer extracurricular activities available, that the children would not be able to or not like wearing masks, and that the providers might not be ready to go back to caring for the children.

Parents with children who were identified as African American or Black were most likely to be concerned about possible exposure to COVID-19 (93.4%). Overall, families of color had higher concerns in most categories. Families speaking a language other than English in the home were more concerned than English speakers that they would not be able to afford child care. For more information, see Appendix B.

Figure 4-4. Families' top concerns about returning to care



Preferences for Care in Times of COVID-19

Parents were asked "Right now, in light of COVID-19, if you could have your child in any type of care, which type would you prefer?" Parent preferences are shown in Figure 4-5. Almost equal percentages of parents preferred either center-based care or care within their own homes. Significantly smaller percentages of families preferred care by someone outside their family in home-based care or care in a preschool located in an elementary school. The smallest percentage of families reported preference for another type of arrangement, which was most commonly having the child receive care in a family member's or friend's house.

Figure 4-6 shows percentages of parents preferring each type of care by the child's race/ethnicity. Families with children identified as African American or Black, Hispanic or Latinx, and multiracial or multiethnic were generally more likely to indicate that they would rather have their children in care in their own homes. In general, across groups (shown in Appendix B), the pattern of preferring center-based care or care within the child's own home over care outside the home in either home-based or preschool in an elementary school was repeated.

Perspectives About the Safety of Different Types of Care

In order to begin to understand parents' feelings about the safety of different types of care, they were asked to indicate how concerned they were about possible exposure to COVID-19 for their child and family if their child was in different types of care. In general, as seen in Figure 4-7, parents were much less likely to be "very" or "somewhat" concerned about exposure to COVID-19 for care in their own homes compared to any types of care outside their homes. This pattern persisted across different groups (see Appendix B). When perspectives were examined by the race or ethnicity of the child, families of African American or Black, Asian, Hispanic or Latinx, North African or Middle Eastern, and multiracial or multiethnic children had the highest levels of concern about care outside the child's home (Figure 4-8). When different regions were examined, families in frontier regions expressed less concern about all types of care overall than did families in urban regions, with families in rural regions expressing levels between the other regions.

Figure 4-5. Preferences for type of care setting during COVID-19

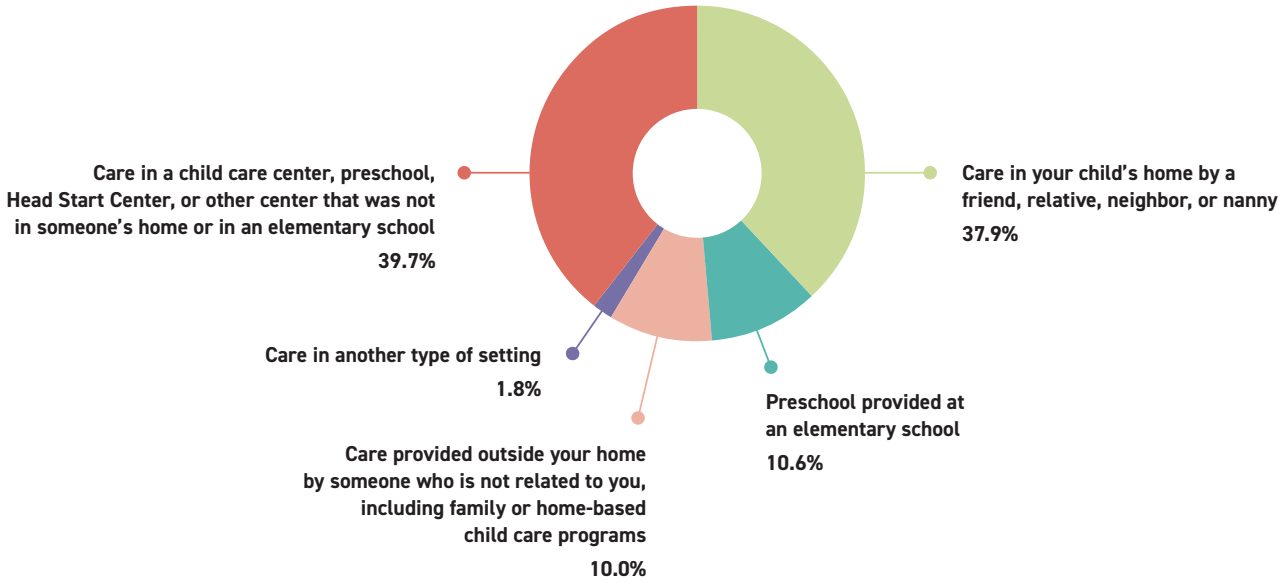


Figure 4-6. Preferences for type of care setting during COVID-19, by race/ethnicity

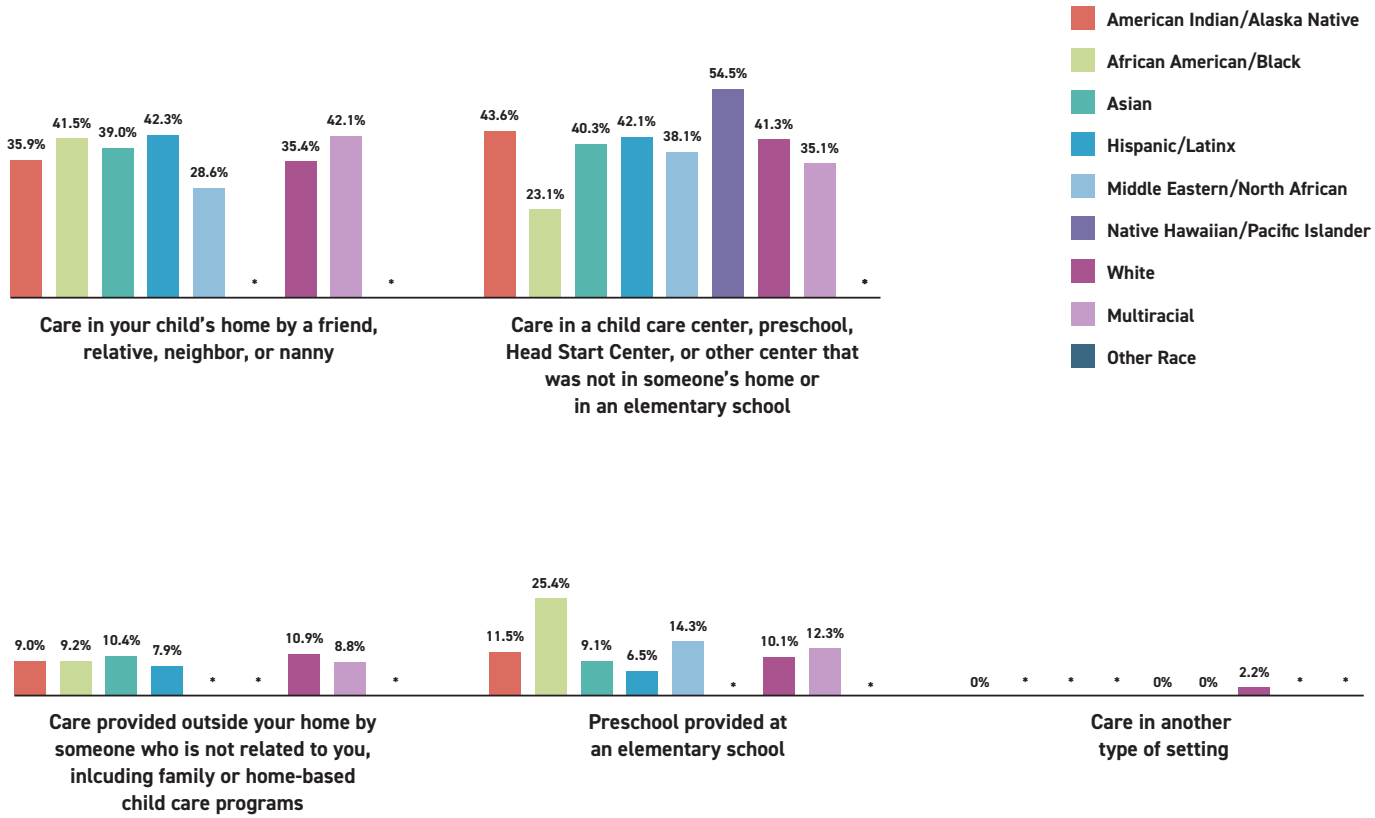


Figure 4-7. Concern about exposure to COVID-19, by type of setting

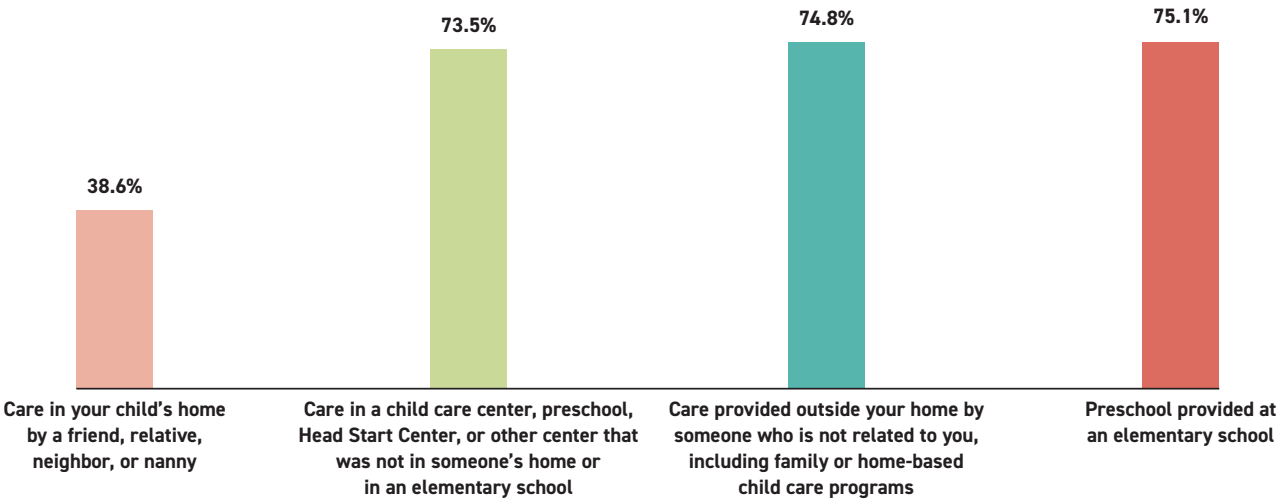
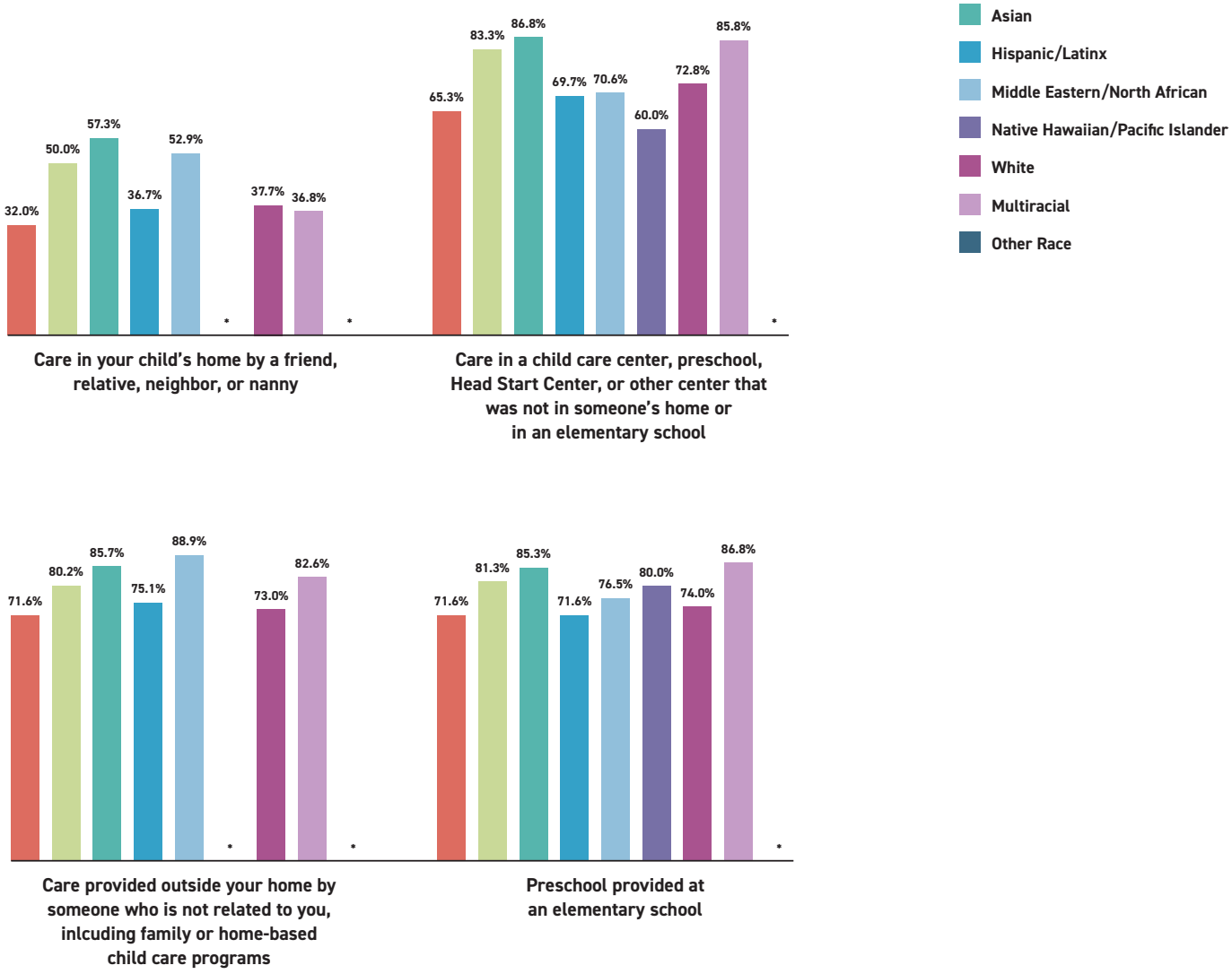


Figure 4-8. Concern about exposure to COVID-19, by race/ethnicity



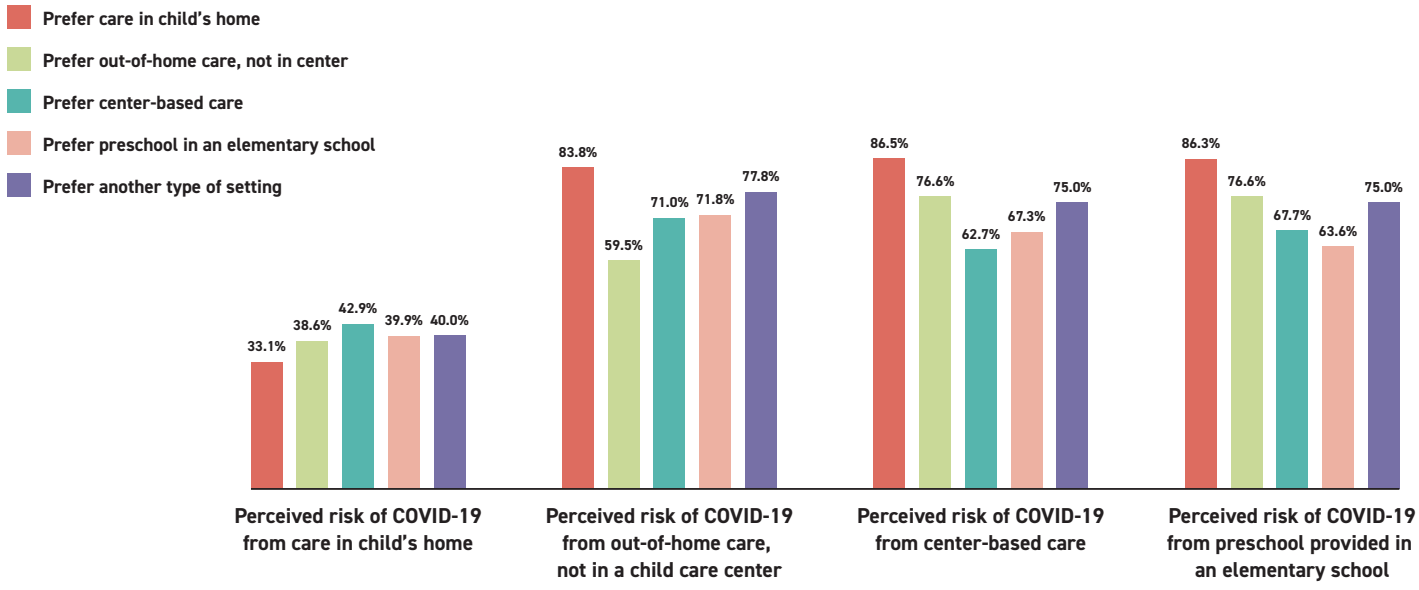
Summary

Overall, a majority of families who had their child in care in 2020 experienced some disruption in care due to COVID-19. Families with lower incomes, those with children experiencing disabilities and/or chronic health care needs, and some BIPOC families were the least likely to experience disruptions in care. This suggests that some of the children who are typically considered to benefit most from early care and education services were able to continue to attend care during COVID-19. Additionally, these families, along with families in frontier regions, were also more likely to be offered and to use a number of services that provided families with supplies, meals, and information about caring for their children. It may be that the programs serving these groups are more likely to offer a range of supports to these families, and usage rates suggest that these aided the families. It is worth noting that many of the programs serving families with children who might most benefit from early childhood education and care are funded, at least partially, by state or federal sources.

Parents are clearly concerned about their children and themselves being exposed to COVID-19 as a result of being enrolled in early childhood education and care. These concerns were higher for a number of different racial/ethnic groups. In general, and across groups, parents expressed preferences for care either in their home or in centers, and felt that their children and families had the lowest chance of exposure to COVID-19 when child care was in their own homes. It is notable that, in spite of these concerns, many families still preferred center-based care. This may indicate that parents feel that the benefits of this type of care balance the risk of COVID-19 exposure.

To better understand how concerns about potential exposure to COVID-19 in different types of care interacted with parents' preferences for care in light of COVID-19, the association between these two variables were graphed (Figure 4-9). The general trend of parents' believing in-home care represented the lowest risk for exposure to COVID-19 was repeated. Parents who said that they would prefer in-home care were most likely to say that they were "very" or "somewhat" concerned about the risk of COVID exposure in all other types of care. It is also notable that parents who said that they would prefer center-based care judged the risk of exposure in such care to be greater than that for in-home care but still would choose center-based care. This was also true of families choosing other types of care outside of the home. This may indicate that these parents are considering factors other than COVID exposure risk when choosing care or feel that the benefits of their preferred type of care balance the risk of COVID-19 exposure. The same interactions were observed across different racial/ethnic groups.

Figure 4-9. Perceived risk of COVID-19 in different care settings, by preference for care setting type



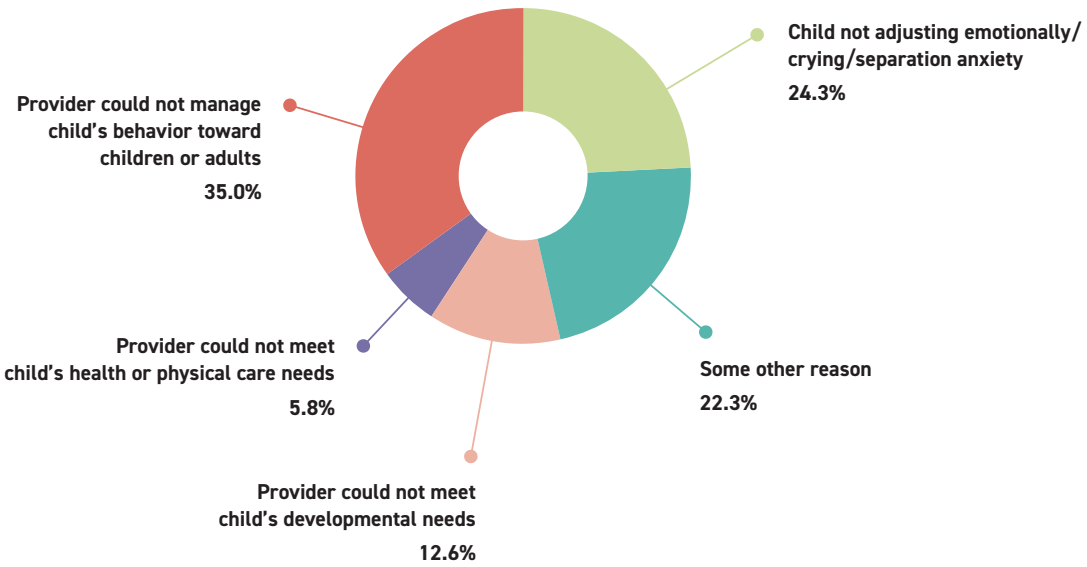
5 Suspension & Expulsion

All respondents to the survey who indicated that their focal child had been in an early childhood care or education arrangement for at least 8 hours a week since March 2020 were also asked to indicate if they had **ever** been told that their child "*might need to 'take a break' or leave care, either permanently or temporarily*". Slightly over 6% of all children had been asked to do this. Their parents were then asked a follow up question about the main reason given for the request.

Thirty-five percent of parents indicated that the main reason that their children were asked to take a break from care was that the provider could not handle the child's behavior towards children or adults (see Figure 5-1). This was followed by the child being unable to adjust emotionally, crying or having separation anxiety. Approximately 22% of parents/caregivers cited other reasons for their child being asked to take a break from care. These included the provider deciding that they did not want to provide care any longer, providers being concerned about exposure to COVID-19 and children's inability to comply with masking requirements. A number of other parents also noted that the providers had too many children and needed to have fewer. It was not clear whether this was due to COVID-19. The provider's inability to meet the child's physical and developmental needs were the two least cited reasons.

When the information was examined by the child's race/ethnicity (Figure 5-2), results showed that children who were American Indian or Alaskan Native and Hispanic or Latinx were most likely to be to be asked to leave care either permanently or temporarily. Children who were identified as Hispanic or Latinx or White were most likely to be asked to leave care because the provider could not handle the child's behavior towards others. For both Hispanic or Latinx children and White children, the next most commonly cited reason for being asked to leave care was the inability to adjust emotionally followed by other reasons. For the other groups, the numbers were too small to draw conclusions about reasons for being asked to leave care.

Figure 5-1. Top reasons for child being asked to leave care



Children from homes in which Spanish was the primary language were almost two times as likely to be asked to leave care as children in homes in which the primary language spoken was English (10.1% vs. 5.7%, respectively; see Appendix B). Children living in a home in which Spanish was the primary language were almost twice as likely than those in which English was the primary language to be asked to leave care because the child was not adjusting emotionally (36.7% vs. 19.4%, respectively). Children in which English was the primary home language were most likely to be asked to leave care due to having behaviors that the provider could not manage.

There were not many differences in whether children were asked to leave care and the reasons for the request between children from lower income families and those in higher income families. When geographic regions were examined, there were not large differences between regions for whether children were asked to take a break from care. However, children in rural areas were less likely than those in urban areas to be asked to take a break due to the provider's inability to manage the child's behavior (25% vs. 40.3% respectively).

The most striking differences between groups emerged when the frequencies with which children experiencing disabilities and/or chronic health care needs were asked to leave care were examined. These children were asked to leave care at a high rate (14.7%). Further, they were likely to be asked to leave care because either the provider could not manage the child's behavior or could not provide for the child's developmental needs (Figure 5-3).

Figure 5-2. Children asked to 'take a break' from care, by race/ethnicity

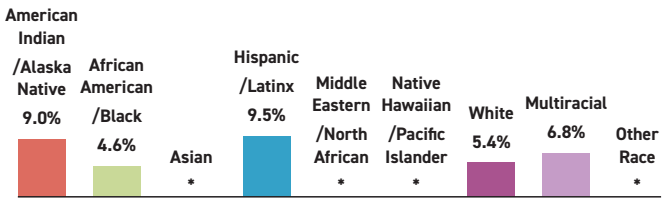
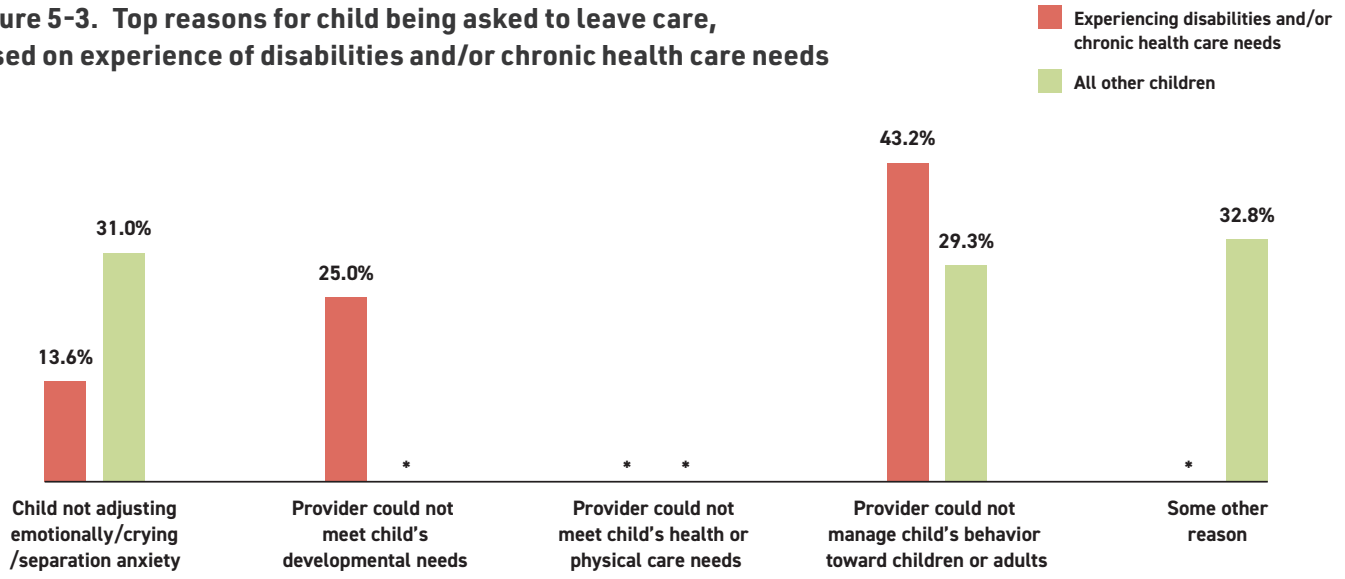


Figure 5-3. Top reasons for child being asked to leave care, based on experience of disabilities and/or chronic health care needs



Reflections on the 2019 Household Survey

Compared to the 2019 Household Survey, the rates of children being asked to leave care were very similar (5.1% in 2019 vs 6.3% in 2020). The largest differences were seen in the frequencies with which children in different racial or ethnic groups were asked to take a break from care. In 2019, children identified as American Indian or Alaska Native or Native Hawaiian (a different grouping than the 2020 survey) and children from multiracial or multiethnic backgrounds were the most likely to have been asked to leave care. The percentages of children asked to leave care who were identified as American Indian or Alaska Native or multiracial or multiethnic were lower in 2020 than in 2019, decreasing about 5% and 8%, respectively. By contrast, the percentage of children identified as Hispanic or Latinx who had ever been asked to leave care increased from 2019 to 2020 by about 3%. Another notable difference across the years is that in the 2019 survey, children in rural areas were more likely to be asked to leave care due to the provider's inability to manage their behavior than were children in urban areas. This difference was reversed in the findings presented here. In the 2019 survey, rates of children experiencing disabilities and/or chronic health care needs being asked to leave care were not examined.

Summary & Recommendations

The 2020 Household Survey asked parents and caregivers of children age 5 years and younger to describe their experiences with finding and using child care across the state of Oregon during the time of the COVID-19 pandemic. Comparisons could be made to the 2019 Household Survey; however, due to differences in sampling methodology and the use of weights in analyses (described in the Methodology section), such comparisons should be considered reflections upon differences rather than statistical analyses or tests of change. Additionally, parents were asked about their experiences of disruptions in care due to COVID-19, their usage of online and remote services, and their preferences and concerns about early childhood care and education services in light of COVID-19. Survey findings helped to identify a number of current strengths as well as opportunities for improvement of Oregon's early childhood care and education systems.

Patterns of Usage and Satisfaction

Use of Early Care and Education Services

The majority of parents responding to the survey (53.2%) had at least one child in early care and education services for at least 8 hours a week since March 2020, which was slightly lower than the percentage in 2019 (59.4%). On average, families who were using child care reported using days and hours that represented full-day, full-week care. Across different groups of families, those with children identified as American Indian or Alaska Native, Asian, and Middle Eastern or North African were least likely to have their child in care since the onset of the COVID-19 pandemic. The highest percentages of children in care were among families with higher income, families living in frontier areas, and families who spoke English.

Of parents with children in care, 47.3% had their child in center-based care, a drop of about 5% from the 2019 Household Survey (52.3%). Just over one half (51.2%) of the families reported that the child had been in care in their home with a friend, relative, neighbor, or nanny—a 14% increase over the percentage of families reporting the use of this type of care in 2019 (37.4%). The changes from 2019 to 2020 were mostly likely due to the closures that accompanied the COVID-19 pandemic and concerns about exposure in out-of-home care (see below). Across groups, children identified as White, Asian, or multiracial or multiethnic, those whose primary language was English, and those living in frontier areas were more likely to be in a child care center or preschool. Children identified as American Indian or Alaska Native, African American or Black, or Hispanic or Latinx and those whose primary language was Spanish were more likely to be receiving care in their own homes.

Slightly over one third (35.1%) of parents reported that they had tried to find care for their child during the past year. This was slightly higher than the percentage of families who reported seeking care in 2019 (32.2%). On the one hand, given the disruptions in care that many families experienced (see below), it is surprising that this percentage is not higher. On the other, given historic rates of unemployment due to the pandemic and parent concerns about the risk of exposure to COVID-19 in out-of-home care (see below), a larger increase in the numbers of families seeking care might not be expected. Of those who did not have their child in child care, White and African American or Black children and those in English-speaking homes were more likely to have parents who had sought care in the past year. Fewer Spanish-speaking parents and parents with lower incomes had tried to find care in the past year.

Overall, it is clear that child care and education services in Oregon are being utilized and continue to be needed and valued by parents of young children, although the rates of usage of such care may have altered due to the COVID-19 pandemic. At the same time, challenges finding and accessing the types of affordable, quality care that parents value were common.

Satisfaction with Current Early Care and Education Services

When asked if they were satisfied with the number of days a week and the number of hours per day that were available for their child to be in care, over three quarters of all parents reported that the amounts were "about right" (78.1% and 75.5% for day and hours, respectively). Parents of children experiencing disabilities and/or chronic health care needs and families with lower incomes were more likely to say that they did not have enough days per week of care. Those same parents and parents of American Indian or Alaska Native, Hispanic or Latinx, and multiracial or multiethnic children were most likely to say that they did not have enough hours per day of care.

When asked to name one thing that they would change about their current child care arrangements other than cost, 42.2% of parents noted that their current arrangements were "just right".

This was by far the most frequently endorsed answer across all groups of parents. While this is a strength, it also suggests that there is room for improvement in the early care and education arrangements of the majority of parents. For example, families with a home language other than English were more likely to want a provider who better represented their child's culture, language, or ethnicity—while families with lower incomes and families whose child was experiencing disabilities and/or chronic health care needs were more likely to want a different type of setting or facility and fewer different arrangements.

Families were also asked how satisfied they were with health and safety procedures that their early childhood education and care arrangement provided. Overall, most parents (86.4%) felt that these were "about right". This was true across different racial and ethnic, language, and income groups. One important difference was that one quarter of parents of children experiencing disabilities and/or chronic health care needs felt that the health and safety procedures at their care arrangements were "not enough".

Challenges Faced by Parents

Availability of Early Care and Education Services

Parents overwhelmingly indicated that finding the type of care that they wanted and availability of slots were the greatest challenges to finding care. As noted previously, the overall supply of early childhood education and care decreased during 2020 due to the COVID-19 pandemic, which is consistent with parents feeling that availability was a challenge. However, in the 2019 Household Survey, parents had cited availability as one of the biggest challenges to finding care, suggesting that this is a longer-standing issue that existed prior to the COVID-19 pandemic. Difficulties finding the type of care wanted may be more tied to the COVID-19 pandemic, especially in light of increases in the frequency of children being in an at-home care arrangement and parents' perceptions of the risk of COVID-19 exposure in different types of care (discussed below). It should be noted that in the 2019 Household Survey families in frontier regions were most likely to endorse difficulties in availability and this was not the case in 2020. Given that families in these regions were least likely to report disruptions in child care due to COVID-19 (see below), it may be that some combination of families choosing to take their children out of care because of COVID-19 and the lack of overall disruption led to more availability in these regions. This hypothesis would need to be explored more thoroughly in the future, and it would be important to examine how challenges might change as the pandemic subsides.

Need for Culturally and Linguistically Responsive Early Care and Education Services

The majority of parents of children of color and those who spoke Spanish or a language other than English had **difficulties finding a provider who reflected the family's cultural background and/or who spoke the child's language**. That parents saw this as a challenge indicates their preferences for providers who reflect their cultures and home languages. This is consistent with the findings from the 2019 Household Survey. As Oregon's population becomes increasingly diverse, it will continue to be important to recruit and support providers from a variety of racial, ethnic, and cultural backgrounds as well as those who speak languages other than English. Importantly, examining the routes by which people from different traditionally minoritized groups can receive training in early childhood care and education, as well as in setting up their own businesses (if applicable), may help to create a more diverse workforce.

Need for Services for Children with Developmental and Health Needs

Parents in frontier areas of the state and those with children with special medical or developmental needs were most likely to cite difficulties in finding a provider who could support the needs of their child with a physical or other disability. Parents of children experiencing disabilities and/or chronic health care needs also reported higher rates of challenges overall. This suggests that there is a lack of services for these children, especially for those in frontier areas. To address this issue, examining the types of training that are offered to providers—particularly those in remote regions in which services are likely to be least available or accessible—might suggest routes to ensuring a higher supply of providers who are able to meet a variety of needs. Expanding professional development opportunities as well as the availability of consultants with specialized experience (e.g., Early Childhood Mental Health specialists) might also increase families' access to the services that their children need.

Children Being Asked to Leave Care

In a 2019 survey of providers across Oregon completed for the PDG B-5 Strengths and Needs Assessment,[1] 44% of facilities reported having asked a child to leave care either temporarily or permanently. In the current survey, 6.3% of parents reported that their child had been asked to "take a break" or leave care either temporarily or permanently, a slight increase over the rate reported by parents (5%) in the 2019 Household Survey. The most often cited reason for the request was that the provider could not handle the child's behavior towards others. This was followed closely by the child being unable to adjust emotionally, crying, or having separation anxiety. **Children of color and those experiencing disabilities and/or chronic health care needs were asked to leave care at high rates.** The primary reasons for children of color being asked to leave care paralleled those for all groups. Children experiencing disabilities and/or chronic health care needs were most likely to be asked to leave care because the provider could not manage the child's behavior or because the provider could not meet the child's developmental needs. These findings suggest that providers need more training and support around handling behaviors that they perceive to be challenging. They also suggest that providers may need more information about diverse cultural backgrounds and abilities and training about the effects that their own implicit biases may have on the ways that they interpret children's behaviors.

The Effects of COVID-19 on Usage and Perceptions of Care

Most Families Experienced a Disruption in Care and Special Services

Parents answering the 2020 Household Survey were facing the challenges of the global pandemic, which included effects on the availability of early childhood care and education, historic levels of unemployment, and restrictions on many services designed to help families. Almost 60% of all parents reported that they had experienced a disruption in child care, mainly because their provider was either not providing onsite care or had closed. Although, overall, children identified as being from a racial or ethnic background other than White experienced slightly lower rates of having care disrupted, children who were identified as African American or Black had the highest overall rate of disruption (73.8%). Children experiencing disabilities and/or chronic health care needs were also more likely to have experienced a disruption in care (63.5%) than their peers (58.8%). Further, parents of children experiencing disabilities and/or chronic health care needs reported having difficulties in accessing services, with the majority of parents who used services reporting that they had problems accessing developmental and special education services (62.1%) and mental or behavioral health services (59.9%).

Families Use of Online or Remote Early Childhood Services

While a majority of families experienced a disruption in care, just over one third (36.5%) were offered any online or remote services. The availability of remote early childhood services varied across racial and ethnic groups. Children identified as Middle Eastern or North African (52.4%), Asian (46.8%), and American Indian or Alaska Native (42.9%) were **most likely** to have been offered these services, while children who were identified as African American or Black (32.3%) were **least likely** to be offered online or remote services. Parents who were offered these services tended to use them. The services most likely to have been used were online classes, picking up or receiving worksheets/activities, and utilizing special apps. In contrast, picking up or receiving meals and other supplies were the least utilized services. For the families that did use them, however, picking up or having meals, worksheet/activities, or other supplies dropped off were the services that most parents rated as "somewhat" or "very" useful. Families of children of color, families with lower incomes, those speaking languages other than English, those in frontier and rural areas, and those with children experiencing disabilities and/or chronic health care needs were most likely to be offered the services of picking up or receiving meals, worksheets/activities, supplies, and information about caring for their child, and were most likely to utilize these services when offered. These findings suggest that many families, particularly those from traditionally underserved and marginalized populations, were interested in services when they were offered. Given that many of these families may depend on their care arrangements not only for care but also as a way for their children to receive meals and other services, increasing the availability of such services even in the face of site closure warrants further consideration to ensure that families' needs are met.

1 Burton, M., Green, B. L., Miao, A. J., Pears, K. C., Scheidt, D., & Tremaine, E. (2019). Oregon Preschool Development Grant Birth-Age 5 Strengths and Needs Assessment. Report submitted to the Oregon Early Learning Division and Early Learning Council, November, 2019.

Parents Had Clear Concerns About Exposure to COVID-19

When asked about concerns regarding their children returning to care after a disruption in care, 82% of parents reported being concerned that their child or family would be exposed to COVID-19. Parents with children who were identified as African American or Black were most likely to be concerned about possible exposure to COVID-19 (93.4%). When asked if they were concerned about the potential for exposure in different types of care, parents were much less likely to be concerned about care by a relative, friend, neighbor, or nanny in their own home than for any type of care outside the home, including home-based care in someone else's home and center- and school-based care. Parents of children of color expressed the highest concerns about all types of out-of-home care. These concerns are warranted when viewed against a backdrop of findings that rates of COVID-19, as well as hospitalization and death from COVID-19, are higher for people of color.[1] These findings suggest that explorations with families from different groups to identify their specific concerns about the potential risks of exposure to COVID-19 would help to better understand and possibly address these concerns moving forward.

Parents' Preferences for Different Types of Care May be Shaped by Concerns About COVID-19

When asked what type of early childhood education and care they would prefer "right now, in light of COVID-19", almost equal proportions of parents said that they would prefer center-based (39.7%) or in-home care (37.9%). Families with children identified as African American or Black, Hispanic or Latinx, and multiracial or multiethnic were generally more likely to indicate that they would rather have their children in care in their own homes. Concerns about exposure to COVID-19 appear to be driving some of these preferences. When the interaction between concerns about exposure in each type of care and preferred type of care were examined, it was clear that parents who said they would prefer in-home care showed the highest levels of concern about exposure in any out-of-home care. It is also notable that families who said that they would prefer any type of out-of-home care judged the risk of exposure in such care to be greater than that for in-home care, which may indicate that these parents are considering factors other than COVID-19 exposure risk when choosing care or feel that the benefits of their preferred type of care balance the risk of COVID-19 exposure. These findings suggest that if families are going to opt for in-home care at higher rates, at least in the short term, considering how to increase opportunities for in-home caregivers to receive information about child development and early learning might contribute to their children's development. Making such information easy to access would also be important. For families who opt for center-based care, helping those families to understand the precautions being taken to prevent COVID-19 exposure might help to allay some families' worries.

Recommendations

The findings from the 2020 Household Survey provide a unique snapshot of the needs for early care and education opportunities across multiple groups and geographic regions at a unique point in time. The COVID-19 pandemic has clearly impacted families' abilities to access early childhood education and care and other services. With the advent of vaccines to protect against COVID-19, some of these impacts may ease but there are likely to be a number of longer-lasting effects on both capacity and demand for early childhood education and care. Parental concerns and preferences are likely to shape changes in services over time. This survey has helped to illuminate some of the current patterns of usage and parental concerns. It also allows us to see that expansion and continued support are needed to:

1. Continue to increase the availability of early care and education services around the state, particularly for center-based care as it seems to be one clear preference for parents.
2. Continue to increase services for children and their families with special development and medical needs with attention to ways to sustain the availability of these services even if other early childhood care services are disrupted.
3. Continue to diversify the provider workforce in terms of racial/ethnic, cultural, and language diversity, as well as increase professional development opportunities focused on ways to provide culturally and linguistically responsive care.

1 CDC. Hospitalization and Death by Race/Ethnicity. Retrieved from https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html.

4. Continue to expand providers' skills in developmentally appropriate practices, teaching social-emotional skills, and managing behavior.
5. Provide opportunities for providers to learn how implicit biases may affect perceptions of and responses to children's behaviors.
6. Consider approaches to and systems for providing caregivers in children's homes with information about child development and early learning.

Many Oregon parents are currently facing multiple family stressors due to the COVID-19 pandemic, including disruptions in their early childhood education and care. In spite of these difficulties and concerns about the risk of COVID-19 exposure, parents clearly want and value early care and education opportunities. In a time in which the entire system of early childhood education and care is facing the unprecedented challenge of determining how to maintain quality services to families in the face of a pandemic, Oregon has continued to prioritize early childhood education in legislation and funding. Findings from this survey not only provide support for such efforts, but can also help to further inform these efforts and clarify changes in parental considerations and preferences to help the system meet and move beyond the challenges of this unique period.

Appendix A

Survey Technical Report

Table A. 2020 Household Survey Instrument

PDG 2020 Household Survey

1. Are you currently a **primary caregiver or parent** for at least one child who **is under age 6 years AND** who has not yet started kindergarten?

    1- Yes
    2- No [If no, then go to message "Right now, only adult caregivers of children under 6 years of age who have not yet started kindergarten who are living in Oregon are eligible to take the survey. Thank you for your time."]

2. Are you currently living in Oregon?

    1- Yes
    2- No [If no, then go to message "Right now, only adult caregivers of children under 6 years of age who have not yet started kindergarten who are living in Oregon are eligible to take the survey. Thank you for your time."]

3. Are over the age of 18?

    1- Yes
    2- No [If no, then go to message "Right now, only adult caregivers of children under 6 years of age who have not yet started kindergarten who are living in Oregon are eligible to take the survey. Thank you for your time."]

4. What is your zip code? _____

5. In what Oregon county are you living? (Drop down list of 36 counties).

Demographic Information

First, we have a few questions that will help us to paint a picture of the families we have spoken to – these ask about you, your background, and your family resources. Please keep in mind that none of this information will be connected to your name, and all of it will be used to help improve child care for Oregon's families.

6. How old are you?
    a. 18-24
    b. 25-39
    c. 40-54
    d. 55 and older
    e. Prefer not to answer

7. How would you describe your gender?
    a. Female
    b. Male
    c. Nonbinary
    d. Gender nonconforming
    e. Prefer not to answer

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8. Which of the following racial or ethnic groups describes your background? (select all that apply)
   A. White
      1-yes
      2-no

      A1. If yes, are you: (select all that apply)
         a. Eastern European
         b. Slavic
         c. Western European
         d. White/Caucasian
         e. Other White: _____

   B. American Indian or Alaska Native
      1-yes
      2-no

      B1. yes, are you: (select all that apply)
         a. American Indian
         b. Alaska Native
         c. Canadian Inuit, Metis, or First Nation
         d. Indigenous Mexican, Central American, or South American

   C. Hispanic/Latino
      1-yes
      2-no

      C1. If yes, are you: (select all that apply)
         a. Central American
         b. Mexican
         c. South American
         d. Other Hispanic/Latino: _____

   D. Asian
      1-yes
      2-no

      D1. IF yes, are you: (select all that apply)
         a. Asian Indian
         b. Chinese
         c. Filipino/a
         d. Hmong
         e. Japanese
         f. Korean
         g. Laotian
         h. South Asian
         i. Vietnamese
         j. Other Asian: _____

E. Native Hawaiian or Pacific Islander
   1-yes
   2-no

   E1. IF yes, are you: (select all that apply)
      a. Guamian
      b. Micronesian
      c. Native Hawaiian
      d. Samoan
      e. Tongan
      f. Other Pacific Islander: _____

F. African American or Black
   1-yes
   2-no

   F1. IF yes, are you: (select all that apply)
      a. African American
      b. African
      c. Caribbean
      d. Other Black: _____

G. Middle Eastern/North African
   1-yes
   2-no

   G1. IF yes, are you: (select all that apply)
      a. Northern African
      b. Middle Eastern

H. Other
   1-yes
   2-no
   Please describe: _____

I. Don't know/prefer not to answer

9. What language(s) do you typically speak at home?

a.	English	1- yes	2-no
b.	Spanish	1- yes	2-no
c.	Russian	1- yes	2-no
d.	Vietnamese	1- yes	2-no
e.	Chinese	1- yes	2-no
f.	Other	1- yes	2-no

Please specify: _____

10. Which of the following best describes your total household income for the past year?

    a. Less than $10,000 per year
    b. $10,000-14,999
    c. $15,000-19,999
    d. $20,000-24,999
    e. $25,000-29,999
    f. $30,000-34,999
    g. $35,000-39,999
    h. $40,000-44,999
    i. $45,000-49,999
    j. $50,000-59,999
    k. $60,000-69,999
    l. $70,000-79,999
    m. $80,000-99,999
    n. $100,000 or more

11. How many people in your household are supported by that income? _____

12. How many of the children you care for are:
    a. Less than 1 year old _____
    b. Between 1 – 3 years old _____
    c. 3- 5 years old _____
    d. Older than five years **but not yet in kindergarten** _____
    e. Currently in kindergarten or older _____

The next questions are about child care programs or services you may have used. When you answer these questions, we would like you to focus on the **oldest child you have who has not yet started kindergarten**.

13. How old is this child?
    a. Less than 1 year old
    b. Between 1 – 3 years old *(under age 3)*
    c. 3-5 years old *(under age 5)*
    d. Older than five years **but not yet in kindergarten**
    e. Age 5 years or older and in school/kindergarten or older

14. What is your relationship to this child?
    a. Mother/Step Mother/Adoptive Mother
    b. Father /Step Father/Adoptive Father
    c. Foster Parent
    d. Grandparent
    e. Other. Please describe: _____

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15. Which of the following racial or ethnic groups describes this child's background?

A. White
   1-yes
   2-no
   A1. If yes, are you: (select all that apply)
      f. Eastern European
      g. Slavic
      h. Western European
      i. White/Caucasian
      j. Other White: _____

B. American Indian or Alaska Native
   1-yes
   2-no

   B1. yes, are you: (select all that apply)
      e. American Indian
      f. Alaska Native
      g. Canadian Inuit, Metis, or First Nation
      h. Indigenous Mexican, Central American, or South American

C. Hispanic/Latino
   1-yes
   2-no

   C1. If yes, are you: (select all that apply)
      e. Central American
      f. Mexican
      g. South American
      h. Other Hispanic/Latino: _____

D. Asian
   1-yes
   2-no

   D1. IF yes, are you: (select all that apply)
      k. Asian Indian
      l. Chinese
      m. Filipino/a
      n. Hmong
      o. Japanese
      p. Korean
      q. Laotian
      r. South Asian
      s. Vietnamese
      t. Other Asian: _____

E. Native Hawaiian or Pacific Islander
   1-yes
   2-no

   E1. IF yes, are you: (select all that apply)
      g. Guamian
      h. Micronesian
      i. Native Hawaiian
      j. Samoan
      k. Tongan
      l. Other Pacific Islander: _____

F. African American or Black
   1-yes
   2-no

   F1. IF yes, are you: (select all that apply)
      e. African American
      f. African
      g. Caribbean
      h. Other Black: _____

G. Middle Eastern/North African
   1-yes
   2-no

   G1. IF yes, are you: (select all that apply)
      c. Northern African
      d. Middle Eastern

H. Other
   1-yes
   2-no
   Please describe: _____

I. Don't know/prefer not to answer

Section A. Types of Care Being Used & Reasons for Care

16. Thinking just about [Focus Child], ***since March 2020*** has s/he been cared for by someone other than a parent or guardian **for at least 8 hours per week on a regular basis (not just occasional babysitting)?**
   1- Yes
   2- No – If no: "Have you tried to find child care for [Focus Child] in the past year?"
      ___Yes – Go to Question B2 (Challenges finding care)
      ___No – Go to Question C1 (first suspension/expulsion question).

17. Which of the following describes the types of care provided **on a regular basis** for your child/children since March 2020?

a.	Care in your child's home by a friend, relative, neighbor or nanny	1- yes	2-no
b.	Care provided **outside your home** by someone who was not related to you, including family or home based childcare programs.	1- yes	2-no
c.	Care in a childcare center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school.	1- yes	2-no
d.	Preschool provided at an elementary school.	1- yes	2-no
e.	Care in another type of setting, please describe: _____	1- yes	2-no

18. In a typical week, how many **days per week** is your child in these child care arrangements?

a. ____ days per week.
b. Given your family's childcare needs, is this:
   1- About Right
   2- Not enough
   3- too much

19. In a typical week, how many **hours per day** is your child in these settings?

a. ____ hours per week.
b. Given your family's childcare needs, is this:
   1- About Right
   2- Not enough
   3- too much

20. Other than cost, if you could change **one thing** about this child's current childcare arrangements, what would it be?

1- More convenient
2- Different type of setting or facility (e.g., prefer a center but using a nanny)
3- Fewer different arrangements to get the coverage I need
4- Fewer children/smaller setting
5- More communication from the provider
6- Better quality environment (play areas, toys, etc.)
7- Provider I liked or trusted more
8- Provider who better represented my child's culture, language or ethnicity
9- Something else: _____
10- Nothing, it's just right.

21. How do you feel about the health and safety procedures that your childcare provides?

1- About Right
2- Not enough
3- Too much

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Section B. Challenges Finding Care

22. Since March 2020, have you ever used or tried to find child care?
    1- Yes
    2- No (If no, go to #24)

23. Families often experience challenges finding high quality childcare that meets their needs. Below is a list of potential challenges. For each one, please indicate whether each was: *(1) not a challenge; (2) a little challenging; (3) a big challenge*

	Not a Challenge	A little challenging	A big challenge	
a. Finding the type of child care setting you wanted (e.g., nanny, home based, center)	1	2	3	
b. Finding a provider who spoke your child's home language	1	2	3	
c. Finding a provider who was well-qualified in terms of experience and/or education	1	2	3	
d. Finding a provider who you felt could help your child learn and develop	1	2	3	
e. Finding a provider who could meet your child's health needs	1	2	3	
f. Finding a provider who could support your child's needs related to a physical or other disability	1	2	3	9– Not applicable
g. Finding a provider who reflected your family's cultural background	1	2	3	
h. Finding a provider with open slots/availability	1	2	3	
i. Finding a provider in a location that was easy for you to get to	1	2	3	
j. Finding a provider who uses health and safety standards I agree with	1	2	3	

Section C. Suspension/Expulsion

24. Have you ever been told by a childcare provider that your child might need to "take a break" or leave care, either permanently or temporarily?
    1- Yes
    2- No (If no, go to #27)

25. How old was the child when this happened? ____ Months

26. What was the primary reason given?
    a. Provider could not manage child's behavior towards other children or adults
    b. Provider could not meet child's health or physical care needs
    c. Provider could not meet child's developmental needs
    d. Child not adjusting emotionally/crying/separation anxiety
    e. Other: _____

Section D. Covid-19 and Future Plans

27. Was your child's childcare interrupted due to Covid-19 (please select the best response)?
    1-No (If no, go to #29)
    2-Yes, the program is not providing on-site classroom services or is closed
    3-Yes, the program has reduced on-site hours
    4-Yes, the program is serving only essential workers

28. If you are thinking about having your child go back to child care, or you child recently went back to care, how concerned are/were you, if at all, about the following. Please indicate whether you were very concerned, somewhat concerned, not too concerned, not at all concerned, or don't know.

	Very Concerned	Somewhat concerned	Not too concerned	Not at all concerned	Don't know
a. My previous child care provider won't/wouldn't be open.	1	2	3	4	5
b. My child's teacher won't/wouldn't be the same.	1	2	3	4	5
c. My child and family will be more likely to be exposed to Covid-19.	1	2	3	4	5
d. I won't/wouldn't be able to afford child care.	1	2	3	4	5
e. My slot will be given to someone else.	1	2	3	4	5
f. I would have difficulty providing transportation.	1	2	3	4	5
g. Something else. Please describe: _____	1	2	3	4	5

29. Has your child care program provided any remote or online services during the COVID-19 pandemic?
    1- Yes
    2- No (If no, go to #31)

30. Please indicate whether the following remote or online services from your child care program have been useful to you.

	Not Offered	Did not use	Not at all useful	Somewhat useful	Very useful
a. Picking up or having meals or food dropped off	1	2	3	4	5
b. Picking up or having activities and/or worksheets dropped off	1	2	3	4	5
c. Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	1	2	3	4	5
d. Receiving information or printed Materials about caring for my child	1	2	3	4	5
e. Participating in Zoom, Facebook, or other online classes where the teacher is live	1	2	3	4	5
f. Watching recorded videos online From the teacher	1	2	3	4	5
g. Using special apps with activities/ videos/information	1	2	3	4	5
h. Other: Please describe: _____	1	2	3	4	5

31. Right now, in light of Covid-19, if you could have your child in any type of care, which type would you prefer? (Please choose your top choice.)

    1- Care in your child's home by a friend, relative, neighbor or nanny
    2- Care provided **outside your home** by someone who was not related to you, including family or home based childcare programs.
    3- Care in a childcare center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school
    4- Preschool provided at an elementary school.
    5- Care in another type of setting, please describe: _____

32. For each of the following types of child care, please rate how concerned you would be about your child and family's potential exposure to Covid-19 if your child was in this type of care.

	Very concerned	Somewhat concerned	Not too concerned	Not at all concerned	Don't know
a. Care in your child's home by a friend, relative, neighbor or nanny	1	2	3	4	5
b. Care provided **outside your home** by someone who is not related to you, including family or home based childcare programs.	1	2	3	4	5
c. Care in a childcare center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school.	1	2	3	4	5
d. Preschool provided at an elementary school.	1	2	3	4	5

33. Does this child have an IFSP, or special developmental or medical needs?
    1- Yes
    2- No (If no, go to #35)

34. If they were using any of the following services, are you currently able to access these services?

	Did not use	Yes, problems accessing	No problems accessing
a. Physical health services	1	2	3
b. Mental/behavioral health services	1	2	3
c. Speech therapy	1	2	3
d. Occupational therapy	1	2	3
e. Physical therapy	1	2	3
f. Developmental/special education classroom services	1	2	3
g. Early supports for infants and toddlers	1	2	3
h. Other Please describe: _____	1	2	3

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Table A. 2020 Household Survey Instrument *continued*

Section E. Conclusion

We just have a few more questions about you and your family.

35. What is your current marital status?
    1- Married
    2- Not married but living with a partner
    3- Single
    4- Prefer not to answer

36. What is your highest level of education?
    1- Completed some schooling but do not have a high school diploma or GED
    2- Have a high school diploma or GED
    3- Have some college or at 2-year degree/certificate
    4- Have a 4- year college degree or more advanced degree
    5- Prefer not to answer

37. Which of the following best describes your employment status:
    1- Currently employed/working full time (more than 32 hours per week)
    2- Currently employed/working part time (less than 32 hours per week)
    3- Currently not employed

38. If married or living with a partner, which of the following best describes your spouse/partner's employment status?
    1- Currently employed/working full time (more than 32 hours per week)
    2- Currently employed/working part time (less than 32 hours per week)
    3- Currently not employed
    4- Not married or living with a partner.

Thank you so much for completing this survey – your input is greatly appreciated!

The link below will take you to a new page where you can give us your contact information so we can send your $20 gift card.

[LINK]

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Appendix B

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Table B1. In child care 8 or more hours per week, statewide

	Percent
No	46.8%
Yes	53.2%

Table B2. In child care 8 or more hours per week, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
No	56.4%	44.6%	54.6%	48.8%	76.2%	45.5%	43.9%	48.3%	*
Yes	43.6%	55.4%	45.5%	51.2%	23.8%	54.6%	56.1%	51.7%	*

Table B3. In child care 8 or more hours per week, by home language

	English	Spanish	Other
No	44.4%	49.1%	66.9%
Yes	55.6%	50.9%	33.1%

Table B4. In child care 8 or more hours per week, by income level

	< 200% FPL	> 200% FPL
No	58.5%	30.3%
Yes	41.5%	69.7%

Table B5. In child care 8 or more hours per week, by region

	Frontier	Rural	Urban
No	33.7%	46.8%	47.6%
Yes	66.3%	53.2%	52.5%

Table B6. In child care 8 or more hours per week, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
No	62.7%	43.9%
Yes	37.3%	56.1%

Table B7. Tried to find child care, statewide

	Percent
No	64.9%
Yes	35.1%

Table B8. Tried to find child care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
No	70.5%	62.1%	64.3%	75.5%	75.0%	*	59.8%	63.2%	*
Yes	29.6%	37.9%	35.7%	24.5%	*	*	40.2%	36.8%	*

Table B9. Tried to find child care, by home language

	English	Spanish	Other
No	62.8%	71.3%	65.1%
Yes	37.2%	28.7%	34.9%

Table B10. Tried to find child care, by income level

	< 200% FPL	> 200% FPL
No	67.7%	56.8%
Yes	32.3%	43.2%

Table B11. Tried to find child care, by region

	Frontier	Rural	Urban
No	64.3%	65.9%	64.6%
Yes	35.7%	34.1%	35.5%

Table B12. Tried to find child care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
No	63.4%	65.3%
Yes	36.6%	34.7%

Table B13. Child care settings, statewide

	Percent
In child's home	51.2%
In someone else's home, by non-relative	36.1%
Child care center or preschool, not in a home	47.3%
Preschool at an elementary school	4.0%
Care in a relative's home	5.2%

Table B14. Child care settings, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
In child's home	47.1%	69.4%	45.7%	62.1%	*	83.3%	45.6%	55.7%	*
In someone else's home, by non-relative	47.1%	43.1%	31.4%	36.1%	*	0.0%	35.1%	34.4%	*
Child care center or preschool, not in a home	41.2%	30.6%	54.3%	32.6%	*	*	54.7%	52.5%	*
Preschool at an elementary school	*	*	*	4.8%	0.0%	0.0%	2.8%	*	0.0%
Care in a relative's home	*	*	0.0%	2.6%	0.0%	*	6.4%	*	*

Table B15. Child care settings, by home language

	English	Spanish	Other
In child's home	48.8%	61.3%	48.8%
In someone else's home, by non-relative	36.1%	36.9%	31.7%
Child care center or preschool, not in a home	52.1%	30.9%	34.1%
Preschool at an elementary school	3.7%	4.6%	*
Care in a relative's home	5.5%	3.7%	*

Table B16. Child care settings, by income level

	< 200% FPL	> 200% FPL
In child's home	58.3%	45.6%
In someone else's home, by non-relative	36.2%	35.9%
Child care center or preschool, not in a home	37.9%	55.1%
Preschool at an elementary school	5.1%	2.9%
Care in a relative's home	5.5%	4.9%

Table B17. Child care settings, by region

	Frontier	Rural	Urban
In child's home	49.1%	51.9%	51.1%
In someone else's home, by non-relative	34.5%	38.6%	35.0%
Child care center or preschool, not in a home	63.6%	48.4%	45.6%
Preschool at an elementary school	9.1%	4.2%	3.6%
Care in a relative's home	*	5.0%	5.1%

Table B18. Child care settings, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
In child's home	59.0%	50.2%
In someone else's home, by non-relative	32.8%	36.4%
Child care center or preschool, not in a home	36.1%	48.8%
Preschool at an elementary school	6.6%	3.6%
Care in a relative's home	8.2%	4.8%

Table B19. Number of different types of care child attends, statewide

	Percent
1	61.7%
2	31.4%
3	6.0%
4	0.8%
5	*

Table B20. Number of different types of care child attends, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
1	64.7%	58.6%	68.6%	65.2%	*	*	60.7%	55.2%	*
2	26.5%	32.9%	25.7%	30.4%	*	*	32.6%	31.0%	*
3	*	*	*	3.6%	0.0%	0.0%	6.6%	10.3%	*
4	*	*	0.0%	*	0.0%	0.0%	*	*	*
5	*	*	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	*

Table B21. Number of different types of care child attends, by home language

	English	Spanish	Other
1	60.3%	65.2%	73.2%
2	32.7%	27.5%	24.4%
3	6.3%	5.3%	*
4	*	*	0.0%
5	*	*	0.0%

Table B22. Number of different types of care child attends, by income level

	< 200% FPL	> 200% FPL
1	62.1%	61.4%
2	29.7%	32.7%
3	6.7%	5.4%
4	*	*
5	*	0.0%

Table B23. Number of different types of care child attends, by region

	Frontier	Rural	Urban
1	47.3%	58.1%	64.4%
2	43.6%	34.0%	29.3%
3	*	7.2%	5.3%
4	*	*	0.8%
5	0.0%	0.0%	*

Table B24. Number of different types of care child attends, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
1	65.3%	61.2%
2	26.4%	32.2%
3	5.8%	6.0%
4	*	0.5%
5	0.0%	*

Table B25. Hours per day in care, statewide

	Percent
<3	2.5%
3-4	7.1%
5-6	14.4%
7-9	55.2%
10-12	14.9%
13-16	1.3%
17-20	1.5%
21+	3.1%

Table B26. Hours per day in care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
<3	0	*	*	3.8%	0.0%	0.0%	2.4%	0.0%	*
3-4	*	*	*	4.7%	0.0%	*	7.8%	15.5%	*
5-6	29.0%	14.1%	*	19.3%	*	*	12.7%	10.3%	*
7-9	48.4%	33.8%	68.6%	49.5%	*	*	59.0%	53.4%	*
10-12	*	43.7%	*	9.4%	0.0%	0.0%	14.6%	13.8%	*
13-16	0.0%	*	*	*	0.0%	0.0%	0.8%	*	*
17-20	0.0%	0.0%	0.0%	3.8%	0.0%	0.0%	1.0%	*	*
21+	*	0.0%	*	7.5%	0.0%	0.0%	1.7%	*	*

Table B27. Hours per day in care, by home language

	English	Spanish	Other
<3	2.0%	4.6%	*
3-4	6.9%	6.1%	17.5%
5-6	13.3%	19.9%	*
7-9	57.9%	43.4%	57.5%
10-12	16.0%	11.2%	*
13-16	1.3%	*	*
17-20	0.7%	5.1%	*
21+	1.9%	8.2%	*

Table B28. Hours per day in care, by income level

	< 200% FPL	> 200% FPL
<3	4.2%	1.0%
3-4	9.7%	5.2%
5-6	17.6%	11.8%
7-9	48.3%	60.7%
10-12	11.1%	18.0%
13-16	1.3%	1.3%
17-20	2.5%	*
21+	5.3%	1.3%

Table B29. Hours per day in care, by region

	Frontier	Rural	Urban
<3	*	2.1%	2.7%
3-4	0.0%	5.2%	8.6%
5-6	*	14.9%	14.6%
7-9	67.9%	55.0%	54.4%
10-12	20.8%	19.1%	12.5%
13-16	0.0%	*	1.6%
17-20	0.0%	*	1.7%
21+	*	1.5%	3.9%

Table B30. Hours per day in care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
<3	4.2%	2.3%
3-4	10.0%	6.8%
5-6	18.3%	13.9%
7-9	49.2%	55.9%
10-12	8.3%	15.8%
13-16	4.2%	0.9%
17-20	*	1.5%
21+	4.2%	2.9%

Table B31. Satisfaction with hours per day in care, statewide

	Percent
About right	75.5%
Not enough	18.1%
Too much	6.5%

Table B32. Satisfaction with hours per day in care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
About right	69.7%	80.3%	77.1%	68.8%	*	83.3%	79.2%	62.5%	*
Not enough	21.2%	15.5%	14.3%	22.6%	*	*	16.1%	23.2%	*
Too much	*	*	*	8.6%	*	0.0%	4.7%	14.3%	*

Table B33. Satisfaction with hours per day in care, by home language

	English	Spanish	Other
About right	77.8%	67.6%	65.9%
Not enough	16.8%	23.2%	19.5%
Too much	5.4%	9.2%	14.6%

Table B34. Satisfaction with hours per day in care, by income level

	< 200% FPL	> 200% FPL
About right	71.7%	78.4%
Not enough	20.7%	16.0%
Too much	7.5%	5.6%

Table B35. Satisfaction with hours per day in care, by region

	Frontier	Rural	Urban
About right	85.2%	78.9%	73.1%
Not enough	*	14.5%	20.7%
Too much	9.3	6.6%	6.2%

Table B36. Satisfaction with hours per day in care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
About right	63.9%	76.9%
Not enough	28.6%	16.8%
Too much	7.6%	6.3%

Table B37. Days per week in care, statewide

	Percent
1	1.6%
2	7.0%
3	13.7%
4	16.2%
5	57.9%
6	2.0%
7	0.8%

Table B38. Days per week in care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
1	*	*	*	*	0.0%	*	*	*	*
2	*	*	*	7.6%	0.0%	*	6.9%	10.2%	*
3	15.2%	*	17.1%	13.3%	0.0%	*	15.2%	*	*
4	30.3%	21.1%	14.3%	16.0%	0.0%	0.0%	13.9%	25.4%	*
5	45.5%	64.8%	54.3%	58.7%	100.0%	*	58.9%	52.5%	*
6	*	7.0%	0.0%	*	0.0%	0.0%		*	*
7	0.0%	0.0%	*	*	0.0%	0.0%	*	*	*

Table B39. Days per week in care, by home language

	English	Spanish	Other
1	1.6%	*	*
2	6.6%	7.1%	15.0%
3	13.9%	13.8%	*
4	15.4%	18.6%	20.0%
5	59.4%	53.3%	50.0%
6	1.7%	2.9%	*
7	0.7%	*	*

Table B40. Days per week in care, by income level

	< 200% FPL	> 200% FPL
1	2.8%	*
2	8.1%	6.2%
3	13.5%	13.9%
4	18.8%	14.1%
5	50.8%	63.8%
6	3.0%	1.1%
7	1.6%	*

Table B41. Days per week in care, by region

	Frontier	Rural	Urban
1	*	1.8%	1.7%
2	*	6.3%	7.8%
3	5.6%	12.8%	14.7%
4	31.5%	12.8%	16.6%
5	55.6%	62.1%	56.2%
6	*	2.4%	1.5%
7	0.0%	*	1.0%

Table B42. Days per week in care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
1	5.0%	1.2%
2	12.6%	6.4%
3	13.4%	13.7%
4	18.5%	15.8%
5	48.7%	59.1%
6	*	2.1%
7	*	0.8%

Table B43. Satisfaction with days per week in care, statewide

	Percent
About right	78.1%
Not enough	19.0%
Too much	2.9%

Table B44. Satisfaction with days per week in care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
About right	76.5%	80.6%	82.9%	72.2%	*	*	81.1%	72.9%	*
Not enough	23.5%	19.4%	*	22.9%	*	*	16.7%	23.7%	0.0%
Too much	0.0%	0.0%	*	4.9%	*	0.0%	2.2%	*	0.0%

Table B45. Satisfaction with days per week in care, by home language

	English	Spanish	Other
About right	80.0%	72.5%	68.3%
Not enough	17.9%	22.3%	24.4%
Too much	2.1%	5.2%	*

Table B46. Satisfaction with days per week in care, by income level

	< 200% FPL	> 200% FPL
About right	72.1%	83.0%
Not enough	24.0%	14.9%
Too much	3.8%	2.1%

Table B47. Satisfaction with days per week in care, by region

	Frontier	Rural	Urban
About right	88.9%	79.8%	76.5%
Not enough	*	18.2%	20.6%
Too much	*	2.1%	2.9%

Table B48. Satisfaction with days per week in care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
About right	61.5%	80.3%
Not enough	34.4%	17.0%
Too much	*	2.7%

Table B49. One change desired to child care, statewide

	Percent
Nothing–arrangements are just right	42.2%
Fewer different arrangements	8.2%
Different type of setting/facility	12.3%
More convenient	9.0%
Better quality environment	7.4%
More communication from the provider	4.2%
Fewer children or smaller setting	4.1%
A provider who better represented child's culture/language/ethnicity	3.1%
A provider liked or trusted more	2.7%
Something else	6.8%

Table B50. One change desired to child care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Nothing–arrangements are just right	44.1%	37.5%	28.6%	44.2%	*	*	42.1%	45.0%	*
Fewer different arrangements	*	8.3%	14.3%	9.3%	0.0%	0.0%	7.5%	*	*
Different type of setting/facility	*	23.6%	*	13.3%	0.0%	0.0%	11.7%	13.3%	*
More convenient	*	11.1%	*	9.3%	0.0%	*	8.6%	8.3%	*
Better quality environment	*	*	*	7.1%	0.0%	*	8.1%	*	*
More communication from the provider	*	*	0.0%	2.2%	0.0%	0.0%	5.3%	*	*
Fewer children or smaller setting	*	*	*	2.7%	0.0%	0.0%	4.5%	*	*
A provider who better represented child's culture/language/ethnicity	*	*	*	5.8%	*	0.0%	0.9%	*	*
A provider liked or trusted more	*	0.0%	*	*	0.0%	0.0%	3.4%	*	*
Something else	*	*	*	4.9%	0.0%	*	7.9%	*	*

Table B51. One change desired to child care, by home language

	English	Spanish	Other
Nothing–arrangements are just right	42.3%	43.5%	34.1%
Fewer different arrangements	7.8%	9.8%	*
Different type of setting/facility	12.3%	13.1%	*
More convenient	8.8%	8.9%	12.2%
Better quality environment	7.8%	7.0%	*
More communication from the provider	4.8%	2.8%	*
Fewer children or smaller setting	4.5%	2.8%	0.0%
A provider who better represented child's culture/language/ethnicity	1.4%	7.0%	19.5%
A provider liked or trusted more	3.1%	*	*
Something else	7.2%	4.2%	12.2%

Table B52. One change desired to child care, by income level

	< 200% FPL	> 200% FPL
Nothing–arrangements are just right	46.0%	39.1%
Fewer different arrangements	9.4%	7.2%
Different type of setting/facility	12.7%	11.9%
More convenient	8.8%	9.0%
Better quality environment	6.0%	8.7%
More communication from the provider	2.0%	6.0%
Fewer children or smaller setting	3.2%	4.9%
A provider who better represented child's culture/language/ethnicity	4.0%	2.5%
A provider liked or trusted more	1.6%	3.6%
Something else	6.4%	7.2%

Table B53. One change desired to child care, by region

	Frontier	Rural	Urban
Nothing–arrangements are just right	63.6%	45.8%	38.9%
Fewer different arrangements	18.2%	8.3%	7.3%
Different type of setting/facility	*	13.4%	12.3%
More convenient	*	6.8%	10.5%
Better quality environment	0.0%	8.9%	7.3%
More communication from the provider	*	1.8%	5.4%
Fewer children or smaller setting	0.0%	3.0%	5.0%
A provider who better represented child's culture/language/ethnicity	*	2.4%	3.6%
A provider liked or trusted more	*	3.6%	2.3%
Something else	*	6.0%	7.4%

Table B54. One change desired to child care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
Nothing–arrangements are just right	32.0%	43.3%
Fewer different arrangements	11.5%	7.8%
Different type of setting/facility	16.4%	11.8%
More convenient	8.2%	9.1%
Better quality environment	4.1%	7.9%
More communication from the provider	4.1%	4.2%
Fewer children or smaller setting	5.7%	3.9%
A provider who better represented child's culture/language/ethnicity	*	3.3%
A provider liked or trusted more	*	2.7%
Something else	13.9%	6.0%

Table B55. Feeling about health and safety procedures, statewide

	Percent
About right	86.4%
Not enough	11.4%
Too much	2.2%

Table B56. Feeling about health and safety procedures, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
About right	73.5%	83.3%	94.3%	84.1%	100.0%	83.3%	87.9%	86.9%	*
Not enough	20.6%	15.3%	*	14.1%	*	0.0%	10.0%	11.5%	*
Too much	*	*	0.0%	*	0.0%	*	2.2%	*	*

Table B57. Feeling about health and safety procedures, by home language

	English	Spanish	Other
About right	86.3%	85.6%	92.7%
Not enough	11.3%	12.6%	*
Too much	2.4%	*	0.0%

Table B58. Feeling about health and safety procedures, by income level

	< 200% FPL	> 200% FPL
About right	84.1%	88.2%
Not enough	13.5%	9.6%
Too much	2.4%	2.1%

Table B59. Feeling about health and safety procedures, by region

	Frontier	Rural	Urban
About right	94.5%	84.0%	86.9%
Not enough	*	13.1%	11.0%
Too much	0.0%	3.0%	2.1%

Table B60. Feeling about health and safety procedures, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
About right	73.0%	88.2%
Not enough	25.4%	9.6%
Too much	*	2.2%

Table B61. Challenges to finding care, statewide

	Percent
Finding the type of child care setting you wanted	86.4%
Finding a provider with open slots or availability	85.9%
Finding a provider who you felt could help your child learn and develop	74.9%
Finding a provider in a location that was easy for you to get to	73.8%
Finding a provider who was well-qualified in terms of experience and/or education	72.5%
Finding a provider who uses health and safety standards you agree with	60.3%
Finding a provider who could meet your child's health needs	40.0%
Finding a provider who reflected your family's cultural background	31.0%
Finding a provider who could support your child's needs related to a physical or other disability	24.6%
Finding a provider who spoke your child's home language	15.6%

Table B62. Challenges to finding care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Finding the type of child care setting you wanted	92.1%	87.5%	80.0%	89.4%	*	*	85.0%	92.1%	*
Finding a provider with open slots or availability	81.6%	84.7%	86.1%	86.2%	*	*	85.6%	90.5%	*
Finding a provider who you felt could help your child learn and develop	81.6%	83.3%	66.7%	79.8%	*	*	72.3%	79.4%	*
Finding a provider in a location that was easy for you to get to	71.1%	84.7%	72.2%	78.0%	*	*	71.0%	80.6%	*
Finding a provider who was well-qualified in terms of experience and/or education	84.2%	80.6%	72.2%	76.7%	*	*	69.1%	79.4%	*
Finding a provider who uses health and safety standards you agree with	76.3%	55.6%	44.4%	67.4%	*	*	57.3%	73.0%	*
Finding a provider who could meet your child's health needs	59.5%	31.9%	44.4%	56.4%	*	0.00%	33.2%	54.0%	*
Finding a provider who reflected your family's cultural background	55.3%	67.6%	51.4%	55.4%	100.0%	0.00%	13.8%	60.3%	*
Finding a provider who could support your child's needs related to a physical or other disability	48.6%	22.2%	19.4%	43.6%	*	0.00%	18.0%	27.4%	*
Finding a provider who spoke your child's home language	*	9.7%	19.4%	46.9%	*	0.00%	5.8%	27.0%	*

Table B63. Challenges to finding care, by home language

	English	Spanish	Other
Finding the type of child care setting you wanted	85.4%	90.4%	89.4%
Finding a provider with open slots or availability	86.0%	83.6%	91.5%
Finding a provider who you felt could help your child learn and develop	73.5%	80.0%	80.9%
Finding a provider in a location that was easy for you to get to	72.3%	78.7%	83.0%
Finding a provider who was well-qualified in terms of experience and/or education	70.8%	79.8%	76.6%
Finding a provider who uses health and safety standards you agree with	57.6%	72.9%	63.8%
Finding a provider who could meet your child's health needs	35.6%	57.6%	55.3%
Finding a provider who reflected your family's cultural background	22.9%	61.3%	63.8%
Finding a provider who could support your child's needs related to a physical or other disability	19.6%	45.0%	41.3%
Finding a provider who spoke your child's home language	5.7%	54.0%	51.1%

Table B64. Challenges to finding care, by income level

	< 200% FPL	> 200% FPL
Finding the type of child care setting you wanted	89.1%	84.2%
Finding a provider with open slots or availability	87.6%	84.6%
Finding a provider who you felt could help your child learn and develop	77.4%	72.9%
Finding a provider in a location that was easy for you to get to	78.4%	69.8%
Finding a provider who was well-qualified in terms of experience and/or education	76.0%	69.6%
Finding a provider who uses health and safety standards you agree with	63.0%	58.1%
Finding a provider who could meet your child's health needs	49.1%	32.1%
Finding a provider who reflected your family's cultural background	38.2%	24.6%
Finding a provider who could support your child's needs related to a physical or other disability	33.7%	16.7%
Finding a provider who spoke your child's home language	23.9%	8.4%

Table B65. Challenges to finding care, by region

	Frontier	Rural	Urban
Finding the type of child care setting you wanted	86.0%	86.7%	86.3%
Finding a provider with open slots or availability	81.3%	87.8%	85.3%
Finding a provider who you felt could help your child learn and develop	68.8%	79.6%	73.1%
Finding a provider in a location that was easy for you to get to	73.5%	73.2%	74.1%
Finding a provider who was well-qualified in terms of experience and/or education	70.8%	74.8%	71.6%
Finding a provider who uses health and safety standards you agree with	47.9%	59.4%	61.6%
Finding a provider who could meet your child's health needs	47.9%	39.1%	39.8%
Finding a provider who reflected your family's cultural background	35.4%	28.4%	31.9%
Finding a provider who could support your child's needs related to a physical or other disability	31.3%	20.7%	25.9%
Finding a provider who spoke your child's home language	22.9%	11.3%	17.1%

Table B66. Challenges to finding care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
Finding the type of child care setting you wanted	91.2%	85.6%
Finding a provider with open slots or availability	85.7%	85.9%
Finding a provider who you felt could help your child learn and develop	82.2%	73.7%
Finding a provider in a location that was easy for you to get to	75.7%	73.4%
Finding a provider who was well-qualified in terms of experience and/or education	81.1%	71.1%
Finding a provider who uses health and safety standards you agree with	65.3%	59.5%
Finding a provider who could meet your child's health needs	63.9%	36.2%
Finding a provider who reflected your family's cultural background	37.2%	29.9%
Finding a provider who could support your child's needs related to a physical or other disability	64.9%	18.0%
Finding a provider who spoke your child's home language	14.2%	15.8%

Table B67. Was child care interrupted by COVID-19, statewide

	Percent
No	40.5%
Yes, the program is not providing on-site classroom services or is closed	34.3%
Yes, the program has reduced on-site hours	12.7%
Yes, the program is serving only essential workers	12.6%

Table B68. Was child care interrupted by COVID-19, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
No	42.9%	26.2%	32.5%	49.7%	42.9%	*	38.1%	38.1%	*
Yes, the program is not providing on-site classroom services or is closed	41.6%	55.4%	33.8%	27.8%	38.1%	*	34.7%	30.5%	*
Yes, the program has reduced on-site hours	*	7.7%	22.1%	12.1%	*	*	13.0%	17.8%	0.0%
Yes, the program is serving only essential workers	10.4%	10.8%	11.7%	10.5%	*	0.0%	14.2%	13.6%	0.0%

Table B69. Was child care interrupted by COVID-19, by home language

	English	Spanish	Other
No	37.7%	50.5%	40.3%
Yes, the program is not providing on-site classroom services or is closed	36.1%	26.2%	39.5%
Yes, the program has reduced on-site hours	12.8%	12.6%	11.3%
Yes, the program is serving only essential workers	13.4%	10.7%	8.9%

Table B70. Was child care interrupted by COVID-19, by income level

	< 200% FPL	> 200% FPL
No	48.0%	29.7%
Yes, the program is not providing on-site classroom services or is closed	32.2%	37.5%
Yes, the program has reduced on-site hours	9.6%	16.8%
Yes, the program is serving only essential workers	10.2%	15.9%

Table B71. Was child care interrupted by COVID-19, by region

	Frontier	Rural	Urban
No	52.4%	43.2%	38.5%
Yes, the program is not providing on-site classroom services or is closed	26.8%	33.9%	35.0%
Yes, the program has reduced on-site hours	11.0%	11.2%	13.4%
Yes, the program is serving only essential workers	9.8%	11.7%	13.1%

Table B72. Was child care interrupted by COVID-19, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
No	36.5%	41.2%
Yes, the program is not providing on-site classroom services or is closed	45.1%	32.4%
Yes, the program has reduced on-site hours	7.7%	13.6%
Yes, the program is serving only essential workers	10.7%	12.8%

Table B73. Concerns about returning to care, statewide

	Percent
My previous provider won't/wouldn't be open	78.5%
My child's teacher won't/wouldn't be the same	60.9%
My child and family will be more likely to be exposed to COVID-19	82.3%
I won't/wouldn't be able to afford child care	67.4%
My slot will be given to someone else	66.0%
I would have difficulty providing transportation	32.5%
Something else (n=233)	43.8%

Table B74. Concerns about returning to care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
My previous provider won't/wouldn't be open	85.3%	76.1%	72.3%	72.9%	88.9%	*	79.7%	82.8%	*
My child's teacher won't/wouldn't be the same	63.2%	63.6%	61.2%	60.3%	70.0%	*	60.2%	62.1%	*
My child and family will be more likely to be exposed to COVID-19	73.2%	93.4%	88.5%	83.7%	100.0%	*	80.7%	84.3%	*
I won't/wouldn't be able to afford child care	77.1%	89.1%	64.7%	75.4%	*	*	60.5%	80.3%	*
My slot will be given to someone else	75.0%	65.6%	66.0%	66.1%	*	*	64.4%	74.6%	*
I would have difficulty providing transportation	45.0%	64.0%	24.5%	44.4%	*	0.0%	23.0%	46.3%	*
Something else (n=233)	*	58.3%	*	35.0%	*	*	41.8%	*	*

Table B75. Concerns about returning to care, by home language

	English	Spanish	Other
My previous provider won't/wouldn't be open	80.0%	71.5%	78.1%
My child's teacher won't/wouldn't be the same	61.0%	61.0%	59.1%
My child and family will be more likely to be exposed to COVID-19	82.0%	83.2%	85.5%
I won't/wouldn't be able to afford child care	65.2%	75.3%	73.9%
My slot will be given to someone else	66.0%	67.2%	63.1%
I would have difficulty providing transportation	28.3%	51.3%	35.3%
Something else (n=233)	44.9%	33.3%	64.3%

Table B76. Concerns about returning to care, by income level

	< 200% FPL	> 200% FPL
My previous provider won't/wouldn't be open	79.3%	77.9%
My child's teacher won't/wouldn't be the same	61.9%	60.1%
My child and family will be more likely to be exposed to COVID-19	80.1%	84.6%
I won't/wouldn't be able to afford child care	79.2%	55.7%
My slot will be given to someone else	66.9%	65.0%
I would have difficulty providing transportation	42.6%	22.2%
Something else (n=233)	41.7%	47.0%

Table B77. Concerns about returning to care, by region

	Frontier	Rural	Urban
My previous provider won't/wouldn't be open	73.0%	79.8%	78.2%
My child's teacher won't/wouldn't be the same	59.5%	59.6%	61.6%
My child and family will be more likely to be exposed to COVID-19	81.6%	75.7%	85.2%
I won't/wouldn't be able to afford child care	86.8%	65.7%	67.2%
My slot will be given to someone else	70.3%	68.5%	64.6%
I would have difficulty providing transportation	50.0%	34.6%	30.7%
Something else (n=233)	*	37.8%	47.0%

Table B78. Concerns about returning to care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
My previous provider won't/wouldn't be open	78.4%	78.5%
My child's teacher won't/wouldn't be the same	59.2%	61.2%
My child and family will be more likely to be exposed to COVID-19	74.6%	83.8%
I won't/wouldn't be able to afford child care	69.1%	67.1%
My slot will be given to someone else	59.1%	67.3%
I would have difficulty providing transportation	35.8%	31.7%
Something else (n=233)	50.0%	42.4%

Table B79. Access to, use of, and perceived usefulness of services during COVID-19, statewide

	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	54.0%	72.5%	93.9%
Picking up or having activities and/or worksheets dropped off	70.2%	85.9%	93.0%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	41.0%	65.3%	92.5%
Receiving information or printed materials about caring for my child	71.9%	83.0%	90.7%
Participating in Zoom, Facebook, or other online classes where the teacher is live	84.5%	91.3%	88.2%
Watching recorded videos online from the teacher	78.4%	88.2%	89.0%
Using special apps with activities/videos/information	66.1%	84.8%	85.7%
Other services	1.2%	69.2%	96.3%

Table B80. Access to, use of, and perceived usefulness of services during COVID-19, by race/ethnicity

American Indian/Alaskan Native	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	60.6%	75.0%	100.0%
Picking up or having activities and/or worksheets dropped off	72.7%	100.0%	95.8%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	42.4%	85.7%	100.0%
Receiving information or printed materials about caring for my child	81.8%	92.6%	92.0%
Participating in Zoom, Facebook, or other online classes where the teacher is live	90.9%	96.7%	86.2%
Watching recorded videos online from the teacher	84.8%	92.9%	88.5%
Using special apps with activities/videos/information	78.8%	92.3%	79.2%
Other services	*	*	*

African American/Black	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	64.3%	70.4%	84.2%
Picking up or having activities and/or worksheets dropped off	57.1%	91.7%	86.4%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	43.9%	77.8%	85.7%
Receiving information or printed materials about caring for my child	78.6%	81.8%	88.9%
Participating in Zoom, Facebook, or other online classes where the teacher is live	71.4%	90.0%	81.5%
Watching recorded videos online from the teacher	92.9%	92.3%	91.7%
Using special apps with activities/videos/information	59.5%	92.0%	73.9%
Other services	*	*	*

Asian	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	45.9%	52.9%	100.0%
Picking up or having activities and/or worksheets dropped off	55.6%	90.0%	100.0%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	30.6%	54.5%	100.0%
Receiving information or printed materials about caring for my child	47.2%	94.1%	100.0%
Participating in Zoom, Facebook, or other online classes where the teacher is live	86.1%	100.0%	90.3%
Watching recorded videos online from the teacher	69.4%	88.0%	95.5%
Using special apps with activities/videos/information	54.3%	84.2%	100.0%
Other services	0.0%	0.0%	0.0%

Hispanic/Latinx	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	71.3%	84.2%	94.8%
Picking up or having activities and/or worksheets dropped off	87.1%	87.3%	94.4%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	56.3%	70.0%	92.1%
Receiving information or printed materials about caring for my child	83.2%	87.3%	93.2%
Participating in Zoom, Facebook, or other online classes where the teacher is live	87.6%	86.5%	92.6%
Watching recorded videos online from the teacher	82.5%	86.4%	91.2%
Using special apps with activities/videos/information	82.0%	87.1%	83.5%
Other services	*	*	*

Middle Eastern/North African	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	90.9%	80.0%	75.0%
Picking up or having activities and/or worksheets dropped off	100.0%	72.7%	87.5%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	54.5%	*	*
Receiving information or printed materials about caring for my child	81.8%	66.7%	*
Participating in Zoom, Facebook, or other online classes where the teacher is live	100.0%	90.9%	100.0%
Watching recorded videos online from the teacher	81.8%	88.9%	87.5%
Using special apps with activities/videos/information	80.0%	87.5%	100.0%
Other services	0.0%	0.0%	0.0%

Native Hawaiian/Pacific Islander	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	*	*	*
Picking up or having activities and/or worksheets dropped off	*	*	*
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	*	*	*
Receiving information or printed materials about caring for my child	*	*	*
Participating in Zoom, Facebook, or other online classes where the teacher is live	*	*	*
Watching recorded videos online from the teacher	*	*	*
Using special apps with activities/videos/information	*	*	*
Other services	0.0%	0.0%	0.0%

White	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	42.6%	65.7%	92.9%
Picking up or having activities and/or worksheets dropped off	63.4%	80.9%	91.8%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	33.1%	57.5%	90.9%
Receiving information or printed materials about caring for my child	67.3%	80.1%	89.0%
Participating in Zoom, Facebook, or other online classes where the teacher is live	82.1%	92.2%	86.7%
Watching recorded videos online from the teacher	74.1%	87.6%	87.7%
Using special apps with activities/videos/information	57.6%	81.9%	85.8%
Other services	3.4%	61.9%	92.3%

Multiracial	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	67.4%	82.8%	100.0%
Picking up or having activities and/or worksheets dropped off	79.1%	100.0%	97.1%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	52.4%	86.4%	94.7%
Receiving information or printed materials about caring for my child	79.1%	85.3%	89.7%
Participating in Zoom, Facebook, or other online classes where the teacher is live	93.0%	92.5%	89.2%
Watching recorded videos online from the teacher	88.1%	94.6%	85.7%
Using special apps with activities/videos/information	80.5%	87.9%	96.6%
Other services	*	*	*

Other Race	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	*	*	*
Picking up or having activities and/or worksheets dropped off	*	*	*
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	*	0.00%	*
Receiving information or printed materials about caring for my child	*	0.00%	*
Participating in Zoom, Facebook, or other online classes where the teacher is live	*	*	*
Watching recorded videos online from the teacher	*	*	*
Using special apps with activities/videos/information	*	*	*
Other services	*	*	*

Table B81. Access to, use of, and perceived usefulness of services during COVID-19, by home language

English	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	45.4%	65.8%	93.1%
Picking up or having activities and/or worksheets dropped off	64.0%	84.8%	92.1%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	35.0%	59.4%	92.8%
Receiving information or printed materials about caring for my child	67.7%	80.1%	89.3%
Participating in Zoom, Facebook, or other online classes where the teacher is live	82.5%	92.6%	86.8%
Watching recorded videos online from the teacher	77.4%	88.6%	88.5%
Using special apps with activities/videos/information	60.1%	84.0%	83.2%
Other services	7.8%	63.0%	100.0%

Spanish	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	74.4%	84.9%	96.0%
Picking up or having activities and/or worksheets dropped off	86.4%	89.3%	94.4%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	55.3%	72.7%	90.6%
Receiving information or printed materials about caring for my child	84.9%	90.4%	93.4%
Participating in Zoom, Facebook, or other online classes where the teacher is live	87.5%	86.4%	91.7%
Watching recorded videos online from the teacher	81.0%	85.9%	91.8%
Using special apps with activities/videos/information	85.0%	86.0%	89.7%
Other services	*	85.7%	*

Other	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	76.3%	75.6%	91.2%
Picking up or having activities and/or worksheets dropped off	81.4%	83.3%	95.0%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	55.9%	78.8%	96.2%
Receiving information or printed materials about caring for my child	74.6%	84.1%	91.9%
Participating in Zoom, Facebook, or other online classes where the teacher is live	94.9%	92.9%	90.4%
Watching recorded videos online from the teacher	79.7%	91.5%	86.0%
Using special apps with activities/videos/information	68.4%	87.2%	91.2%
Other services	*	*	*

Table B82. Access to, use of, and perceived usefulness of services during COVID-19, by income level

< 200% FPL	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	70.5%	78.6%	98.7%
Picking up or having activities and/or worksheets dropped off	83.3%	90.1%	94.4%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	53.9%	71.8%	95.7%
Receiving information or printed materials about caring for my child	77.3%	84.7%	90.3%
Participating in Zoom, Facebook, or other online classes where the teacher is live	88.2%	90.1%	91.1%
Watching recorded videos online from the teacher	82.4%	88.7%	88.6%
Using special apps with activities/videos/information	78.8%	89.4%	85.8%
Other services	6.7%	76.7%	95.7%

> 200% FPL	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	32.7%	55.6%	75.0%
Picking up or having activities and/or worksheets dropped off	53.3%	77.8%	89.8%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	24.2%	46.3%	78.4%
Receiving information or printed materials about caring for my child	64.8%	80.4%	91.3%
Participating in Zoom, Facebook, or other online classes where the teacher is live	79.8%	93.2%	84.2%
Watching recorded videos online from the teacher	73.2%	87.9%	89.6%
Using special apps with activities/videos/information	49.7%	76.1%	85.5%
Other services	5.6%	*	*

Table B83. Access to, use of, and perceived usefulness of services during COVID-19, by region

Frontier	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	60.7%	82.4%	100.0%
Picking up or having activities and/or worksheets dropped off	82.1%	87.0%	100.0%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	50.0%	78.6%	90.9%
Receiving information or printed materials about caring for my child	85.7%	91.7%	90.9%
Participating in Zoom, Facebook, or other online classes where the teacher is live	64.3%	83.3%	86.7%
Watching recorded videos online from the teacher	64.3%	88.9%	81.3%
Using special apps with activities/videos/information	75.0%	85.7%	94.4%
Other services	*	*	*

Rural	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	60.4%	74.6%	96.0%
Picking up or having activities and/or worksheets dropped off	73.0%	90.7%	93.9%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	42.5%	72.3%	97.1%
Receiving information or printed materials about caring for my child	82.3%	87.3%	91.8%
Participating in Zoom, Facebook, or other online classes where the teacher is live	82.4%	88.0%	89.4%
Watching recorded videos online from the teacher	77.9%	88.8%	90.0%
Using special apps with activities/videos/information	66.7%	85.6%	84.0%
Other services	5.9%	58.3%	100.0%

Urban	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	50.9%	70.8%	92.3%
Picking up or having activities and/or worksheets dropped off	68.4%	83.5%	92.0%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	39.8%	61.0%	90.2%
Receiving information or printed materials about caring for my child	66.6%	80.1%	90.0%
Participating in Zoom, Facebook, or other online classes where the teacher is live	86.6%	92.9%	87.7%
Watching recorded videos online from the teacher	79.4%	88.0%	88.9%
Using special apps with activities/videos/information	65.3%	84.5%	85.9%
Other services	6.6%	73.1%	94.7%

Table B84. Access to, use of, and perceived usefulness of services during COVID-19, by experience of disabilities and/or chronic health care needs

Experiencing Disabilities and/or Chronic Health Care Needs	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	65.6%	59.3%	98.0%
Picking up or having activities and/or worksheets dropped off	81.8%	94.4%	90.2%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	48.9%	62.5%	97.5%
Receiving information or printed materials about caring for my child	73.5%	82.5%	88.8%
Participating in Zoom, Facebook, or other online classes where the teacher is live	92.4%	95.9%	82.9%
Watching recorded videos online from the teacher	80.9%	84.0%	80.9%
Using special apps with activities/videos/information	81.5%	90.6%	82.3%
Other services	*	*	*

All Other Children	Offered Service	Used Service	Found it Useful
Picking up or having meals or food dropped off	51.7%	76.1%	93.1%
Picking up or having activities and/or worksheets dropped off	67.9%	83.7%	93.8%
Receiving supplies (such as diapers, wipes, toilet paper, sanitizer)	39.4%	66.0%	91.3%
Receiving information or printed materials about caring for my child	71.5%	83.1%	91.1%
Participating in Zoom, Facebook, or other online classes where the teacher is live	82.9%	90.1%	89.5%
Watching recorded videos online from the teacher	77.8%	89.2%	90.7%
Using special apps with activities/videos/information	62.8%	83.2%	86.7%
Other services	6.8%	64.7%	95.5%

Table B85. Preferred care during COVID-19, statewide

	Percent
Care in your child's home by a friend, relative, neighbor, or nanny	37.9%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	10.1%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	39.7%
Preschool provided at an elementary school	10.6%
Care in another type of setting	1.8%

Table B86. Preferred care during COVID-19, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Care in your child's home by a friend, relative, neighbor, or nanny	35.9%	41.5%	39.0%	42.3%	28.6%	*	35.4%	42.1%	*
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	9.0%	9.2%	10.4%	7.9%	*	0.0%	10.9%	8.8%	*
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	43.6%	23.1%	40.3%	42.1%	38.1%	54.5%	41.3%	35.1%	*
Preschool provided at an elementary school	11.5%	25.4%	9.1%	6.5%	*	*	10.1%	12.3%	*
Care in another type of setting	0.0%	*	*	*	0.0%	0.0%	2.2%	*	*

Table B87. Preferred care during COVID-19, by home language

	English	Spanish	Other
Care in your child's home by a friend, relative, neighbor, or nanny	35.3%	46.2%	42.7%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	10.7%	8.4%	7.3%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	40.6%	38.0%	33.1%
Preschool provided at an elementary school	11.5%	5.7%	15.3%
Care in another type of setting	1.9%	1.7%	*

Table B88. Preferred care during COVID-19, by income level

	< 200% FPL	> 200% FPL
Care in your child's home by a friend, relative, neighbor, or nanny	41.5%	32.9%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	7.1%	14.2%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	38.0%	41.8%
Preschool provided at an elementary school	11.6%	9.2%
Care in another type of setting	1.8%	1.9%

Table B89. Preferred care during COVID-19, by region

	Frontier	Rural	Urban
Care in your child's home by a friend, relative, neighbor, or nanny	30.0%	35.7%	39.3%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	13.8%	10.1%	9.8%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	51.2%	42.5%	37.7%
Preschool provided at an elementary school	*	10.5%	11.0%
Care in another type of setting	0.0%	1.3%	2.2%

Table B90. Preferred care during COVID-19, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/or Chronic Health Care Needs	All Other Children
Care in your child's home by a friend, relative, neighbor, or nanny	39.6%	37.4%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	7.1%	10.6%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	36.8%	40.3%
Preschool provided at an elementary school	14.2%	9.9%
Care in another type of setting	2.2%	1.8%

Table B91. Perceived risk of COVID-19 in care, statewide

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	Percent
Care in your child's home by a friend, relative, neighbor, or nanny	38.6%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	74.8%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	73.5%
Preschool provided at an elementary school	75.1%

Table B92. Perceived risk of COVID-19 in care, by race/ethnicity

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Care in your child's home by a friend, relative, neighbor, or nanny	32.0%	50.0%	57.3%	36.7%	52.9%	*	37.7%	36.8%	*
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	71.6%	80.2%	85.7%	75.1%	88.9%	*	73.0%	82.6%	*
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	65.3%	83.3%	86.8%	69.7%	70.6%	60.0%	72.8%	85.8%	*
Preschool provided at an elementary school	71.6%	81.3%	85.3%	71.6%	76.5%	80.0%	74.0%	86.8%	*

Table B93. Perceived risk of COVID-19 in care, by home language

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	English	Spanish	Other
Care in your child's home by a friend, relative, neighbor, or nanny	37.5%	39.1%	50.8%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	73.5%	77.1%	84.0%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	73.9%	71.3%	76.7%
Preschool provided at an elementary school	75.1%	74.7%	78.1%

Table B94. Perceived risk of COVID-19 in care, by income level

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	< 200% FPL	> 200% FPL
Care in your child's home by a friend, relative, neighbor, or nanny	35.4%	43.0%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	72.7%	77.7%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	68.9%	79.7%
Preschool provided at an elementary school	70.8%	81.0%

Table B95. Perceived risk of COVID-19 in care, by region

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	Frontier	Rural	Urban
Care in your child's home by a friend, relative, neighbor, or nanny	28.2%	31.5%	42.4%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	57.9%	67.7%	78.9%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	58.4%	66.4%	77.6%
Preschool provided at an elementary school	59.2%	69.3%	78.7%

Table B96. Perceived risk of COVID-19 in care, by experience of disabilities and/or chronic health care needs

"Very" or "somewhat" concerned about exposure to COVID-19 in different types of care statewide

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
Care in your child's home by a friend, relative, neighbor, or nanny	31.9%	39.7%
Care provided outside your home by someone who is not related to you, including family or home-based child care programs	74.6%	74.8%
Care in a child care center, preschool, Head Start Center, or other center that was not in someone's home or in an elementary school	70.3%	74.1%
Preschool provided at an elementary school	70.8%	75.9%

Table B97. Ability to access services for children experiencing disabilities and/or chronic health care needs, statewide

	Percent
Physical health services (n=131)	32.8%
Mental/behavioral health services (n=147)	59.9%
Speech therapy (n=255)	54.5%
Occupational therapy (n=152)	50.7%
Physical therapy (n=92)	40.2%
Developmental/special education classroom services (n=177)	62.1%
Early supports for infants and toddlers (n=153)	49.0%

Table B98. Ability to access services for children experiencing disabilities and/or chronic health care needs, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Physical health services (n=131)	*	*	*	27.6%	*	0.0%	33.9%	*	0.0%
Mental/behavioral health services (n=147)	61.5%	88.9%	*	48.1%	*	0.0%	58.6%	60.0%	0.0%
Speech therapy (n=255)	50.0%	70.0%	*	56.8%	*	*	54.7%	57.9%	0.0%
Occupational therapy (n=152)	50.0%	75.0%	*	48.0%	*	*	51.2%	57.1%	0.0%
Physical therapy (n=92)	*	*	0.0%	45.8%	*	0.0%	41.9%	*	0.0%
Developmental/special education classroom services (n=177)	53.3%	*	*	63.0%	*	*	63.4%	47.1%	0.0%
Early supports for infants and toddlers (n=153)	60.0%	*	*	48.6%	*	*	47.9%	*	0.0%

Table B99. Ability to access services for children experiencing disabilities and/or chronic health care needs, by home language

	English	Spanish	Other
Physical health services (n=131)	33.3%	30.8%	*
Mental/behavioral health services (n=147)	60.9%	52.0%	72.7%
Speech therapy (n=255)	56.3%	50.0%	50.0%
Occupational therapy (n=152)	53.0%	45.5%	42.9%
Physical therapy (n=92)	37.9%	50.0%	*
Developmental/special education classroom services (n=177)	61.5%	70.8%	55.6%
Early supports for infants and toddlers (n=153)	50.0%	46.2%	50.0%

Table B100. Ability to access services for children experiencing disabilities and/or chronic health care needs, by income level

	< 200% FPL	> 200% FPL
Physical health services (n=131)	28.3%	43.6%
Mental/behavioral health services (n=147)	58.9%	62.5%
Speech therapy (n=255)	50.9%	60.2%
Occupational therapy (n=152)	49.0%	53.8%
Physical therapy (n=92)	39.1%	43.5%
Developmental/special education classroom services (n=177)	58.1%	71.7%
Early supports for infants and toddlers (n=153)	50.5%	46.3%

Table B101. Ability to access services for children experiencing disabilities and/or chronic health care needs, by region

	Frontier	Rural	Urban
Physical health services (n=131)	*	23.3%	35.1%
Mental/behavioral health services (n=147)	*	60.6%	59.1%
Speech therapy (n=255)	*	46.6%	56.3%
Occupational therapy (n=152)	*	33.3%	54.2%
Physical therapy (n=92)	*	31.8%	41.8%
Developmental/special education classroom services (n=177)	*	53.5%	63.8%
Early supports for infants and toddlers (n=153)	*	36.4%	52.6%

Table B102. Having a child asked to 'take a break' from care, statewide

	Percent
Asked to take a break	6.3%
Never asked to take a break	93.7%

Table B103. Having a child asked to 'take a break' from care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Asked to take a break	9.0%	4.6%	*	9.5%	*	*	5.4%	6.8%	0.0%
Never asked to take a break	91.0%	95.4%	97.4%	90.5%	95.2%	81.8%	94.6%	93.2%	*

Table B104. Having a child asked to 'take a break' from care, by home language

	English	Spanish	Other
Asked to take a break	5.7%	10.1%	*
Never asked to take a break	94.3%	89.9%	99.2%

Table B105. Having a child asked to 'take a break' from care, by income level

	< 200% FPL	> 200% FPL
Asked to take a break	7.0%	5.4%
Never asked to take a break	93.0%	94.6%

Table B106. Having a child asked to 'take a break' from care, by region

	Frontier	Rural	Urban
Asked to take a break	7.2%	6.0%	6.4%
Never asked to take a break	92.8%	94.0%	93.6%

Table B107. Having a child asked to 'take a break' from care, by experience of disabilities and/or chronic health care needs

	Experiencing Disabilities and/ or Chronic Health Care Needs	All Other Children
Asked to take a break	14.7%	4.7%
Never asked to take a break	85.3%	95.3%

Table B108. Reason for being asked to 'take a break' from care, statewide

	Percent
Provider could not manage child's behavior toward children or adults	35.0%
Provider could not meet child's health or physical care needs	5.8%
Provider could not meet child's developmental needs	12.6%
Child was not adjusting emotionally/crying/separation anxiety	24.3%
Some other reason	22.3%

Table B109. Reason for being asked to 'take a break' from care, by race/ethnicity

	American Indian /Alaskan Native	African American /Black	Asian	Hispanic /Latinx	Middle Eastern /North African	Native Hawaiian /Pacific Islander	White	Multiracial	Other Race
Provider could not manage child's behavior toward children or adults	*	*	*	*	0.0%	*	46.0%	*	0.0%
Provider could not meet child's health or physical care needs	0.0%	0.0%	0.0%	*	0.0%	0.0%	*	0.0%	0.0%
Provider could not meet child's developmental needs	*	*	0.0%	*	*	0.0%	*	*	0.0%
Child was not adjusting emotionally/crying/ separation anxiety	*	*	*	37.0%	0.0%	0.0%	20.0%	*	0.0%
Some other reason	*	*	0.0%	29.6%	0.0%	0.0%	20.0%	0.0%	0.0%

Table B110. Reason for being asked to 'take a break' from care, by home language

	English	Spanish	Other
Provider could not manage child's behavior toward children or adults	43.1%	*	0.0%
Provider could not meet child's health or physical care needs	*	*	0.0%
Provider could not meet child's developmental needs	15.3%	*	0.0%
Child was not adjusting emotionally/crying/separation anxiety	19.4%	36.7%	0.0%
Some other reason	18.1%	30.0%	*

Table B111. Reason for being asked to 'take a break' from care, by income level

	< 200% FPL	> 200% FPL
Provider could not manage child's behavior toward children or adults	37.3%	30.6%
Provider could not meet child's health or physical care needs	*	*
Provider could not meet child's developmental needs	10.4%	16.7%
Child was not adjusting emotionally/crying/separation anxiety	25.4%	22.2%
Some other reason	22.4%	22.2%

Table B112. Reason for being asked to 'take a break' from care, by region

	Frontier	Rural	Urban
Provider could not manage child's behavior toward children or adults	*	25.0%	40.3%
Provider could not meet child's health or physical care needs	*	*	*
Provider could not meet child's developmental needs	0.0%	*	11.9%
Child was not adjusting emotionally/crying/separation anxiety	*	21.9%	23.9%
Some other reason	0.0%	28.1%	20.9%

Table B113. Reason for being asked to 'take a break' from care, by experience of disabilities and/or chronic health care needs

	Frontier	Rural	Urban
Provider could not manage child's behavior toward children or adults	43.2%	29.3%	40.3%
Provider could not meet child's health or physical care needs	*	*	*
Provider could not meet child's developmental needs	25.0%	*	11.9%
Child was not adjusting emotionally/crying/separation anxiety	13.6%	31.0%	23.9%
Some other reason	*	32.8%	20.9%