

COVID-19 transmission in US child care programs ^[1]

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AVAILABILITY

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Excerpted from abstract

Objective

Central to the debate over school and child care reopening is whether children are efficient COVID-19 transmitters and likely to increase community spread when programs reopen. We compared COVID-19 outcomes in child care providers who continued to provide direct in-person child care during the first three months of the U.S. COVID-19 pandemic versus those who did not.

Methods

Data were obtained from U.S. child care providers (N=57,335) reporting whether they had ever tested positive or been hospitalized for COVID-19 (N=427 cases), along with their degree of exposure to child care. Background transmission rates were controlled statistically, and other demographic, programmatic, and community variables were explored as potential confounders. Logistic regression analysis was used in both unmatched and propensity score matched case-control analyses.

Results

No association was found between exposure to child care and COVID-19 in both unmatched (odds ratio [OR], 1.06; 95% confidence interval [CI], 0.82 to 1.38) and matched (OR, 0.94; 95% CI, 0.73 to 1.21) analyses. In matched analysis, being a home-based provider (as opposed to center-based) was associated with COVID-19 (OR, 1.59; 95% CI, 1.14 to 2.23), but showed no interaction with exposure.

Conclusion

Within the context of considerable infection mitigation efforts in U.S. child care programs, exposure to child care during the early months of the U.S. pandemic was not associated with elevated risk for COVID-19 transmission to providers. These findings must be interpreted only within the context of background transmission rates and the considerable infection mitigation efforts implemented in child care programs.

Related link: Child care not associated with spread of COVID-19, Yale study finds ^[4]

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