

Supporting the child care and early education workforce ^[1]

A Menu of Policy Options for the COVID-19 Pandemic and Recovery

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AVAILABILITY

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Excerpt from background

When the novel coronavirus began to spread in the United States in March 2020, most child care centers and home-based providers across the country shuttered their doors. From February to April of 2020, more than 370,000 members of the child care workforce left the field. Although workers slowly began to return to work as the country reopened, as of December 2020, the workforce is still 17 percent smaller than it was before the pandemic began. And those in the child care/early childhood education (CC/ECE) workforce who have returned to work are facing harsher working conditions and greater stressors than ever before. In this report, the term “child care/early education workforce” is defined to include center-based staff (including directors, teachers, and aides) and family child care and home-based providers (including legally operating unlicensed providers and family, friend, and neighbor caregivers).

CC/ECE workers must now contend with more stringent cleaning, health, and safety requirements, while caring for young children who may be unable to understand the severity of the moment. Providers are facing increased operating costs and decreased enrollment, and centers must try to maintain staff through a period of serious fiscal uncertainty (Workman and Jessen-Howard 2020). Every child care worker serving families during this pandemic is risking their own health and the health of their family to provide the care needed to keep our economy open. These concerns compound the challenges the child care workforce, especially many Black, Latina, * and Native American providers, have faced for decades: low pay, inadequate benefits, high turnover rates, and challenging work (Austin et al. 2019).

Women of color have most acutely felt the impacts of COVID-19 on the child care workforce.⁵ Child care workers are more than two and a half times more likely to be either Black or Latina compared with the overall workforce (Austin et al. 2019).⁶ And following the disturbing pattern shown for communities of color across the country, Black, Latina, and Native American child care providers are more likely to test positive for COVID-19 than their white counterparts—a pattern attributed to structural inequities in access to health care (Gilliam et al. 2020). Without efforts to stabilize the child care field and address the particular challenges of the COVID-19 crisis, we risk permanent job loss and damage to a field dominated by women of color. The pandemic has exposed many of the structural challenges facing this group of workers; this may be a unique opportunity for policymakers to take significant action to improve working conditions, compensation, and benefits for and stabilize the child care and early childhood workforce.

In this report, we aim to provide policymakers with concrete, feasible policy solutions that could be implemented in the near term to better support the CC/ECE workforce. Laying out these strategies is critical to informing several possible policy opportunities, including how to allocate new funding available in the coronavirus stimulus package passed in late December 2020 or from other congressional actions in the coming year, inform policy actions of the incoming Biden administration, and inform investments and strategies of state policymakers and the philanthropic community as they consider ways to shore up the CC/ECE workforce in these complex times.

Region: United States ^[3]

Tags: policy ^[4]

equity ^[5]

workforce ^[6]

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