

Report on Child Care in Cook County during the COVID-19 Pandemic, 2021:

Executive Summary

Over the course of the pandemic, Illinois Action for Children (IAFC) has sought to understand and capture the impact of COVID-19 on child care providers, families, and the child care sector as a whole in Cook County. This report brings together what we have learned through numerous parent and provider surveys and administrative data. The report spans March 2020 through June 2021: the beginning of the pandemic through the end of Fiscal Year 2021, at which point the future trajectory of the pandemic and its impact on child care are unknown.

PROVIDING CHILD CARE DURING THE PANDEMIC

Child Care Available during the Stay-at-Home Period: March – May 2020

Early in the pandemic, the main concerns of government were (1) to contain the virus and (2) to keep essential services running, which included providing child care for essential workers. The resulting emergency rule that was put in place allowed approved child care programs to operate at greatly reduced capacity under strict health and safety standards and to serve only essential workers. During this time, child care centers could remain open if they applied and were approved for an emergency license. An analysis of DCFS emergency license data finds that child care center capacity during the stay-at-home order was, at most, nine percent of typical center capacity in the county. Licensed home providers were permitted to remain open without an emergency license but had to reduce their capacity to 6 children (from the typical 8-16 children). As of May 2020, IAFC staff were able to confirm that at least 821 of Cook County's 2,700 licensed homes (just 30 percent) were operating, providing roughly 5,000 child care slots.

This dramatic drop in supply forced many working parents to scramble to find new care, and most often they turned to family members. Many parents faced furloughs and job loss during this time, however, and were home to care for their children.

Providers Faced Numerous Challenges as They Reopened their Programs

Adjusting to pandemic conditions and new practices: The challenges were numerous for providers, particularly during the early months of the pandemic. Fear, scarcity, and exhaustion were common themes heard by IAFC staff that surveyed home providers, a group that provided a large share of care for essential workers and were particularly flexible and courageous in doing so. Providers had to learn new health and safety practices and often found guidelines confusing. Thorough cleaning became a priority, yet providers faced shortages of cleaning supplies, as well as personal protective equipment and food. Rising prices for food and supplies stretched their budgets, and lower enrollment meant lost revenue and great economic uncertainty. Providers described their daily stress, anxiety attacks, lack of sleep, depression, guilt for turning families away, feelings of being overwhelmed, and grief for loved ones who had died.

“My parents soon will be called back to work, and the shelter in place has not been lifted and our capacity is reduced to 6. With that being said, I don't know if could re-open because I can't pick from 16 children only 6.”

-Child care home provider

The time-consuming nature of implementing the COVID-19 regulations challenged providers, particularly the amount of cleaning required but also procedures such as health checks and new pick-up and drop-off procedures at centers. Providers had to take extra steps to communicate with parents, who were no longer allowed in the classroom; some personally called parents or communicated through lobby bulletin boards. New responsibilities for providers often reduced their time with the children and contributed to the staff fatigue and declining morale reported by some directors.

“[Staff] still don’t think it’s safe for them to be out, so they did not return. And so that puts us at a skeleton crew.”

–Center director

Staffing Challenges:

Maintaining adequate staff was a challenge for child care programs during the pandemic. Interviews with 71 programs found that 63 percent of centers reported a decrease in staff during the pandemic, and these

centers operated with an average of five fewer staff members. Sixty percent of home providers who had staff before the pandemic said they were down a staff member.

Most centers had at least one staff person who did not feel comfortable working during the pandemic. Some had a medical condition or lived with someone with a medical condition, and others had to stay at home to care for their own family and children, including children who were remote learning. Staff on maternity leave decided not to return, and those near or at retirement age felt it was better to retire during the pandemic. Program directors found it difficult replacing the staff that left, particularly staff with higher credentials required for the program’s quality rating if they had one. Rules that limited teachers to working in just one classroom exacerbated staffing challenges. Directors often had to work in the classrooms to cover for teachers.

Facing lower enrollment, programs could not always afford to keep all of their staff working, and some cut their employees’ hours; others asked only the fewest necessary staff to work and furloughed the rest. Directors worried that employees not getting their usual work hours would leave for better pay.

Financial Challenges: Program viability has been threatened by the low enrollment caused by capacity restrictions, parent unemployment, or parent hesitancy to return their children to group settings, though many families did return when programs re-opened. The survey of 71 providers conducted between September 2020 and March 2021 found center enrollment on average to be just 68 percent of pre-pandemic levels and licensed home enrollment just 54 percent. Similarly, enrollment for the subset of children with Illinois Child Care Assistance (CCAP) was at just 71 percent of pre-pandemic levels as of February 2021. Not all programs faced enrollment shortages, however. Some had waiting lists for their program as a whole or for specific classrooms such as infant or school-age rooms. Financial stress created uncertainty for providers. In the fall and winter, most providers surveyed rated their program viability at 3 or below on a scale of 1 to 5, with one being not viable at all and 5 very viable. Providers reported using their programs’ emergency reserve funds or their own personal savings to keep their businesses afloat.

In June 2021, Child Care Supply Remains Stable in Cook County, Likely Due to State Support

State-issued Child Care Restoration Grants, available to providers between June 2020 and June 2021 (and beyond), have been considered a lifeline by providers. In 2020 alone, \$290 million were awarded to 4,993 child care programs across the state, including 2,632 providers in Cook County. Child care centers received a monthly average of \$24,806, licensed child care homes \$1,475 per month, and larger group homes \$2,981.¹

CCAP provided critical support as well by temporarily paying higher rates to providers caring for children of essential workers and by waiving enrollment requirements to enable providers to receive full payment regardless of child attendance. Additionally, some child care providers received funding through the Paycheck Protection Program and other sources, though these had less reach among child care providers than the state supports.

Nevertheless, even after receiving government financial assistance, many providers feared not having enough funding to cover their staff salaries or rent.

As of June 2021, DCFS licensing data do not reveal a significant loss of providers in Cook County resulting from the pandemic. The current number of licensed child care centers is consistent with the pre-pandemic number. The number of licensed homes did fall by 135 providers

¹See the Child Care Restoration Grants 2020 funding summary which can be found at <https://www.ilgateways.com/financial-opportunities/restoration-grants>.

“Honestly, [the Restoration Grant]’s the only thing that’s keeping us open...We were not charging families when we were closed, our self-pay families. We lost a lot of money just with that. So, we’re kind of just literally going off of assistance.”

–Center director

between June 2019 and June 2021; however, this drop is consistent with long-term trends of declining licensed home care in Cook County, Illinois, and nationwide. It is unclear whether stability in the child care supply will hold once government support ends or if parents are slow to return to care.

Also, the fact that programs retained their licenses does not mean they are open and caring for children, or that they are operating at

their allowed capacity. Some programs had to reduce capacity due to a lack of teaching staff or low enrollment. The number of spaces that have actually been available to Cook County families during the pandemic is not known.

FAMILIES’ CHILD CARE EXPERIENCES DURING THE PANDEMIC

Family, Friend and Neighbor Care became Critical for Many Parents

Although more parents were home to care for their children due to unemployment or remote work, those needing child care were challenged by child care program closures in the early months of the pandemic. They most often turned to family members, friends, or other individuals that they knew for child care, or they struggled to care for their children themselves while working remotely. Parents felt these arrangements were safe for their children but not always ideal. Some worried about exposing older caregivers to the virus, and care by family members was not always consistent. One survey found that 40 percent of working parents missed work for child care-related reasons during this period.

Families Using Emergency Programs Felt Confident with this Care

A survey of essential workers who used emergency child care programs found that parents felt confident in the safety of their center or licensed home care. Their confidence resulted from 1) safety precautions taken by their providers such as temperature checks, reduced children in care, and cleaning protocols 2) trust in the programs because they knew them well or found them to be professional, licensed, and competent and 3) regular communication by the providers that kept parents updated about rules, changes, and cases of COVID exposure. Some parents who were not satisfied reported that their program had too many COVID cases, staff not wearing masks or not consistently, too many children in care, or a lack of honest or regular communication.

“[My provider] was very cautious with everything and took care to clean everything thoroughly. She communicated with us very well the whole time.”

–Parent and essential worker

When Programs Reopened, Many Families Were Ready to Return but Some Faced Barriers

Interviews with parents in fall 2020 found that many mothers who relied on family members for child care during the summer had transitioned back to child care centers, home-based providers, and school programs. Other parents did not feel it was safe enough to return, did not think programs would be available to them yet, or were worried about the reliability of care since classrooms could be temporarily closed due to COVID exposure. Some who preferred to use formal programs could not because of the high cost, incompatible hours, or programs’ inability to assist their school-age children with remote learning.

Illinois Supported Parents through Reduced Co-Payments and Temporary Child Care Subsidies for Priority Essential Workers

The Illinois Child Care Assistance Program (CCAP) supported parents during the pandemic by reducing copayments of parent participants to as low as \$1 for certain months and automatically extending eligibility for parents when their assistance ended. Additionally, during the stay-at-home period, CCAP expanded eligibility to priority groups of essential workers (including health care workers) regardless of income level. As a result, families traditionally not eligible for CCAP because they earn

too much money, including many two-parent families, received help. The use of this emergency program was low in Cook County, however. Only 11 percent of state participants were from Cook County despite the county comprising 40 percent of the Illinois population. More can be done to understand how to improve outreach or reduce program barriers that may have led to low usage – particularly if CCAP expands eligibility to higher-income families in the future.

LOOKING TO THE FUTURE: OPPORTUNITIES TO STRENGTHEN THE CHILD CARE SYSTEM

Child Care as Work Support and Social Capital – a Public Good. The pandemic highlighted the essential role of child care in the economy, with disruptions to care and school contributing to widespread unemployment and workforce shortages. As formal child care programs re-opened, Cook County families began to return to them and to return to work. Only the full recovery of the child care industry, however, will allow for a full return of parents to work. Yet child care was difficult to find in many Illinois communities prior to the pandemic, and not all programs have re-opened at full capacity to serve employed parents.

An important lesson is understanding that child care is a public good that needs substantial support to serve its social function well. If the child care industry is financially weak before an emergency, as it generally was in Illinois, portions of its capacity will be lost during an emergency even with the state making substantial financial injections. Cook County is fortunate in that it appears that few programs have been lost so far, though interviews with providers suggest that some existing programs have been greatly weakened. It may be some time before the full fall-out from the pandemic becomes apparent.

“My only concern is retaining, is attracting and retaining qualified staff.”

–Center director

Expanding Child Care Availability and Quality Depends on a Well-Paid Workforce

An important source of weakness in the child care sector is the low pay and high turnover of its workforce. Even before the pandemic, teacher

shortages prevented programs from operating at full capacity or from hiring the most qualified staff. During the pandemic, the health risk to child care staff of going to work and their added responsibilities have heightened

programs’ challenges in getting all staff to return to work and recruiting replacements. Programs do not have sustainable ways to pay higher wages to compete for qualified workers, and the current labor shortage will only intensify this competition.

Fair workforce compensation must be addressed in Illinois if we want to see stable and thriving child care programs with high-quality care.

Overlooked and Undervalued, Home-Based Child Care Providers Kept Essential Services Running. We must continue to support this important sector.

Home providers meet families’ needs in ways child care centers often do not by offering more flexible, affordable, and individualized care. Providers often work long hours to accommodate parents; use their own personal time to shop and prepare for the work week; and defer their personal needs such as vacations and doctor’s appointments in order to be available for families.

During the pandemic home providers made additional sacrifices: they risked bringing COVID into their own homes, extended their hours to accommodate parents’ changing schedules, and provided meals to children even when they were not in their care – often without additional compensation.

Early in the pandemic when the majority of child care programs closed, it was family, friend, and neighbor providers in particular that kept the economy running and ensured children of essential workers showed up to school online. Yet the pay they received from CCAP was less than minimum wage – and in many cases less than even \$2.50 per hour.

“Parents go home first, bathe, change clothes, get a new mask, gloves, etc., and then they come to get the children. Therefore, children are in care longer.”

–Child care home provider

Such low compensation affects providers’ ability to meet their own basic needs and also limits what they can provide to the children in their care in terms of food, activities, toys, and equipment. The fact that, in CCAP, children of color disproportionately use family, friend, and neighbor care makes the need for greater compensation and material resources for these providers an issue of equity as well.

We must continue to invest in and support home-based child care providers – both licensed and family, friend, and neighbor providers – through fair compensation that reflects their value to the economy and society.

Changes to Child Care Assistance would Support Long-term Stability in the Child Care Industry

The Illinois Child Care Assistance Program (CCAP) was called upon to help stabilize Illinois's child care industry and has had remarkable success so far. In addition to supporting providers with direct payments, CCAP supported providers during periods of great uncertainty by paying providers based on children's enrollment, not their attendance, which may fluctuate for reasons beyond providers' control. CCAP should consider making this policy permanent. Payment based on enrollment not only would improve the stability of market demand for providers but would prepare providers to weather unforeseen emergencies with more confidence in the future.

As children return to school, more parents will be able to work and many will need child care in order to seek employment. In October 2021, CCAP enacted a temporary policy that allows families to receive three months of child care assistance while they job search or attempt to enroll in a training or education program. However, this policy is set to expire in June 2022. Even prior to the pandemic, parents reported that being unable to pay for child care was a barrier to getting a job. CCAP can support parent employment by making eligibility during the job search a permanent policy.