

# Transforming Child Care: Cross-Community Voices to Inform Change

For CCR&Rs



# Transforming Child Care: Cross-Community Voices to Inform Change

---

It is near-unanimous among child care stakeholders that our child care system is broken. Parents are unable to locate or afford quality care; providers and teachers are unable to support themselves or their businesses with meager subsidy reimbursements or compensation; employers lose productivity every time an employee cannot secure reliable child care; and children who could flourish under the care and teaching of an early childhood educator are falling behind on the relationships and experiences critical to their growth and development. **But here is the good news: we can fix child care so that it works better for everyone.** With collective investment and effort, we can build a child care system that helps children grow and learn, that helps parents find and keep employment and that allows providers to make a fair living doing some of the most important work our future requires.

Even before the outbreak of COVID-19 and the associated impacts on and closures of child care programs, the supply of quality child care was decreasing. Results from Child Care Aware® of America's (CCAoA) 2019 survey show that between 2018 and 2019, 53% of states reported a decline in the number of child care centers. More alarmingly, 79% of states reported a decline in the number of family child care (FCC) providers. However, the impacts of the pandemic are not falling evenly on everyone. While women of color represent only 20% of the American population, they comprise 40% of the roughly 1.5 million child care workers in the United States.<sup>1</sup> According to research conducted by the National Women's Law Center, women – more often than not women of color and immigrant women – make up 94% of the child care workforce.<sup>2</sup> They are underpaid; the average wage in 2018 for those employed in child care centers was \$11.17 per hour, according to the Bureau of Labor Statistics, and nearly 15% of child care workers live below the artificially low “official” poverty line, more than double the rate of other industries.<sup>3</sup>

**We can fix child care so that it works better for everyone.**



The coronavirus pandemic and its economic fallout, and the racial reckoning that our country is going through, again, have not spared the child care sector. It will probably take a year or more to fully understand the impact of COVID-19 on our child care system, but some worrying trends are emerging. CCAoA's recent report, *Picking Up the Pieces*, found that 35% of child care centers and 21% of family child care programs remain closed nationwide.<sup>4</sup> Many of these programs are small businesses, and many are owned by women of color, who have traditionally faced barriers to accessing business credit and other small business supports.<sup>5</sup> The pandemic has

1 CDC.gov, (2020), Table 1(pg1-5). Resident population, by age, sex, race, and Hispanic origin: United States, selected years 1950–2016, retrieved from <https://www.cdc.gov/nchs/data/hus/2017/001.pdf>.

2 *Undervalued: A Brief History of Women's Care Work and Child Care Policy in the United States*, page 4. National Women's Law Center, 2017.

3 <https://www.bls.gov/ooh/personal-care-and-service/childcare-workers.htm>.

4 <https://www.childcareaware.org/picking-up-the-pieces/>.

5 <https://www.aspeninstitute.org/publications/bridging-divide-business-ownership-can-help-close-racial-wealth-gap/>.

impacted these small businesses disproportionately, and Congressional relief policies like the Paycheck Protection Program (PPP) have tended to favor businesses affiliated with large financial institutions. Child care business owners who are underbanked or unbanked, or don't have close relationships with financial institutions, may not be able to access Congressional aid to keep them from closing.<sup>6</sup>

**But here's some good news:** Since the pandemic began, the news media is covering child care system failures more frequently, and policymakers are hearing from constituents about child care closures that undermine parents' ability to work. Governors, Presidential candidates, and legislators finally see that the child care system is in desperate need of support.

In addition, political leaders are also coming to understand the critical role that quality plays in child care. As noted in CCAoA's recently-released *Child Care Licensing Benchmark Project*,<sup>7</sup> there is a growing collection of evidence pointing to the positive impact of stable, enriched early childhood experiences on a host of outcomes, including child development, school readiness, mental health and economic stability in adulthood.<sup>8</sup> Conversely, adverse early childhood experiences negatively impact a young child's development and those impacts persist into adulthood.<sup>9,10</sup> More leaders have come to understand over this year that quality child care stands at the nexus of our nation's economic growth, the social-emotional health of children, and the stability of communities.

Taken together, these factors have led to a rare moment for the child care movement. While the upheaval of 2020 has been devastating, it also presents an opportunity for our nation to build a better child care system. **But we cannot do it without the voices of child care resource and referral agencies (CCR&Rs) that know child care struggles all too well. CCAoA can help you share your expertise with those who have the power to build a better child care system.**



In order to pursue this opportunity, CCAoA began its **Together Towards Transformation** project. The central question of this project was, *If we were to build a better child care system, what would it look like and how would we do it?* It's a daunting question, and CCAoA deliberately sought out input from multiple groups who have a stake in the system's success.

We also saw this project as an opportunity to re-examine our [2020-2022 Public Policy Agenda](#) – released in January of this year – and consider whether the recommendations in that document have evolved since the pandemic, America's racial reckoning, and the subsequent re-imagining of almost all structures within society.

6 <https://www.brookings.edu/research/businesses-owned-by-women-and-minorities-have-grown-will-covid-19-undo-that/>.

7 <https://www.childcareaware.org/our-issues/research/child-care-licensing-benchmark-project/>.

8 Sandstrom, S and Huerta, H. (2013). The negative effects of instability on child development: A research synthesis. [Online] <https://www.urban.org/sites/default/files/publication/32706/412899-The-Negative-Effects-ofInstability-on-Child-Development-A-Research-Synthesis.PDF>.

9 Bethell, C., Jones, J., Gombojav, N., Linkenbach, J., & Sege, R. (2019). Positive childhood experiences and adult mental and relational health in a statewide sample: Associations across adverse childhood experiences levels. 173(11).

10 Campbell, F., Wasik, B., Pungello, E., Burchinal, M., Barbarin, O., Kainz, K., . . . Ramey, T. (2008). Young adult outcomes of the Abecedarian and CARE early childhood educational interventions. 23, 452-466.

What we learned was that fixing child care, in this moment, is less about the granularity of our ideas, and more about building the strength of our movement. The feedback we received during the [Roundtables](#) from parents, providers, and employers indicated that if these groups coordinate their efforts, advocates, funders, and policymakers have a unique opportunity to engage more Americans than ever to create the child care system we have long desired.

We invite you to read our new report, ***Together Towards Transformation***, and learn about ways that your CCR&R can get involved in making our child care system meet our needs. **We need you to raise your voice and let policymakers know: now is the time to build better child care. This work cannot wait.**



## Transformative Policy Recommendations

Over the years, a number of esteemed individuals and committees have researched the problems of child care<sup>11</sup> and their solutions. They have cataloged the problems: the under-compensation and undervaluing of providers, the inadequacy of funding to cover the true cost of care, the aid qualification guidelines that leave too many families left out or pushed out of the system. Researchers have also noted the fragmentation of the system, the uncoordinated funding mechanisms, the lack of understanding of the role that child care plays both in children's development and in adults' economic security. The problems are well known at this point, and advocates have developed several thoughtful, equitable solutions. The missing ingredient, for many years, has been a sufficiently strong political groundswell to lift these ideas into the policy realm.

COVID-19, and the attendant damage to the child care system, have gotten the attention of individuals who previously did not hold child care, or child care providers, in their field of view. This is a rich moment for child care advocates. We have not had the nation's attention in this way since World War II, when child care was made available to women needed in the workforce. Unlike the post-war period, however, today women are not viewed as simply a temporary part of the workforce. The economic reality of modern life requires two-earner households, often with more than one job for each earner. Although the contraction of child care has disproportionately affected women in the workforce,<sup>12</sup> society no longer assumes that the majority of women will choose to stop working. **The urgent task before us now is to harness the political will to adopt on a wide-scale the many great child care solutions identified by experts in the last three decades.**

11 E.g., *Transforming the Financing Early Care and Education*, National Academies of Science, Engineering, and Math, 2018, and *Financing Universal Early Care and Education for America's Children Project*, Brandon, Kagan, and Joesch, 2000.

12 In the United States, around one in five (19.6%) of working-age adults said the reason they were not working was because COVID-19 disrupted their child care arrangements. Of those not working, women ages 25-44 are almost three times as likely as men to not be working due to child care demands. About one in three (32.1%) of these women are not working because of child care, compared to 12.1% of men in the same age group. Source: <https://www.census.gov/library/stories/2020/08/parents-juggle-work-and-child-care-during-pandemic.html> (August 2020).

We believe that child care policy proposals, particularly at the federal level, should be ambitious, and that the accompanying advocacy to push for these proposals should be equally ambitious. In all of the Roundtable discussions, we heard from participants that they are frustrated and angry. The child care advocacy community has the opportunity in 2021 to harness this energy and push for policies that could lead to the significant changes the sector has long sought.

However, given that policymakers' immediate attention will rightly be given to helping our nation recover from the coronavirus pandemic, we have organized our policy recommendations in terms of priority. Some of these policy solutions can be included in ongoing pandemic and economic relief packages under discussion in Congress and states through 2021, and some will require a longer timeframe to lead to more seismic changes to the underlying structure of our child care system. The goal is to build the support for incremental change while simultaneously building the sustainable grassroots pressure needed to achieve the systemic changes the child care community has long identified as necessary.

We have also organized our recommendations into policies that can be pursued at the federal level, and policies that must be advanced through state legislation or regulation.



## Federal Policy Recommendations

### Highest Priorities

CCAoA recommends that our child care system move to a system of **federal mandatory funding**, and relinquish the partially discretionary block grant system that has been in place for three decades. What we mean by “mandatory funding” is a child care system that resembles our Social Security and Medicare programs. The goal is to have a unitary federal funding mechanism for child care that allows for consistency in the delivery of quality care, workforce supports, and regulatory standards, instead of the current patchwork approach to funding child care. Notably, because child care is *both* a workforce support *and* a learning setting for children, we need to support it with a funding structure that benefits both children *and* families. This publicly-funded system should also have a built-in mechanism or formula to ensure that greater funds are made available to historically marginalized communities, including Black, Indigenous and Hispanic communities in America, and it should support child care provided through various models, including family child care, center-based care, and family, friend and neighbor care.

All families should have access to quality, affordable child care that meets their needs, including the parents' work schedule and location. The federal government should provide financial support to ensure **all families have access to child care, with family contributions assessed on a progressive basis**. In order to build and sustain the political will for such a system, federal financial assistance should be provided on a scaled basis for higher-income families as well as the lower-income families currently eligible for Child Care and Development

Fund-supported subsidies. This system should not be only for low-income families; it must be a system in which the majority of Americans have a personal stake, **similar to Social Security or Medicare**. It is also important to note that CCAoA is not suggesting that all child care look alike, or that the provision of a particular *type* of child care is mandatory – rather, we believe that families need the opportunity to select child care that meets their needs *and* that is affordable, accessible and of high quality.

Although a few different ideas have been proposed, particularly in recent years, we are purposefully not choosing a specific legislative approach or funding mechanism at this time.<sup>13</sup> This moment is for assessing what child care is and why it should matter to more people, and then building grassroots support for a child care system that better serves all children. We are also aware that this is not a brand-new policy idea, per se; what is unique is that we now have the attention of perhaps more people than ever who recognize the importance of child care in making our national economy function.

In the meantime, however, Congress must make changes to the Child Care and Development Fund (CCDF) subsidies to **make child care more affordable for more families**. Not only are currently eligible families unable to find child care, but many families who do not qualify for assistance are still overburdened by the cost of child care. Federal policies should ensure that **no family under 150 percent of state median income pays more than 7 percent** of their income on child care. **Families under 75 percent of the state median income should not have to pay anything at all.**<sup>14</sup> Additionally, policymakers should **expand child care tax credits** for families.



Another high federal policy priority is an equitable child care system. The racial reckoning that the United States finds itself in the midst of, 50 years after the Civil Rights movement (and countless other racial justice movements), has spurred reflections on the way that racism has manifested in the child care system. CCAoA's summer [2020 webinar series, \*Racial Justice, Equity, and the Role of Child Care\*](#), began to explore how America's racist history of demanding that enslaved women care for the children of slave owners has resulted in a 21<sup>st</sup>-Century child care workforce that is 40 percent women of color<sup>15</sup>, most of whom are underpaid, and 85 percent of whom lack health care benefits<sup>16</sup>. This time, **child care advocates must bind improvements to the child care system to the movement for racial and social justice in America. We must tie our cause to the greater cause of valuing all humans equally, both because it is the right thing to do and because the child care movement can no longer separate itself from other struggles that seek justice for our nation's most vulnerable.**

13 No matter the funding mechanism, federal funding for child care must be tied to strong quality and safety regulations.

14 Policy Recommendations, *Picking Up the Pieces: Building a Better Child Care System Post COVID-19*. <https://www.childcareaware.org/picking-up-the-pieces/>

15 <https://cscce.berkeley.edu/racial-wage-gaps-in-early-education-employment/>

16 [https://www.realclearpolicy.com/articles/2020/05/12/the\\_forgotten\\_essential\\_workers\\_women\\_of\\_color\\_in\\_child\\_care\\_491313.html](https://www.realclearpolicy.com/articles/2020/05/12/the_forgotten_essential_workers_women_of_color_in_child_care_491313.html).

## Additional Priorities

It is important for the system to acknowledge that child care does not exist in a vacuum. We heard from the participants in our CCR&R Roundtables that it would be helpful to be able to connect some of the families they assist with **complementary services** like the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Medicaid, Children’s Health Insurance Program (CHIP), Home Visiting (MIECHV), Head Start, Early Head Start, universal pre-K, and more. As noted earlier, families need access to comprehensive paid family and medical leave and paid sick leave, in addition to quality child care. One of these policies cannot advance without the other if they are to actually work in practice and not just in concept.

The child care system must also receive substantial support from the health care system. In addition to the immediate public health needs in this country, COVID-19 has only increased the mental and emotional health care needs of children in child care. **Child health care consultants** (CCHCs) and early childhood mental health consultation (ECMHC)<sup>17</sup> play an important role in helping child care educators implement practices that promote healthy and safe environments for young children – whether in a pandemic or in calmer times, and whether the needs are physical or social-emotional. Policymakers must ensure that CCHCs and ECMHC are available to child care providers, with the funding and resources needed to serve all providers and children.

Finally, we urge the creation of a **National Child Care Data Task Force**, comprising economists, policymakers, advocates, employers and providers. Critical changes to the child care infrastructure will require real-time data to support decision-making. The Task Force should be charged with creating an integrated data structure that can help a publicly-funded child care system function more smoothly. The structure should harmonize all early childhood data into a single platform and allow the creation of new knowledge for planning, advocacy and research. This data structure can help states and local governments, as well as community-based organizations, administer a publicly-funded child care system that meets the needs of all families equitably and can help grow the supply of child care across the nation.



17 See <https://www.ecmhc.org/>.

# State Policy Recommendations

## Highest Priorities

Transforming the child care system will also require state-level policy changes. The most significant of these necessary changes is better **collaboration between school systems and child care stakeholders**. As state and local governments have been determining whether to keep schools open or closed, how to manage in-person learning and how to keep teaching staff safe, they have not invited child care leaders to the decision-making tables. As a result, child care providers have been left wondering why they must stay open when schools are not, how they are to keep their educators safe and healthy, and how they are to help school-age children manage virtual learning. To bolster high-quality programs during COVID-19, state policymakers must ensure that all appropriate state agencies continue to develop, update, and disseminate collaborative **guidance for early childhood educators on safe practices**. We urge federal policymakers to incorporate this collaboration between the birth to school-age systems in federal legislation and regulation as well.

State policymakers should also take action to **increase wages for child care educators**. The average wage in 2018 for those employed in child care centers was \$11.17 per hour, according to the Bureau of Labor Statistics.<sup>18</sup> Nearly 15% of child care workers live below the artificially low “official” poverty line, more than double the rate of other industries, and 85 percent do not have health insurance.<sup>19</sup> Given that communities will be dealing with the fallout of the pandemic well into 2021, state policymakers should also reconsider expanding Medicaid and ensuring child care workers who qualify can enroll. These state-level solutions, while not easy lifts, can result in tangible benefits for child care providers and in turn increase the supply of accessible, affordable, quality child care as state governments and employers work to rebuild the economy post-pandemic.



State policymakers should also consider **additional emergency grants** to help cover necessary sanitation equipment and supplies, hazard pay for educators, utilities and rent and lost revenue to help providers cover bills, pay staff and resume operations. Child care lacks a predictable funding stream and as a result, leaves child care providers vulnerable to sudden decreases in attendance and financial instability. This has only been made worse during the pandemic. To keep child care programs open, **state policymakers need to rethink existing child care payment structures so that they are based on capacity, not attendance**. This can be achieved through basing subsidy reimbursements on enrollment or using a contract system to pay for slots.

<sup>18</sup> <https://www.bls.gov/ooh/personal-care-and-service/childcare-workers.htm>.

<sup>19</sup> “Child care workers aren’t paid enough to make ends meet.” Economic Policy Institute. Available at: <https://www.epi.org/publication/child-care-workers-arent-paid-enough-to-make-ends-meet/>.



## Additional Priorities

**State leaders should also consider implementing or extending policies put in place during COVID-19** around (but not limited to) child absences and eligibility redetermination periods, reducing or eliminating family copayments, and increasing the income limit for initial eligibility for assistance. In addition to supporting pandemic-linked needs, state policymakers should **also invest in CCR&Rs** and their ongoing work to bolster high-quality child care.

States should continue to recognize quality child care programs through methods such as licensing and accreditation by early childhood organizations like the National Association for the Education of Young Children (NAEYC), and awarding ratings through a Quality Rating and Improvement System (QRIS). Simultaneously, states need to hold quality programs accountable for equitable policies. Even during a crisis, states can continue to incentivize and support programs in moving toward a higher quality threshold set by the state lead agency. Some states have done this by providing **increased stabilization fund amounts to those with higher ratings or by supporting providers to invest in quality improvement**. However, it is critical that states examine their quality ratings systems to ensure they do not perpetuate discriminatory treatment of child care programs and educators, particularly family child care (FCC) and family, friend and neighbor (FFN) care.

Finally, states should expand available comprehensive paid family and medical leave (PFML) benefits. PFML can be used to care for a child after birth or adoption, as well as to care for a sick family member or aging parent.<sup>20</sup> PFML can support families in bridging these needs while avoiding job disruption. But according to the Bureau of Labor Statistics, only 17 percent of civilian<sup>21</sup> workers have access to paid family and medical leave. This hurts U.S. businesses as well. The combination of a broken child care system and a lack of paid family and medical leave lead to high rates of turnover and lost productivity that costs employers \$36.9 billion each year.<sup>22</sup> Federal policymakers must also act on PFML to ensure that all Americans have access. But, until PFML is required by federal law, states have the opportunity to lead and advance these family-friendly policies on their own.



## Building the Movement

In this unique moment, CCAoA understands that we need to offer ways of addressing the core problems that plague child care – equity, access, affordability, and quality. But our analysis does not stop there. We must also think critically about the role that CCR&Rs could play in supporting a movement to adopt large-scale policy changes. At our Together Toward Transformation Institute this fall, we began the conversation with CCR&Rs about how, if we are to advocate for policies that get us closer to re-imagined financing for our child care system, they may have to grow from their current, sometimes limited, advocacy roles. CCAoA challenges CCR&Rs to think about how to best amplify their role as advocates and change agents.

<sup>20</sup> *An Unmet, Growing Need: The Case for Comprehensive Paid Family and Medical Leave in the United States*. Available at: <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-leave/an-unmet-growing-need-the-case-for-comprehensive-paid-leave-united-states.pdf>.

<sup>21</sup> <https://www.bls.gov/opub/ted/2019/access-to-paid-and-unpaid-family-leave-in-2018.htm>

<sup>22</sup> <https://www.bls.gov/opub/ted/2019/access-to-paid-and-unpaid-family-leave-in-2018.htm>

**First**, we encourage CCR&R leaders to think about whether their leadership adequately reflects their communities and the families they seek to serve. We urge CCR&Rs to set goals to provide executive and decision-making roles to Black, Indigenous, and People of Color (BIPOC). **Second**, we urge CCR&Rs to think about advocacy – by which we mean education – as a part of their mission. The current moment asks more of all of us, and we urge CCR&Rs to explicitly make it part of their mission to educate their local, state, and federal policymakers on the impacts of policies on the families and providers that CCR&Rs serve every day.

**Third**, we encourage CCR&Rs to create staff roles dedicated to building relationships with the K-12 system and the health and mental health care sectors in their communities. The pandemic has demonstrated that child care is not thought of often enough by the school and health care sectors; that view has to change, and child care providers must be seen as partners to K-12 administrators, teachers, and health officials. CCR&Rs are perfectly positioned to create these linkages and develop these relationships.

**Finally**, we encourage CCR&Rs to help CCAoA harness the emotion and energy of parents frustrated by the failure of our nation to support child care. Channeling this outrage into a coordinated effort to fix the broken child care system requires us to make it easier for individuals to engage in advocacy. It will mean turning our efforts to transforming busy, stressed providers and families into a grassroots force that policymakers can no longer deny. Over decades, CCR&Rs have built a presence in their communities and have demonstrated their intricate knowledge of their local child care system's assets and gaps. They know what families need and what providers need. CCR&Rs can now leverage this knowledge and help connect families, providers, employers, and partner groups to **a larger movement, led by CCAoA**, to create the political will needed to transform the entire system.

## Conclusion

---

For too long, child care has been overlooked. It has been the silent support enabling company productivity, individual economic mobility, school readiness, and children's social/emotional development. But in 2020, when life as we knew it was upended, child care finally had the nation's attention. It is incumbent upon us now to direct people's attention to the changes that can rebuild the child care system so that it no longer perpetuates the gaps and inequities that keep children from developing to their potential, that keep parents mired in poverty, and that keep providers operating on razor-thin margins.

At this moment, it is the responsibility of child care advocates to harness the widespread frustration with the child care system, and alchemize that frustration into political action. As a community, we must unify ourselves around a few bold policy solutions for child care: mandatory federal funding, fair compensation for those who teach our youngest children, and a network of complementary services and policies that lift up all families – not just the very rich or the very poor. **CCAoA is ready to meet this moment.** We are committed to using our research, data, advocacy and policy expertise, and the reach of our CCR&R partners, to demand the changes the system has long needed. A well-funded, equitable, and sustainable child care system is within reach, and CCAoA is ready to lead the way.



Child Care Aware® of America is our nation's leading voice for child care. Our vision is that every family in the United States has access to high-quality, affordable child care. We advance a child care system that effectively serves all children and supports children's growth, development and educational advancement and creates positive economic impact for families and communities.

To learn more about our mission,  
**visit [childcareaware.org](http://childcareaware.org)**



(703) 341-4100



@childcareaware



@childcareawareusa

1515 N. Courthouse Road, 3rd Floor, Arlington, VA 22201