

**Child Care Access During COVID-19: Effects on Employment and
Well-Being in Durham, NC**

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Introduction

The effects of COVID-19 have been pervasive: increased poverty, unemployment, food insecurity, illness, fear, and frustration. However, COVID-19 has been particularly challenging for parents of young children with child care needs. Even prior to COVID-19 there was a child care crisis: demand for child care exceeded supply, prices made it difficult for many families to afford child care, and child care provider operation hours often didn't meet the needs of all parents. Now, the mechanisms and challenges that created the child care crisis have multiplied. Over 70% of providers have had to close down, decrease capacity, or reduce operating hours at some point throughout the pandemic as both children and teachers have become ill (Smith & Tracey, 2020). Simultaneously, increased financial strain due to pandemic-related job loss has made it more difficult for families to afford child care.

One constant both before and during the pandemic has been that research shows women and people of color disproportionately suffer when there are barriers to child care (Schochet, 2019). Within the workforce, women and people of color are systemically underpaid, underrepresented, and discriminated against. While there are a variety of reasons for this inequity, studies point to child care barriers as one of the root causes (Schochet, 2019). Furthermore, because women are more likely to shoulder primary child care responsibilities than their counterparts, stressors related to child care disproportionately impact women; these stressors often have significant negative impacts on mothers' mental health (Gogoi, 2020).

The effects of insufficient child care infrastructure and a system that penalizes working parents—especially mothers—have been exacerbated by the COVID-19 pandemic, reducing child care access, pushing parents out of the workforce, and negatively impacting parental well-being. While there have been numerous studies on the impacts of child care access, because the COVID-19 pandemic is ongoing, there are a limited number of studies that explore the effects of COVID-19 on parents and child care. This research attempts to make up for some of these deficits and focuses on the status of child care access and its ramifications in Durham, North Carolina. We chose Durham because Durham is a metropolitan area with varied socio-economic demographics.

To conduct our research, we surveyed 75 parents living in Durham with children ages five or younger. Our survey covered topics related to child care access obstacles and the effects of child care access on employment outcomes and well-being. Our findings highlight the importance of child care for economic empowerment and well-being, and will be used to advocate for policies and resources that promote child care access and ease the burdens faced by those that struggle to access child care.

Data and Methods

To gather data for this research, we administered an approximately 10-minute-long web-based Qualtrics survey to parents between November 2021 and January 2022. In order to qualify for participation, parents had to be at least 18 years old, reside in Durham, NC, and have at least one child aged five or younger. Respondents received a \$10 Amazon gift card for their participation, an incentive that was generously funded by the Kenan Institute for Private Enterprise at the University of North Carolina at Chapel Hill.

Participant recruitment was conducted through outreach to child care providers and community organizations. We gathered a list of all child care providers in Durham, NC through the North Carolina Department of Health and Human Services. We assigned each child care provider a number and then used a random number generator to select which child care providers to reach out to and ask if they would be willing to share our survey with parents. Fifty-two day cares (60.87% of day cares we were able to get in contact with) said they would be willing to forward our survey to parents. Additionally, we placed flyers in front of the Lincoln Community Health Center in Durham and a WIC (Women, Infants, and Children) clinic in Durham.

Our survey assessed background characteristics/demographics, child care use, child care obstacles, implications of child care barriers on employment outcomes, and depression and anxiety among parents. We measured anxiety using the Generalized Anxiety Disorder Scale (GAD-7) and depression symptoms using the Patient Health Questionnaire Depression Scale (PHQ-8). The GAD-7 and PHQ-8 scales come from a clinically validated set of questions designed to assess anxiety and depression symptoms. Participants were asked to respond to each question and then we summed across responses to generate a single measurement for anxiety and depression severity for each participant. We separated severity cutoffs between no anxiety/depression, mild anxiety/depression, moderate anxiety/depression, and severe anxiety/depression based on traditional cutoffs used for GAD-7 and PHQ-8. Both moderate and severe measurements represent clinical anxiety/depression (Kroenke 2016).

Figure 1 displays an overview of our survey participants' characteristics.

Figure 1: Participant Characteristics

Participant Characteristics

¹Gender identity

¹ *We don't stratify the effects of child care considerations by gender because of the limited number of male respondents, but we draw on prior studies to conclude that these effects are likely larger and more consequential for women and individuals from marginalized communities.

| | |
|---------------------------------------|---------|
| Female | 78.85 % |
| Male | 21.15 |
| Race | |
| White | 73.08 % |
| Black or African American | 15.38 |
| Asian or Pacific Islander | 5.77 |
| Middle Eastern or North African | 1.92 |
| Other | 3.85 |
| Hispanic origin | |
| Hispanic | 9.62 % |
| Non-Hispanic | 90.38 |
| Age | |
| 18-25 | 5.77 % |
| 26-35 | 50.00 |
| 36-45 | 42.31 |
| 46-55 | 1.92 |
| Education | |
| Some College | 11.54 % |
| Associate's Degree | 5.77 |
| Bachelor's Degree | 30.77 |
| Master's Degree | 36.54 |
| Doctorate or Professional Degree | 15.38 |
| Annual Household Income | |
| Less than \$25,000 | 3.92 % |
| \$25,001-\$50,000 | 21.57 |
| \$50,001-\$75,000 | 9.80 |
| \$75,001-\$100,000 | 14.96 |
| \$100,001-\$125,000 | 9.80 |
| \$125,001-\$150,000 | 7.84 |
| \$150,000+ | 32.09 |
| Number of Dependent Minors | |
| 1 | 45.00 % |
| 2 | 35.00 |
| 3 | 15.00 |
| 5 | 1.67 |
| 8 | 1.67 |
| 10 or more | 1.67 |
| Household Primary Caregiver | |
| Respondent is only caregiver | 15.09 % |
| Respondent is primary caregiver | 15.09 |
| Respondent & partner share Caregiving | 67.92 |
| Partner is primary caregiver | 1.89 |

Household Type

| | |
|------------------------------------|---------|
| Single Parent / Guardian Household | 20.75 % |
| Two Parent / Guardian Household | 79.25 |

Respondent Employment Status

| | |
|--------------------|---------|
| Not Employed | 17.31 % |
| Employed Full-Time | 82.69 |

Partner Employment Status

| | |
|--------------|---------|
| N/A | 19.23 % |
| Not Employed | 5.77 |
| Employed | 75.00 |

Child Care Use

| | |
|---|---------|
| Using some form of child care outside of immediate family | 96.49 % |
| Not using some form of child care outside of immediate family | 3.51% |

| | |
|---------------------|-----------|
| Total number | 75 |
|---------------------|-----------|

Child Care Access and Challenges

Pre-pandemic, only about 29% of children aged zero to five living in Durham were enrolled in a licensed child care program (Durham's Partnership for Children, 2019). This low percentage is likely due to a combination of informal child care use, families that can afford to have at least one parent stay home with children, and child care access barriers. Common barriers to child care include high costs, limited slots at child care providers, and provider operating hours not lining up with parent needs. Many parents that are able to enroll their kids in a child care program still aren't able to access child care for the number of hours or specific hours they desire. Because of day care closures, provider capacity constraints, and COVID-19 exposure risks, COVID-19 exacerbated barriers to child care (Smith & Tracey, 2020).

Of our survey participants, 47.17% experienced their day care provider temporarily closing due to COVID-19, 3.77% of participants experienced their day care provider permanently closing due to COVID-19, and 13.21% said a child care provider that they were using limited available slots due to COVID-19.

Figure 2 shows the percentage of participants currently experiencing various obstacles preventing them from accessing their desired level of child care. As illustrated, 39.62% of participants listed cost, 28.30% of respondents listed COVID-19 exposure risk, 24.53% of participants listed lack of available child care slots and/or long waitlists at providers, and 7.55% of participants listed inconvenient/insufficient child care provider operating hours.

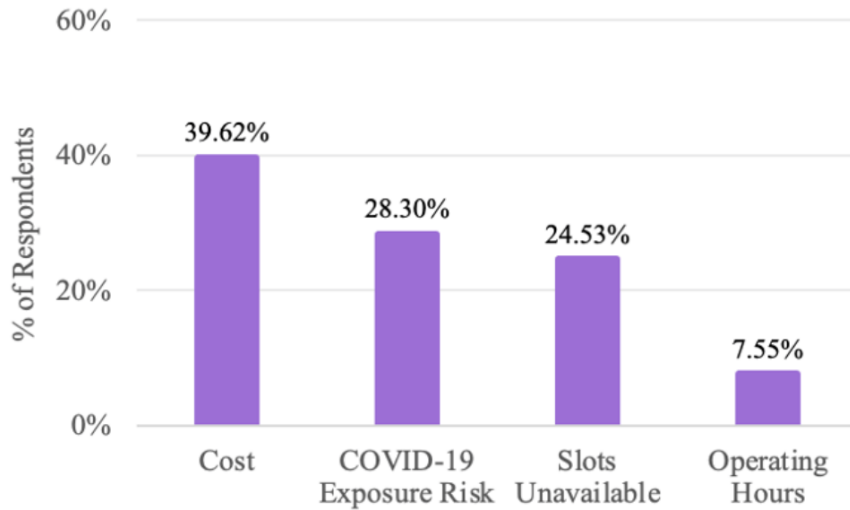


Figure 2: Child Care Obstacles Experienced

Overall, 63.46% of participants are experiencing at least one child care-related obstacle listed above. While parents of varied demographic characteristics are experiencing child care obstacles, there are notable racial disparities in child care obstacles experienced. Sample size constraints made it difficult to break down obstacles by each racial group, but we do find that a higher percentage of Black participants (75.00%) are experiencing at least one child care obstacle than the percentage of white participants (62.53%) experiencing at least one child care obstacle.

Despite almost 40% of respondents listing cost as a barrier, only 13.21% said they have previously applied for and received subsidized child care. About 4% of respondents have previously applied for and not received subsidized child care. This finding is consistent with the fact that subsidized child care tends to be limited to low-income individuals, despite higher income parents also struggling to afford rising child care costs. Parents or guardians in Durham County can apply for financial aid through individual providers or child care subsidies through the Subsidized Childcare Assistance Program that is administered by the North Carolina Department of Health and Human Services (NC DHHS) Division of Child Development and Early Education (DCDEE). In order to be eligible for the Subsidized Childcare Assistance Program, families of four cannot have a monthly income that exceeds \$4,100. Still, the majority of households end up having to pay around 10% of child care costs even with the subsidy (Sorrells, 2019).

Within our survey, parents were asked to describe what their greatest child care-related challenges have been throughout the COVID-19 pandemic. The most common subject addressed by participants was temporary day care closures and children being sent home due to COVID-19 infections and/or exposures. Parents mentioned that this happened at unexpected times, something particularly difficult to navigate when working. Even for parents working remotely,

children being sent home served as a work distraction. Separately, many parents discussed being worried about their own health and safety as well as that of their children because of potential COVID-19 exposures at daycare facilities. Participants also noted stressors related to rising costs of already high daycare tuitions, and difficulty affording daycare costs due to heightened familial financial strains during the pandemic.

Effects of Child Care Access on Employment and the Economy

Child care is central to maintaining economic security, especially for women. When there are barriers to quality and affordable child care, women are often the ones who have to make the decision between spending a significant percentage of their income on child care, settling for a lower-quality child care option, or becoming a full-time caregiver (Schochet, 2019). However, some parents don't even have these options. A study conducted by the Center for American Progress found that in a representative sample, there were only enough licensed child care slots to accommodate 23% of toddlers and infants in the United States (Jessen-Howard et al., 2020). With limited availability of slots and operating hours, parents are often forced to rely on their social network to fill the gap, or choose to leave the workforce altogether. Surveys such as the 2016 U.S. Early Childhood Program Participation Survey consistently show that child care is particularly important when it comes to helping women and single parents maintain employment (Schochet, 2019). Data from the National Survey of Children's Health shows that between 2016 and 2018 over 2 million parents of children under five (or about 9% of these parents) had to either quit their job, forgo a job opportunity, or make a drastic career move because of barriers to child care (Novoa & Jessen-Howard, 2020). Not only is this harmful for the individuals who face these challenges, but it also has effects on the economy. Businesses in the U.S. are estimated to lose \$12.7 billion annually in workforce labor because of lack of child care access and the U.S. loses an estimated \$57 billion annually in earnings, productivity, and revenue because of child care barriers (Bishop-Josef et al., 2019).

As COVID-19 has exacerbated the child care crisis, it has also skyrocketed the number of parents, particularly women, forced to leave the workforce because of child care barriers. As of July 2020, one out of four U.S. women (twice the rate of men) who have lost their job during the pandemic reported that this was because of child care challenges (Modestino, 2020). Between February 2020 and February 2021 in the U.S., over 2.3 million women exited the workforce, while only 1.8 million men left the workforce ("The Impact of COVID-19 on Women," 2021).

Within our survey, we asked participants if they have had their career or career prospects negatively impacted by child care considerations and 30.77% of participants responded that they have. Additionally, we asked parents what employment steps they would take if they had access to more reliable and affordable child care. Figure 3 illustrates the breakdown of participant responses. Participants were allowed to select as many responses as applicable. As depicted, 33.33% would look for a higher paying job, 30.00% would seek a promotion or more

responsibility at work, 30.00% would seek additional education or training for their career, 26.67% would look for a different job that interests them more, and 20.00% would ask for more hours at work. Our questions about employment steps were adapted from survey questions included in the GBA Strategies National Poll (Schochet, 2019).

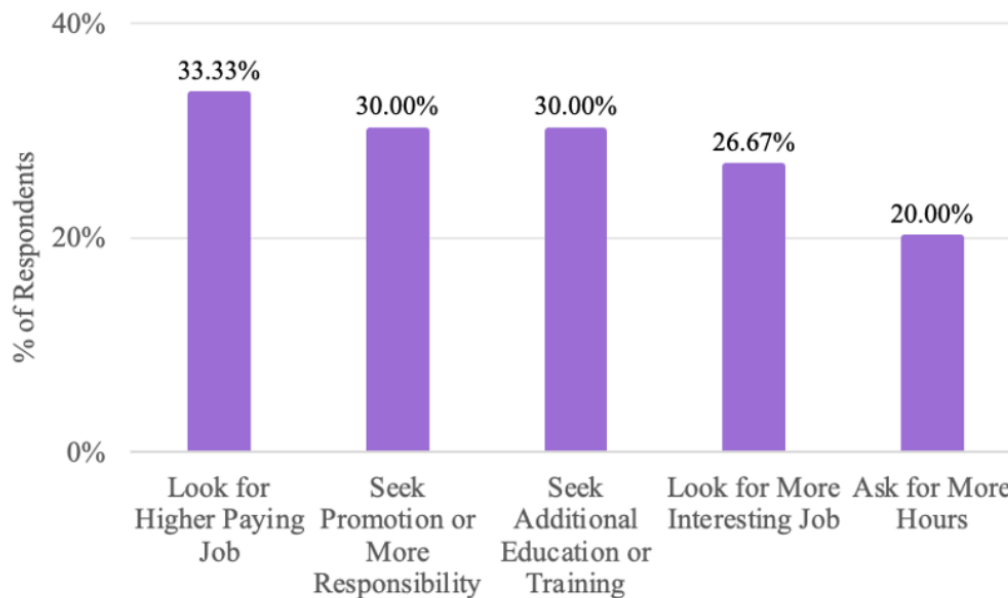


Figure 3: Employment Steps Parents Would Take with More Reliable Child Care

Effects of Child Care Access on Well-Being and Mental Health

In addition to lack of child care access impacting employment outcomes, lack of child care access harms overall well-being. Well-being refers to someone's quality of life, with measures encompassing tangible indicators such as education level and income, and intangibles such as mental health and stress levels ("Well-Being Measurement", 2017). The COVID-19 pandemic negatively impacted people's well-being through a variety of dimensions such as financial insecurity, job loss, social isolation, and mental health. Because child care barriers have led parents, especially women, to disproportionately face economic challenges, the weight of these economic challenges in conjunction with stress associated with child care considerations takes a toll on parents and their mental health.

The effects of poor well-being can be debilitating: difficulty completing daily tasks, inability to maintain employment, and increased risk of physical illness. As a result, poor well-being in one area leaves people at risk of deteriorating well-being in other areas, often leading to a downward spiral in terms of both mental and physical health (Bennett & Kearney, 2018). Poor parental well-being can be particularly harmful to children. For instance, a parent may struggle to conduct paid labor, domestic unpaid labor, and everyday caretaking responsibilities. Research indicates

that poor parental well-being has developmental consequences for children that can last into adulthood, with poor maternal mental health tending to be especially consequential due to mothers being likely to take on the majority of caretaking duties (Kamis, 2021).

Within our survey, parents were asked to describe how child care access or lack thereof has impacted their overall well-being and mental health during the COVID-19 pandemic. Eighty-two percent of parents who responded to this question said that issues related to child care access were responsible for increases in their stress levels and/or declines in their overall well-being and mental health. Of those who reported heightened stress levels, 86% cited employment-related challenges as a cause. For example, having to quit a job or reduce working hours because of inaccessible child care, juggling childcare while working remotely, increased distractions while working remotely when kids are home, and concern about having to take time off from work if children get sick or are exposed to COVID-19. Additional sources of stress reported include kids(s) getting sick from COVID-19 exposures at daycares, contracting COVID-19 from children because of day care exposures, and high child care costs.

We also measured depression using the PHQ-8 scale and anxiety using the GAD-7 scale. Out of the respondents, 29.40% were experiencing mild depression, 7.76% were experiencing moderate depression, and none were experiencing severe depression. Regarding anxiety, 23.48% of respondents were experiencing mild anxiety, 7.89% were experiencing moderate anxiety, and none were experiencing severe anxiety.

Figures 4 and 5 depict the prevalence of depression and anxiety for those currently experiencing child care obstacles versus those not currently experiencing any child care obstacles. No respondents provided answers indicating severe anxiety or depression, so the figures just include mild and moderate depression/anxiety.

As shown in Figure 4, 39.39% of respondents experiencing child care obstacles are mildly depressed and 9.09% of respondents experiencing child care obstacles are moderately depressed. In comparison, 10.00% of respondents not experiencing child care obstacles are mildly depressed and 5.00% of respondents not experiencing child care obstacles are moderately depressed. This suggests that those experiencing child care obstacles have an almost 30 percentage point higher rate of mild depression than their counterparts and almost double the rate of moderate depression of their counterparts.

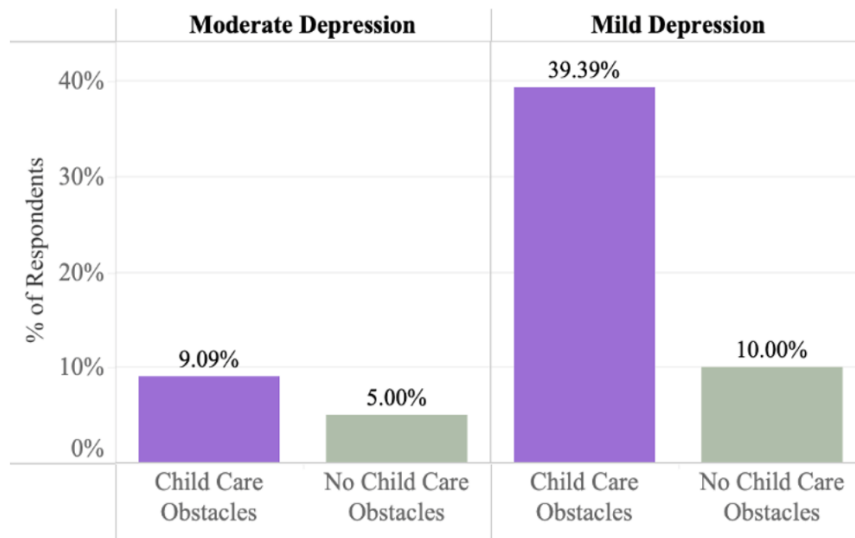


Figure 4: Depression by Child Care Obstacles

As shown in Figure 5, 27.27% of respondents experiencing child care obstacles have mild anxiety and 9.09% of respondents experiencing child care obstacles have moderate anxiety. In comparison, 15.00% of respondents not experiencing child care obstacles have moderate anxiety and no respondents not experiencing child care obstacles have moderate anxiety. This suggests that those experiencing child care obstacles have almost double the rate of mild anxiety of their counterparts and an almost 10 percentage point higher rate of moderate anxiety than their counterparts.

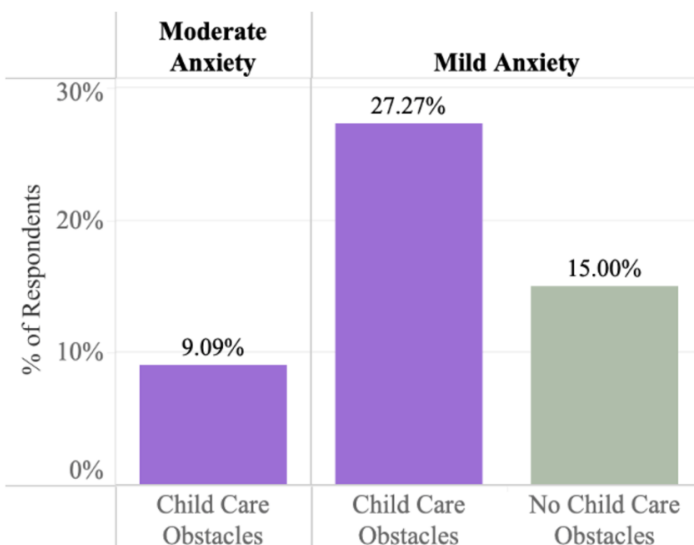


Figure 5: Anxiety by Child Care Obstacles

Limitations

As anticipated, due to challenges accessing low-income parents and parents from marginalized communities, our sample overrepresents high-income and white individuals in Durham. While the median Durham income is \$65,534, our sample's median income lies in the \$75,001-\$100,000 range. Further, only 39.2% of Durham residents are white but 73.08% of our sample is white (Data USA, 2019). Because of these demographic limitations and the majority of our participants already accessing some form of child care, our data likely doesn't capture the true extent of child care obstacles that parents in Durham are experiencing. However, we use the COVID-19-related day care closures as well as the understanding that our data is not fully representative to gain a better picture of how parents are impacted by lack of child care access.

Discussion

Child care access already presented challenges for parents before the COVID-19 pandemic. During the COVID-19 pandemic, those challenges have expanded. Our survey analysis indicates that parents in Durham, NC have been experiencing a variety of obstacles related to child care, including high costs, risk of COVID-19 exposure at day cares, lack of available child care slots, and inconvenient/insufficient provider operating hours. Of these obstacles, high cost appears to be the most common.

Barriers to child care are negatively impacting employment outcomes and well-being. Notably, 30.77% of our survey respondents indicated that child care considerations have negatively impacted their career trajectory and the rate of clinical depression among participants with child care obstacles is higher than the rate among those without child care obstacles.

While this study focuses on child care access and its ramifications during the COVID-19 pandemic, it highlights the effects that lack of child care access can have on parents more broadly. Studying these effects helps elucidate some of the struggles that individuals who are from marginalized backgrounds and harder to reach for research studies have been experiencing at a higher degree than their counterparts both before and during the COVID-19 pandemic.

As previously discussed, child care barriers have always disproportionately affected low-income women and women of color, but research shows that this has been especially true during the COVID-19 pandemic (Mueller, 2020). While some people had more flexibility when it came to child care because of remote work, people of color are more likely than their counterparts to work in a role with inflexible and in-person work hours throughout the pandemic, making child care essential. Data released by the Urban Institute shows that 31% of Hispanic workers and 33% of Black workers had jobs that required in-person work even during stay-at-home orders. In contrast, only 26% of white workers had jobs that required in-person work ("Black, Hispanic

Americans are Overrepresented in Essential Jobs, 2021). Additionally, as schools and daycares have closed or reduced hours, women have taken on a disproportionate amount of caregiving and household duties, negatively impacting their employment, earnings, and mental health (Ranji et al., 2021).

Child care access is central to reducing inequities. Lack of child care negatively impacts employment outcomes, which in turn increases cost barriers to child care. When someone can't work and/or access child care, their economic stability is compromised. Economic instability as well as child care barriers lead to heightened stress levels which deteriorates mental health and negatively impacts someone's ability to get back on their feet.

Recommendations

There are steps that can be taken on the national, state, county, and city level to improve child care access. However, because this project focuses on Durham, NC, we limit the scope of these recommendations to the county and city levels. Below are three methods to improve child care access in Durham, NC.

1. *Invest in support for low-income families.* As previously discussed, child care access is an issue that intersects with many other areas of inequality. If parents had more support related to challenges such as finding employment, affording housing, and accessing healthcare, they would be better equipped to combat child care barriers.
2. *Aggregate Resources.* Navigating social services and various resources available to help with child care can be a really challenging and overwhelming process. Local organizations, institutions, and employers can be of use by making it easier for parents to access the help that is available to them.
3. *Expand Durham Pre-K.* Durham currently has a program called Durham Pre-K that provides free pre-k for children age four that come from families with a household income below 400% of the federal poverty line. Families above the income threshold have to pay a monthly fee that is calculated on a sliding scale based on income (Durham's Partnership for Children, 2019). This program differs from many other universal child care programs in that it doesn't include children that are three years old and it restricts access based on income. Adding an additional year of eligibility and lowering the thresholds for financial support would benefit parents.

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Appendix: Survey

Q1 How old are each of the minors who depend on you for care? (Please respond in terms of years.)

- ☐ Minor #1 _____
- ☐ Minor #2 _____
- ☐ Minor #3 _____
- ☐ Minor #4 _____
- ☐ Minor #5 _____
- ☐ Minor #6 _____
- ☐ Minor #7 _____
- ☐ Minor #8 _____
- ☐ Minor #9 _____
- ☐ Minor #10 _____

Q2 Are you using some form of child care (this includes care by anyone outside of your child's guardians or immediate family) for any of your children/dependents?

- ☐ Yes
- ☐ No

Q3 What type(s) of childcare provider(s) have you used over the past three months? Select all that apply.

- ☐ Child care center (with multiple locations)
- ☐ Child care center (family-owned or individual location)

- ☐ Home-based child care provider
- ☐ Nanny or nanny-share
- ☐ Head Start/Early Head Start program
- ☐ Durham PreK
- ☐ Preschool/nursery school program (other than Durham PreK)
- ☐ Pre-kindergarten/school-based program
- ☐ Family or friend cares for child
- ☐ Other, please specify: _____

Q4 What is your current child care provider's certification?

- ☐ One Star Center License
- ☐ Three Star Center License
- ☐ Four Star Center License
- ☐ Five Star Center License
- ☐ One Star Family CC Home License
- ☐ Two Star Family CC Home License
- ☐ Three Star Family CC Home License

- ☐ Four Star Family CC Home License
- ☐ Five Star Family CC Home License
- ☐ Religious Sponsored Center
- ☐ I'm not sure
- ☐ Other, please specify: _____

Q5 Were any of your children/dependents in some form of childcare prior to the start of the COVID-19 pandemic?

☐ Yes

☐ No

Q6 What type(s) of childcare provider(s) did you use prior to the pandemic? Select all that apply.

- ☐ Child care center (with multiple locations)
- ☐ Child care center (family-owned or individual location)
- ☐ Home-based child care provider
- ☐ Nanny or nanny-share
- ☐ Head Start/Early Head Start program
- ☐ Durham PreK
- ☐ Preschool/nursery school program (other than Durham PreK)

- ☐ Pre-kindergarten/school-based program
- ☐ Family or friend cares for child
- ☐ Other, please specify: _____

Q7 Do any of the following obstacles currently prevent you from accessing your desired level of child care? Select all that apply.

- ☐ Cost of child care
- ☐ Inconvenient/insufficient child care provider operating hours
- ☐ Lack of available child care slots and/or long waitlists at providers
- ☐ Risk of COVID-19 exposure
- ☐ Other, please specify: _____
- ☐ I have not faced any challenges accessing child care

Q8 Which of the following barriers to child care access have you experienced since March 2020? Select all that apply.

- ☐ A child care provider that I was using **temporarily** closed due to COVID-19
- ☐ A child care provider that I was using **permanently** closed due to COVID-19
- ☐ A child care provider that I was using limited available slots due to COVID-19
- ☐ I have not experienced any of the above barriers

Q9 What have your greatest child care-related challenges been throughout the COVID-19 pandemic?

Q10 Have you previously applied for subsidized childcare (ex. Durham Early Head Start, Durham Head Start, Smart Start, Subsidized Childcare Assistance Program, etc.)?

- ☐ Yes, I have previously applied for and received subsidized childcare
- ☐ Yes, I have previously applied for and not received subsidized childcare
- ☐ No, I have not previously applied for subsidized childcare

Q11 Does your current place of employment offer any of the following benefits? Select all that apply.

- ☐ Paid family leave
- ☐ Flexible hours
- ☐ Emergency leave
- ☐ On-site childcare
- ☐ Childcare referral services
- ☐ Subsidies/Tuition Assistance for the cost of childcare
- ☐ Other, please specify: _____

Q12 If you had access to more reliable and affordable child care, would you take any of the following steps in relation to employment and work? Select all that apply.

- ☐ Look for a higher paying job

- ☐ Ask for more hours at work
- ☐ Seek a promotion or more responsibility at work
- ☐ Seek additional education or training for your career
- ☐ Look for a different job that interests you more
- ☐ If currently not working, look for a job in the first place
- ☐ None of the above
- ☐ Something else, please specify:

Q13 Have you or a member of your immediate family had your career or career prospects negatively impacted—such as passing up a job or promotion, working fewer hours, or not being able to pursue new skills—due to child care considerations? Select all that apply.

- ☐ Yes, I have had my career/career prospects negatively impacted
- ☐ Yes, a member of my immediate family has had their career/career prospects negatively impacted
- ☐ No

Q14 Which of the following options best describes your employment directly before the COVID-19 pandemic? Select all that apply.

- ☐ Employed full-time (40 hours/week)
- ☐ Employed part-time (less than 40 hours per week)

- ☐ Self-employed
- ☐ Full-time student
- ☐ Part-time student
- ☐ Unemployed
- ☐ Unable to work for health reasons
- ☐ Stay at home parent/caregiver

Q15 How has your employment situation changed during the COVID-19 pandemic (after March 1, 2020)? Select all that apply.

- ☐ N/A – I did not work pre-COVID-19
- ☐ I am still going to my workplace for the same number of hours as before the pandemic
- ☐ I am still going to my workplace but am working reduced hours
- ☐ I am working from home
- ☐ I was laid off
- ☐ I was furloughed
- ☐ I had to quit my job because I needed to take care of people who depend on me (children, parents, etc.)
- ☐ I had to quit my job because of the health risks of working

☐

I started a new job

Q16 How has your work environment been impacted by the pandemic?

- ☐ I have worked remotely from home
- ☐ I have continued to work fully in-person
- ☐ I have worked part-time remotely and part-time in person
- ☐ N/A - I have not been working during the pandemic

Q17 Over the last 2 weeks, how often have you been bothered by the following problems?

| | Not at all | Several days | Over half the days | Nearly every day |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| Little interest or pleasure in doing things | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Feeling down, depressed, or hopeless | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Trouble falling or staying asleep, or sleeping too much | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Poor appetite or overeating | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Feeling tired or having little energy | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Feeling bad about yourself -- or that you are a failure or have let yourself or | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

your family
down

Trouble
concentrating on
things, such as
reading the
newspaper or
watching
television

Moving or
speaking so
slowly that other
people could
have noticed. Or
the opposite
being so fidgety
or restless that
you have been
moving around a
lot more than
usual



Q18 Over the last 2 weeks, how often have you been bothered by the following problems?

| | Not at all | Several days | Over half the days | Nearly every day |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| Not being able to stop or control worrying | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Worrying too much about different things | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Trouble relaxing | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Being so restless that it's hard to sit still | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Becoming easily annoyed or irritable | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Feeling afraid as if something awful might happen | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Q19 We are really interested in hearing more about your experiences. Please describe how child care access or lack of child care access has impacted your overall well-being and mental health during the COVID-19 pandemic (March 2020 to present).

Q20 What is your gender?

- ☐ Male
- ☐ Female
- ☐ Non-binary
- ☐ Other, please specify: _____
- ☐ Prefer not to say

Q21 What is your age?

- ☐ 18-25
- ☐ 26-35
- ☐ 36-45
- ☐ 46-55
- ☐ 56-65
- ☐ Over 65

Q22 Are you of Hispanic, Latino, or Spanish origin?

- ☐ Yes
- ☐ No

Q23 What is your race? Select all that apply

- ☐ Black or African American
- ☐ Asian or Pacific Islander
- ☐ Native Hawaiian or Alaskan Native
- ☐ Middle Eastern or North African
- ☐ White
- ☐ Other, please specify: _____

Q24 What is your highest completed level of education?

- ☐ No schooling completed
- ☐ Some high school
- ☐ GED/High School Diploma
- ☐ Some college or trade school
- ☐ Associates degree
- ☐ Bachelor's degree
- ☐ Master's degree
- ☐ Doctorate/professional degree
- ☐ Other, please specify: _____

Q25 What is your annual household income?

- ☐ Less than \$25,000

- ☐ \$25,001-\$50,000
- ☐ \$50,001-\$75,000
- ☐ \$75,001-\$100,000
- ☐ \$100,001-\$125,000
- ☐ \$125,001-\$150,000
- ☐ \$150,000+

Q26 If you have a partner, what is their employment status?

- ☐ N/A – I do not have a partner
- ☐ They work full-time
- ☐ They work part-time
- ☐ They are unemployed

Q27 Who is the primary caregiver in your household?

- ☐ I am the only caregiver
- ☐ I am the primary caregiver
- ☐ My partner and I share caregiving responsibilities
- ☐ My partner is the primary caregiver

Q28 What type of household do you live in?

☐ Single parent/guardian household

☐ Two parent/guardian household

☐ Other, please specify: _____