

SANTA CLARA COUNTY

# KINDERGARTEN PARENT SURVEY

FALL 2020 FINDINGS



FUNDED BY



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## Acknowledgements

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# Snapshot of the 2020 Kindergarten Parent Survey Results

## Background

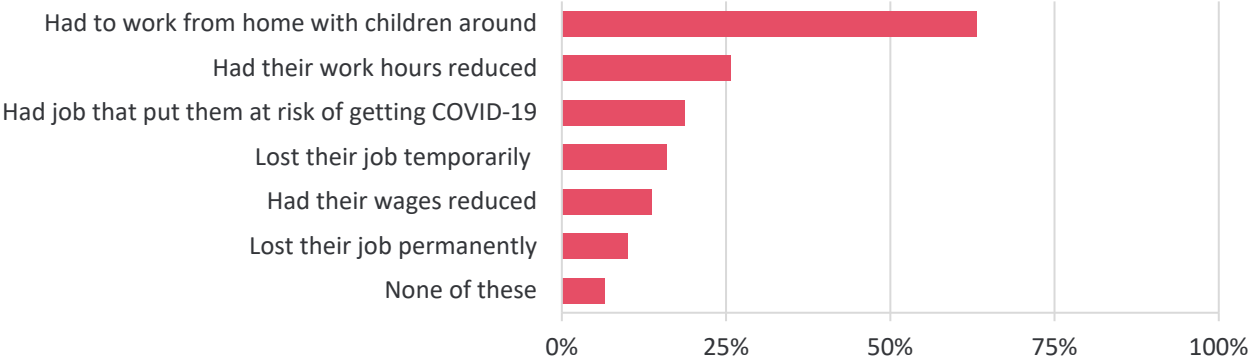
The Santa Clara County Office of Education and FIRST 5 Santa Clara, in partnership with Applied Survey Research (ASR), sponsored a countywide kindergarten parent survey for Santa Clara County administered in September and October 2020. The 2020 study builds on the valuable information gleaned from the 2018 School Readiness Assessment, which involved a teacher-administered assessment of children’s kindergarten readiness skills and a survey of parents/caregivers regarding their child’s demographics, family background, and early childhood experiences. The 2018 study found 50% of children in the county were *Fully Ready* for kindergarten. The strongest predictors of kindergarten readiness included child and family demographic factors as well as child health and well-being, formal early care and education attendance, child bedtime, child resilience, single parenthood, and housing stability.<sup>i</sup>

Due to stay-at-home orders resulting from the COVID-19 pandemic, teacher-administered assessments could not be completed in 2020. Instead, the current study entailed a countywide online survey of 342 kindergarten and transitional kindergarten parents/caregivers that identified areas of strength and need among young children and families. This report describes the results from the survey and, where possible, makes comparisons to data collected in 2018. The results should be interpreted with caution as the sample was not fully representative of the county and the survey was administered only online and subject to the limitations of self-report. Nevertheless, the study illustrates some of the ways in which the community was impacted by COVID-19 and can be used to inform policy and advocacy to help families in Santa Clara County recover from these effects and ensure each child in the county has the opportunity to enter kindergarten ready to learn and succeed.

## Key Findings

COVID-19 has had a significant impact on young children and families in Santa Clara County. As shown in the chart below, 93% of families reported that COVID-19 had impacted their income and employment in some way. Having to work from home with children around and having work hours reduced were the most commonly reported experiences.

Figure 1. Impact of COVID-19 on Family Income and Employment



Note: N=298.

Compared to 2018, a significantly greater proportion of families surveyed in 2020 reported experiencing a variety of stressors, and across nearly all indicators, racial/ethnic and socioeconomic disparities were found. These key findings are described in the table below.

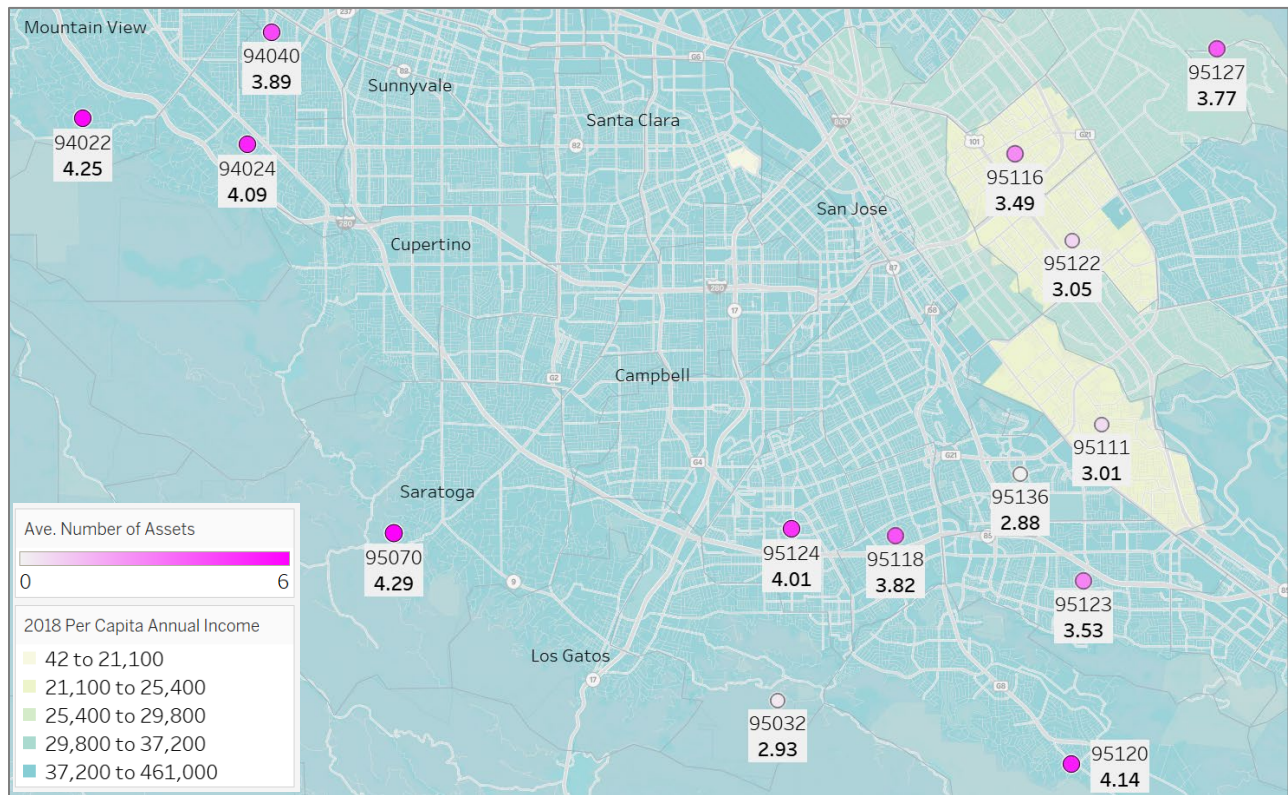
	CHANGES BETWEEN 2018 AND 2020	RACIAL/ETHNIC AND SOCIOECONOMIC DISPARITIES
<b>Family Stressors</b>	<ul style="list-style-type: none"> <li>▪ <b>Increased job loss:</b> In 2018, 6% of parents/caregivers had lost their job, while in 2020, 10% had lost their job permanently and 16% had lost their job temporarily.</li> <li>▪ <b>Increased stress about health and basic needs:</b> Parents/caregivers in 2020 were significantly more concerned about health, employment, and basic needs.</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>Lower-income and Latino/a families were more likely to report a job loss</b> or reduction in work hours, but less likely to report that they had to work from home with children around than other parents/caregivers.</li> <li>▪ <b>Lower-income families and families of color* reported higher levels of concern about basic needs</b> issues.</li> </ul>
<b>Parenting and Child Well-Being</b>	<ul style="list-style-type: none"> <li>▪ <b>Increased concerns about their children:</b> Parents/caregivers in the current year were more concerned about managing their child’s behavior and reported lower levels of child resilience (i.e., the child is able to regulate emotions and adapt well to change).</li> <li>▪ <b>Increased engagement with their children:</b> Families were more likely to engage in various activities at least five days per week in the current year.</li> <li>▪ <b>Increased participation in FIRST 5 Santa Clara County programs,</b> including family resource centers and Triple P.</li> </ul>	<ul style="list-style-type: none"> <li>▪ <b>Higher-income families reported more parenting concerns</b> and concerns about their child’s well-being. There were no significant racial/ethnic differences.</li> <li>▪ <b>Lower-income families and families of color reported higher levels of child resilience.</b></li> <li>▪ <b>Lower-income families were more likely to use parenting services</b> like parent education. There were no significant racial/ethnic differences.</li> <li>▪ <b>Higher-income families and white and multiracial families read with their children more frequently</b> than other families in the sample.</li> </ul>
<b>Access to Health Care, Development, and Early Learning Supports</b>	<ul style="list-style-type: none"> <li>▪ <b>Declines in child health screenings:</b> Children were less likely to receive health screenings in 2020.</li> <li>▪ <b>Reduced access to early intervention:</b> 44% of children with special needs did not receive the professional help they needed during COVID-19.</li> <li>▪ <b>Reduced access to child care:</b> 87% of families reported that their child’s child care closed during COVID-19.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Although socioeconomic and racial/ethnic differences were not statistically significant, <b>white children had the highest rates of well-child and dental visits</b> in the prior year, while <b>lower-income and Latino/a children had the lowest health screening and early care and education (ECE) attendance rates.</b></li> </ul>

\*Note: Throughout this report "families of color" and "parents/caregivers of color" refer to the families and parents/caregivers of Latino/a, Asian American/Pacific Islander, and multiracial children (3% of respondents the indicated their child was Black and another race/ethnicity, but none indicated their child was Black alone).



An index of assets was produced to summarize the strengths and areas of need for children and families in the county. The index was composed of six factors, including food security, housing security, family engagement, ECE attendance, health and dental care access, and developmental screenings and outcomes. On average, higher-income families had significantly more assets than lower-income families, while Asian American/Pacific Islander and Latino/a families had significantly fewer assets than white families. Also, as shown in the map below, zip codes in the county with the highest per capita income levels also tended to have the highest number of assets. There were few participants in the current study who lived in Morgan Hill and Gilroy and therefore these zip codes not shown in the map. However, there is a relatively high level of need in this region, as measured by poverty, outcomes for young children,<sup>ii</sup> and needs reported by FIRST 5 Santa Clara County Family Resource Center participants during the pandemic;<sup>iii</sup> thus it is likely that asset levels are also lower in these areas of the county.

Figure 2. **Average Number of Assets and 2018 Per Capita Annual Income, by Zip Code**



Note: Only zip codes with at least five participants shown. 2018 per capita income from U.S. Census, American Community Survey.

### Program and Policy Implications

The data from this study show that families in Santa Clara County experienced increased stress as a result of the pandemic, but also had more limited access to health and early learning services. The stress caused by the COVID-19 pandemic was not felt equally – lower-income and racial/ethnic minority families were most likely to have experienced financial, housing, and food insecurity and least likely to have had access to ECE and health services. However, these families also gave their children higher resilience ratings possibly because they have had more opportunities than white and more affluent families to witness their child’s ability to adjust to challenges. In contrast, perhaps because they were less consumed with worries about meeting their basic needs, higher-income and white

parents/caregivers expressed greater concerns than other families about their child’s behavior and well-being. The findings inform approaches the community can take to help address challenges caused by COVID-19 in the county, including the following:

### **BASIC NEEDS SUPPORT**



- Advocate for income and job loss supports and reduce barriers to families accessing basic needs supports and services, including nutritious food and stable housing, to address immediate needs of families in Santa Clara County.

### **PARENTING SUPPORT**



- Address barriers to the delivery of parent education programs and resources that help parents engage in nurturing and supportive parenting practices (e.g., limited access to technology for virtual services).

### **HEALTH CARE AND EARLY INTERVENTION**



- Increase the availability of mental health treatment and trauma-informed services for children and their parents/caregivers to help them manage the stress caused by the pandemic.
- Encourage parents/caregivers to continue seeking routine health care for themselves and their children during COVID-19.
- Reduce barriers to access to health care and early intervention services for children, including challenges related to remote service delivery.

### **EARLY CARE AND EDUCATION**



- Invest in the stabilization of child care, which allows parents/caregivers to work and develops the school readiness of their children.
- Promote wraparound early care and education programs that not only build children’s cognitive skills, but address their social and emotional needs, and provide support to their parents/caregivers.

### **SUPPORT FOR PROVIDERS**



- Support the needs of early childhood service providers, including those who serve children with special needs, with financial support, professional development, and technical assistance so they can manage their own stress and transition their outreach and service delivery models to more effectively reach and serve families.

### **TARGETED INVESTMENTS TO PROMOTE EQUITY**



- Target these investments and supports towards families demonstrating the greatest need, including those living in lower-income communities and communities of color. Data from the current study and other research have shown particularly high levels of need in East San Jose, Morgan Hill, and Gilroy, but there are also families in need living within more affluent areas of the county.

Community partners have a responsibility to implement policies and practices that promote universal access to high-quality early childhood experiences and achieve more equitable outcomes for all children. The efforts of education, health, and family support providers, in collaboration with policymakers, communities, and parents/caregivers, can address the effects of COVID-19 and ensure each child in Santa Clara County enters school ready to learn.

## Introduction

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In fall 2018, the first School Readiness Assessment in Santa Clara County in 10 years was conducted. It involved a teacher-administered assessment of children’s kindergarten readiness skills and a survey of parents/caregivers pertaining to their child’s demographics, family background, and child care experiences. The 2018 study found 50% of children in the county were *Fully Ready* for kindergarten. The strongest predictors of kindergarten readiness included child and family demographic factors as well as child health and well-being, formal early care and education attendance, child bedtime, child resilience, single parenthood, and housing stability.<sup>iv</sup>

Due to stay-at-home orders resulting from the COVID-19 pandemic, teacher-administered assessments could not be completed in fall 2020, but a countywide online survey of parent/caregivers with children in kindergarten or transitional kindergarten was administered to identify areas of strength and need among young children and families. In particular, the survey was intended to capture the experiences of families during the COVID-19 pandemic, which created conditions that threatened the school readiness of children, families, and communities. For example, stay-at-home orders closed many schools and early care and education sites, putting parents and caregivers in the position of keeping their children occupied and educated, while in many cases also working from home. In addition, families experienced job loss, financial insecurity, and health threats from the virus. Many community resources like libraries also closed or could only offer services online. Although longitudinal studies will be needed to determine the long-term effects of COVID-19 on children’s development, past research on the impact of pandemics and natural disasters suggest adverse consequences for children’s development.<sup>v</sup> It is also likely that disparities in readiness have widened due to disproportionate impact the virus has had on lower-income families and communities of color.<sup>vi</sup>

The results presented in this report are not fully representative of the county, as participation was limited to families with Internet access, and parents/caregivers of Black students and those who attend schools in the southern region of the county were underrepresented. Nevertheless, the information gathered in the current study on the experiences of Santa Clara County families during COVID-19 can help inform policy and advocacy to help address the effects of COVID-19 and ensure each child in the county has the opportunity to enter kindergarten ready to learn and succeed.





## Methodology

In September and October 2020, 342 parent/caregivers with students entering kindergarten or transitional kindergarten (TK) in fall 2020 responded to an online parent survey (264 parents had children in kindergarten and 78 had children in TK). Children in the sample attended schools in 19 different districts in the county. The survey was available in English, Spanish, and Vietnamese, and participants were entered into a raffle for five \$100 gift certificates to Amazon. Staff at the Santa Clara County Office of Education and FIRST 5 Santa Clara County, Family Resource Centers, and local school districts assisted ASR in disseminating the survey to families throughout the county via their websites, e-newsletter, and social media.

**342** parents/caregivers with K/TK students in  
**19** different districts responded to the online survey

After data were collected and cleaned, numerous statistical analyses were conducted to answer the research questions. Percentages were calculated and chi-square tests were run to test whether differences in percentages for two or more groups are likely real differences (i.e., statistically significant) or are instead due to chance. ANOVA and independent *t*-tests were used to test whether differences in numerical values for two or more groups are likely real differences (i.e., statistically significant) or are instead due to chance. Throughout this report, ASR uses the following standard abbreviations: *N* is used when noting the sample size for a chart or an analysis, and *p*-values (e.g.,  $p < .01$ ) are used to note whether certain analyses are statistically significant. *P*-values that are less than .05 are statistically significant. All significance tests were two-tailed tests (more conservative) rather than one-tailed tests (less conservative).

### A Note about How to Interpret the Data in This Report

Parents/caregivers participated in the readiness study voluntarily. This means that the information presented in this report describes only the students and families assessed, who may differ in important ways from students and families who did not participate. For example, the sample had a higher proportion of white and Asian American/Pacific Islander children compared to the county as a whole. In addition, although 2% of entering kindergartners in the county are Black,<sup>vii</sup> none of the respondents in the current study indicated that their child is Black alone (3% indicated that the child is Black and another race/ethnicity). Therefore, in this report, “families of color” and “parents/caregivers of color” refer to Latino/a, Asian American/Pacific Islander, and multiracial respondents. Furthermore, the online administration of the survey limited the sample to families with Internet access, which is less prevalent in lower-income neighborhoods in San Jose, Morgan Hill, and Gilroy,<sup>viii</sup> which may partly account for the fact that students entering schools in Morgan Hill and Gilroy were also underrepresented in the sample. Statistical weights were applied to the analyses to make the sample more representative of the county, but these limitations should be kept in mind when reviewing the results. Finally, the findings should also be considered in the context of limitations inherent to self-report, including social desirability bias (when respondents tend to make a more socially acceptable response, even when the survey is anonymous like the current survey) and reference bias, which occurs when survey responses are influenced by participants’ differing reference points based on their own experience and understanding.



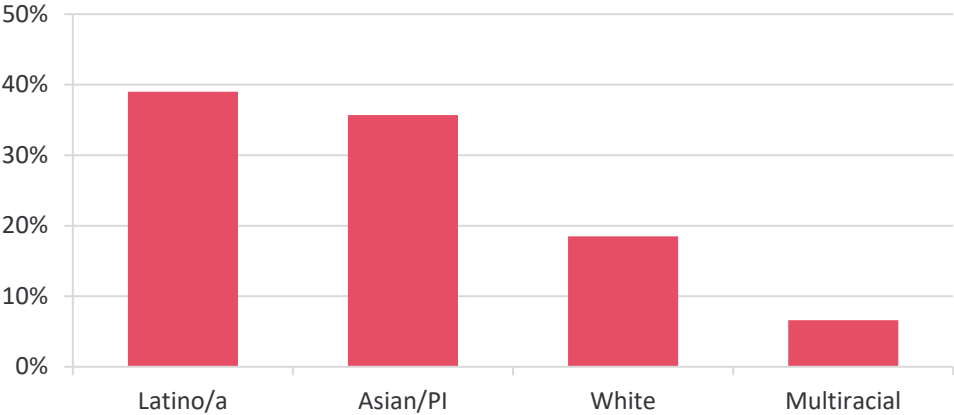
Throughout the report, factors that were significantly associated with school readiness in 2018 are indicated with this icon (note that not all factors measured in 2018 were measured in the current study).

# Demographic and Socioeconomic Characteristics of Students and Families in the Study

## Gender and Race/Ethnicity

In the 2018 School Readiness Assessment, girls were more likely to be ready than boys, while Latino/a children tended to have lower readiness than children of other races/ethnicities. In the current study, there were slightly more males (51%) than females (49%). About 39% of the weighted sample was Latino/a, and over one-third of the sample was Asian American/Pacific Islander. About one-fifth of the sample was white (19%), and 7% was multiracial, including about 3% of the sample who was Black and another race/ethnicity.<sup>ix</sup>

Figure 3. Students' Race/Ethnicity



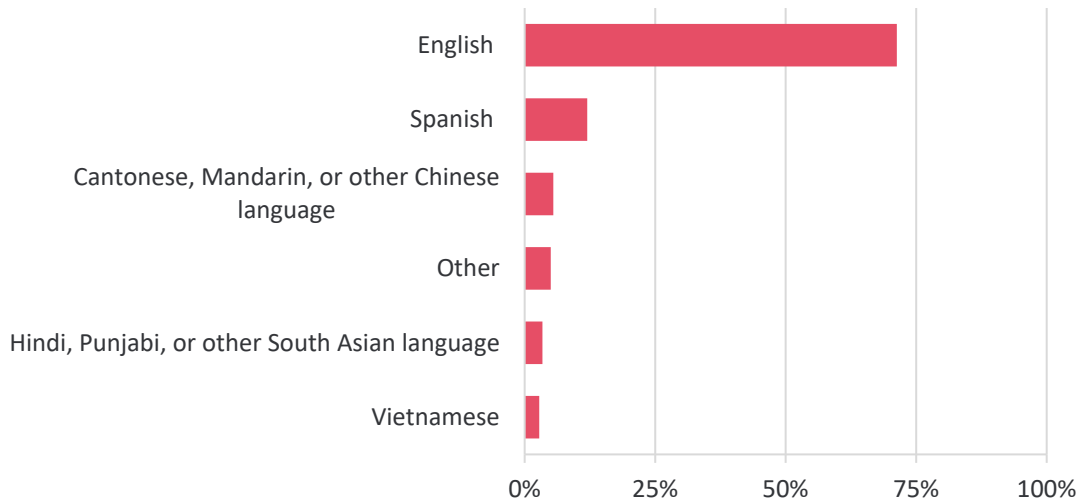
Note: N=337 for gender; N=291 for race.

## Primary Home Language

Children who were proficient in English had higher levels of school readiness than English Language Learners in the 2018 study. Most children in the 2020 study primarily heard English at home (71%), while about 12% of children heard Spanish most often at home. Chinese was the primary home language for 6% of children in the study; Hindi and other South Asian languages were the primary languages spoken in the homes of 3% of the sample; and Vietnamese was spoken at home for another 3% of children. Other languages were less common.

Denotes a characteristic that was significantly related to kindergarten readiness in 2018.

Figure 4. **Home Languages**

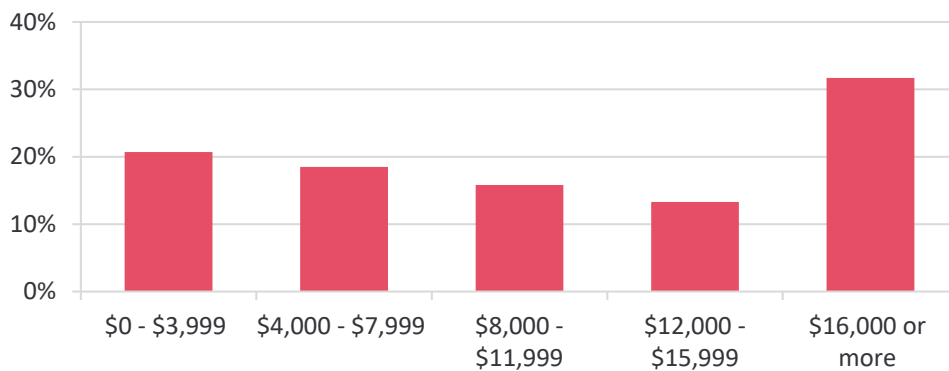


Note: N=296.

 **Family Income**

In 2018, family income was significantly and positively linked to child’s readiness, a finding aligned with previous research that has identified school readiness gaps based on family socioeconomic status.<sup>x</sup> When asked about their current family income, about one in five families reported earning less than \$4,000 per month; nearly half earned between \$4,000 and \$12,000 per month; and 45% earned at least \$12,000 per month. For comparison, the median family income in Santa Clara County is approximately \$12,600 per month (~\$151,620 per year).<sup>xi</sup>

Figure 5. **Monthly Family Income**



Note: N=280.



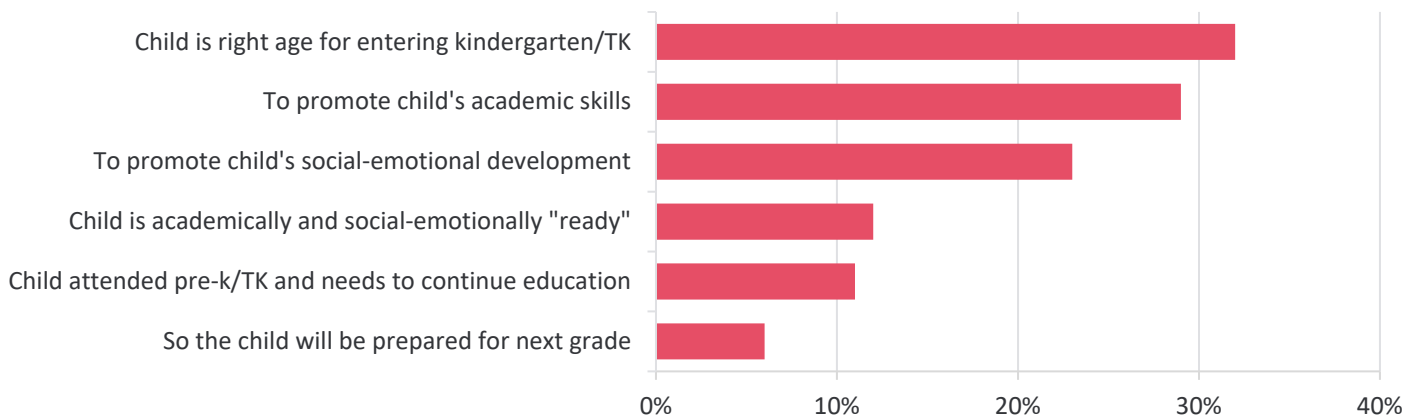
## Why Families Enrolled in Kindergarten or Transitional Kindergarten

On the 2020 Santa Clara County parent survey, parents/caregivers were asked to indicate the reasons they enrolled their child in kindergarten or transitional kindergarten (TK). A few common themes emerged from the responses given by the 310 parents/caregivers who answered the question. The most common reasons are depicted in the chart, and include the child being the **right age to enter kindergarten or TK** (i.e., 4-5 years old) and the parent/caregiver wanting to **promote the child's academic skills** and **social and emotional development**.

*"No matter how involved I am with her learning at home, there is no comparison to the social and emotional benefits of her learning in class with her teachers and peers."*

- Parent/caregiver of a Santa Clara County K/TK student

Figure 6. **Top Six Reasons Parents/Caregivers Enrolled Their Child in Kindergarten/TK**



Note: N=310.

Less common reasons for enrolling in kindergarten or TK included the following:

- The parents/caregiver believes that attending **kindergarten is mandatory** (reported by 4% of the sample);
- The parent/caregiver **likes the school**, the teachers, and programs it offers (4%);
- The child has **siblings at the school** (3%);
- The parent/caregiver wants the child to **learn about school structure and routines** (3%); and
- The parent/caregiver **needs child care** (3%).

# Family Stressors

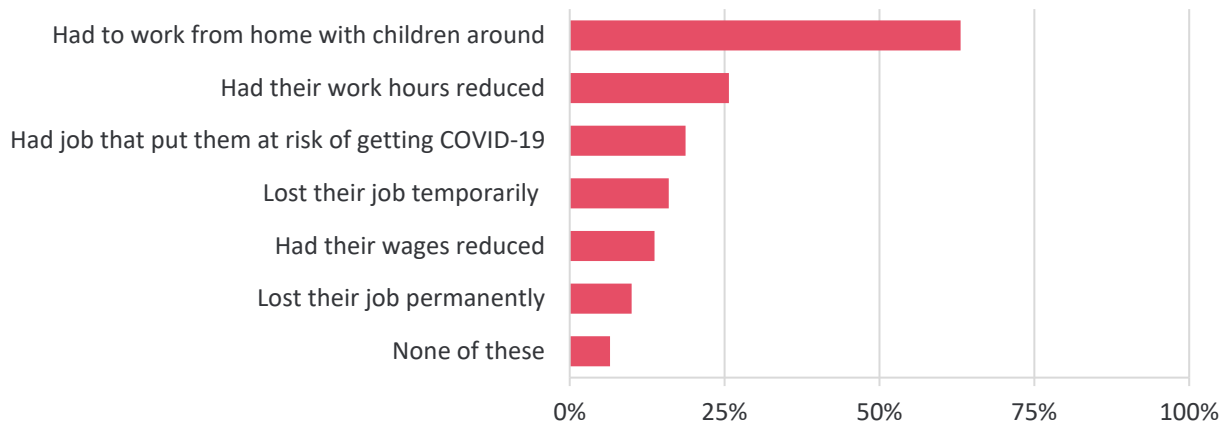
## Impact of COVID-19 on Family Income and Employment

In fall 2020, parents/caregivers indicated how COVID-19 had affected their employment and income. In 2018, just 6% of parents/caregivers had lost a job in the prior year, while in 2020, 10% said they had lost their job permanently, and 16% had lost their job temporarily. Still more parents/caregivers had their work hours or wages reduced (reported by 26% and 14% of the sample, respectively). The job loss rates reported by parents/caregivers in the current study are higher than the rates for all employees in Santa Clara County overall (approximately 9% of jobs were lost between February and April 2020),<sup>xii</sup> a discrepancy that may be partly due to the fact that many parents/caregivers, particularly women, had to reduce their hours or quit their job during the pandemic to take care of children whose child care or school site had closed.<sup>xiii</sup> In fact, in one national poll, 20% of mothers and 13% of fathers had lost their job during the pandemic,<sup>xiv</sup> and in another poll, 60% of households with children reported job loss or a reduction in work hours.<sup>xv</sup>

**93%**  
of parents/caregivers said COVID-19 impacted their income or employment

Nineteen percent of the sample had a job that put them at increased risk of getting COVID-19, and nearly two-thirds of caregivers said they had to work from home with children around. By comparison, about 45% of jobs in the Bay Area overall can be done remotely, most of them in the professional services sector.<sup>xvi</sup>

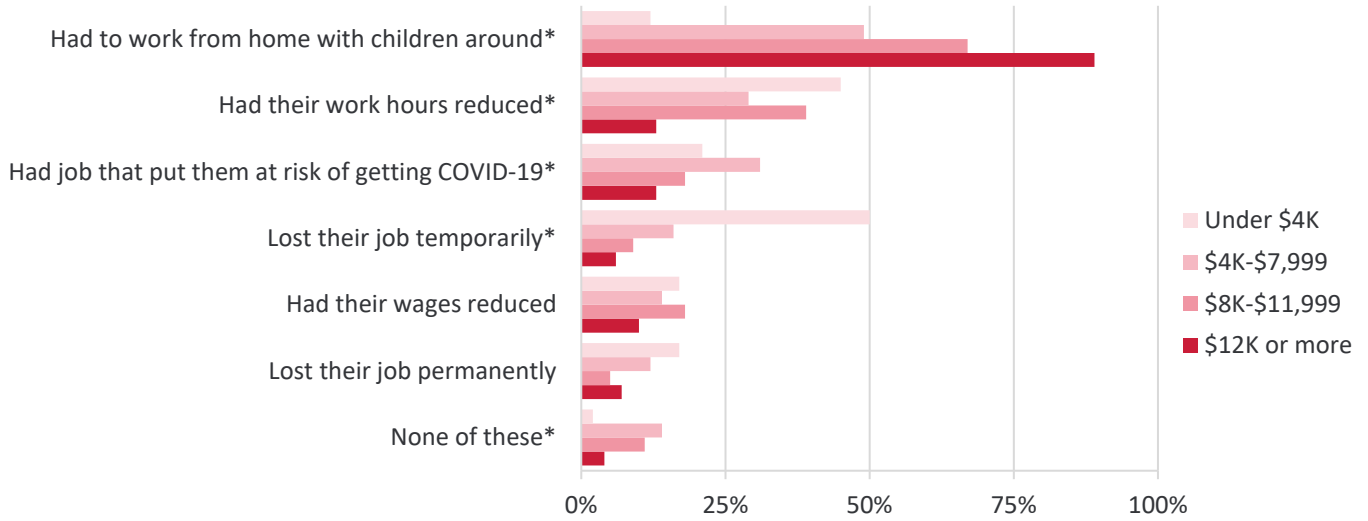
Figure 7. Impact of COVID-19 on Family Income and Employment



Note: N=298.

Lower-income families were more likely than higher-income to report that they had lost their job, had their work hours reduced, or had a job that put them at increased risk of getting COVID-19. Conversely, higher-income families were more likely to report that they had to work from home with children around. National trends also show that low-wage workers were significantly more likely than higher-income workers to lose their job or have their pay cut during the pandemic and less likely to be able to work from home.<sup>xvii</sup>

**Figure 8. Impact of COVID-19 on Family Income and Employment, by Monthly Income**



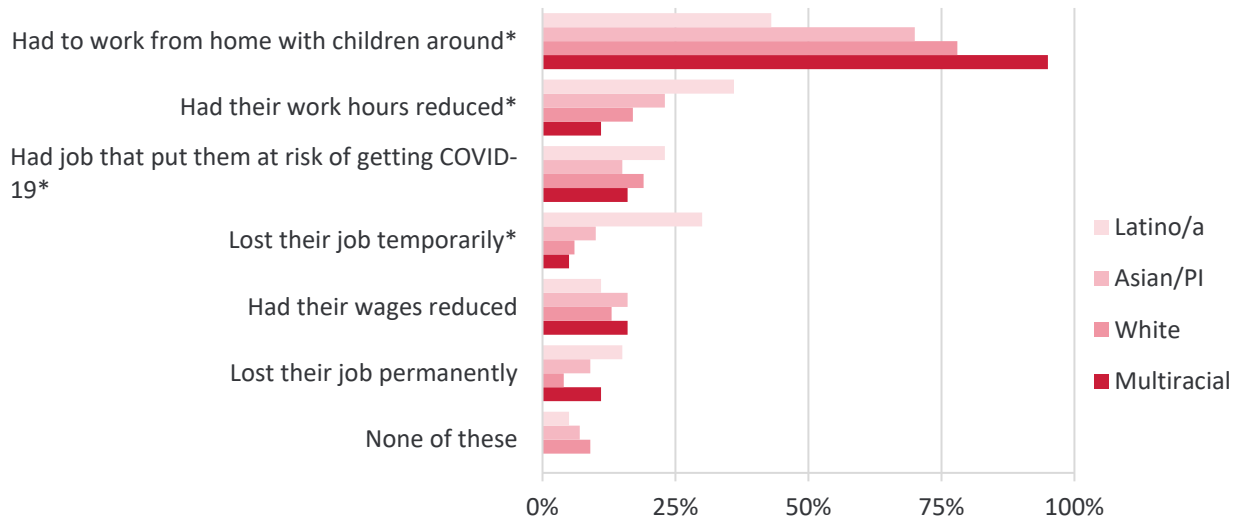
Note: N=279-281. \*Differences statistically significant, p<.05.

Latino/a parents/caregivers were more likely than parents/caregivers of other races to report a reduction in work hours or job loss during COVID-19, but less likely than other parents/caregivers to report that they had to work from home with children around. This is consistent with other research that has found that Black and Latino/a parents/caregivers experienced greater declines in employment than white parents/caregivers.<sup>xviii</sup>

**Lower-income and Latino/a parents/caregivers were most likely to report a job loss or reduction in work hours, but less likely to report having to work from home with children around**

Nationally, Black and Latino/a workers were also more likely to be in jobs that put them at risk for contracting COVID-19 and less likely to be allowed to work from home.<sup>xix</sup>

**Figure 9. Impact of COVID-19 on Family Income and Employment, by Race/Ethnicity**



Note: N=289-290. \*Differences statistically significant, p<.05.

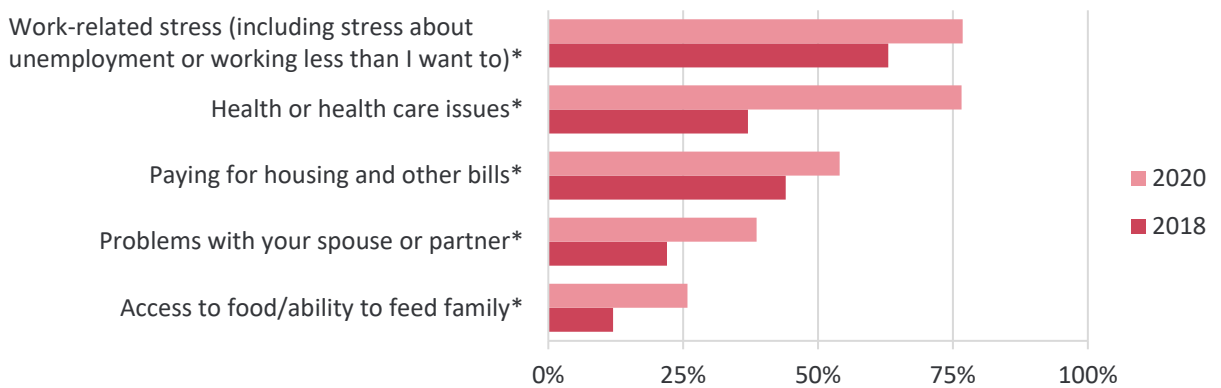


## Family Concerns

Parents/caregivers also indicated the degree to which they were worried about various types of family concerns. The greatest concerns for parents/caregivers in 2020 were related to employment and health, followed by paying bills, problems with one’s spouse or partner, and access to food. A significantly greater proportion of parents/caregivers were concerned about all issues in 2020 compared to 2018, a finding similar to other research showing increased levels of stress among parents/caregivers during the pandemic.<sup>xx</sup>

Parents/caregivers were **significantly more concerned about work, health, family relationships, and meeting basic needs** in 2020 than they were in 2018

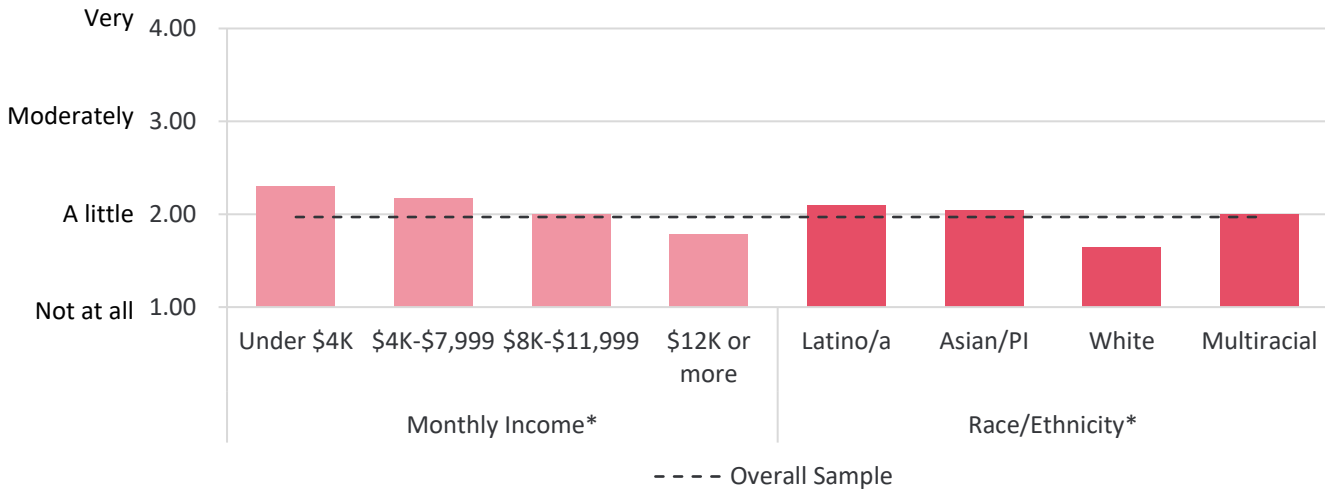
Figure 10. **Percent of Parents/Caregivers Reporting Family, Health, Employment, and Basic Needs Concerns**



Note: N=916-927 (2018); N=303-307 (2020). Reflects proportion who marked “a little,” “moderately,” or “very” concerned; proportion who marked “not at all” not shown. \*Differences statistically significant, p<.05.

Parents/caregivers rated the degree to which they were concerned about these family, health, employment, and basic needs challenges on a four-point scale from “not at all” to “very”. On average, lower-income parents/caregivers and parents/caregivers of color were more concerned about these issues than higher-income and white parents/caregivers. Similarly, other research finds that stress and challenges related to employment and meeting basic needs were higher among lower-income and Black and Latino/a adults during the pandemic.<sup>xxi</sup>

Figure 11. **Average Level of Family, Health, Employment, and Basic Needs Concern, by Monthly Income and Race/Ethnicity**

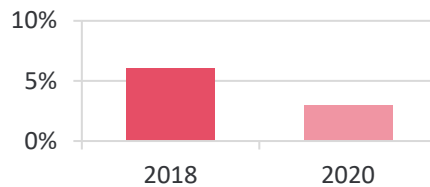


Note: N=280-291. \*Differences statistically significant, p<.05.

## Housing Insecurity

In 2018, 6% of parents/caregivers said they had been homeless at some point in their child’s life (including staying in a public place, shelter, hotel, or with friends or family due to economic hardship), but this experience was a significant predictor of kindergarten readiness. In 2020, only 3% of parents/caregivers reported experiencing homelessness. However, as mentioned above, over half of families were concerned about paying for housing and other bills. Other research has shown that during the pandemic, families increasingly moved in together to offset housing costs, amassed \$57 billion nationally in rental debt, reported increased concerns about paying for housing, and cut back on food and other essentials to pay their bills.<sup>xxii</sup>

Figure 12. **Homelessness, Including Living in a Shelter or Shared Housing Due to Economic Hardship**

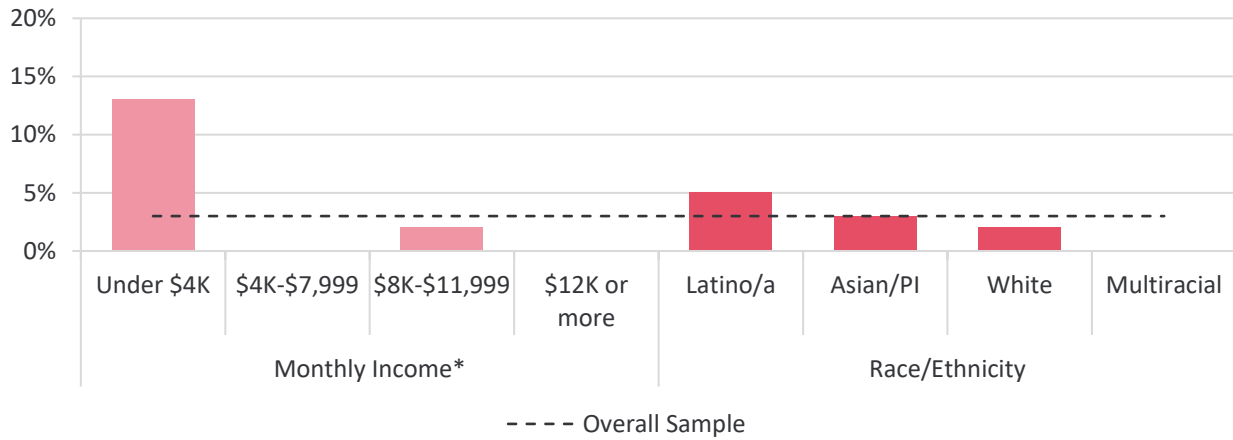


Note: N=945 (2018); N=294 (2020). \*Difference statistically significant, p<.05.

Although there were no statistically significant racial/ethnic differences in reports of homelessness, families earning less than \$4,000 per month were four times as likely as families in the overall sample to have experienced homelessness at some point during their child’s life (reported by 13% of these families). In California and nationwide, families of color and lower-income families have been most likely to experience housing insecurity, including falling behind on rent, during the pandemic.<sup>xxiii</sup>

**Families earning less than \$4,000/mo. were 4 times as likely to have experienced homelessness as families in the overall sample**

Figure 13. Homelessness, Including Living in a Shelter or Shared Housing Due to Economic Hardship, by Monthly Income and Race/Ethnicity



Note: N=278-288. \*Differences statistically significant,  $p < .05$ .



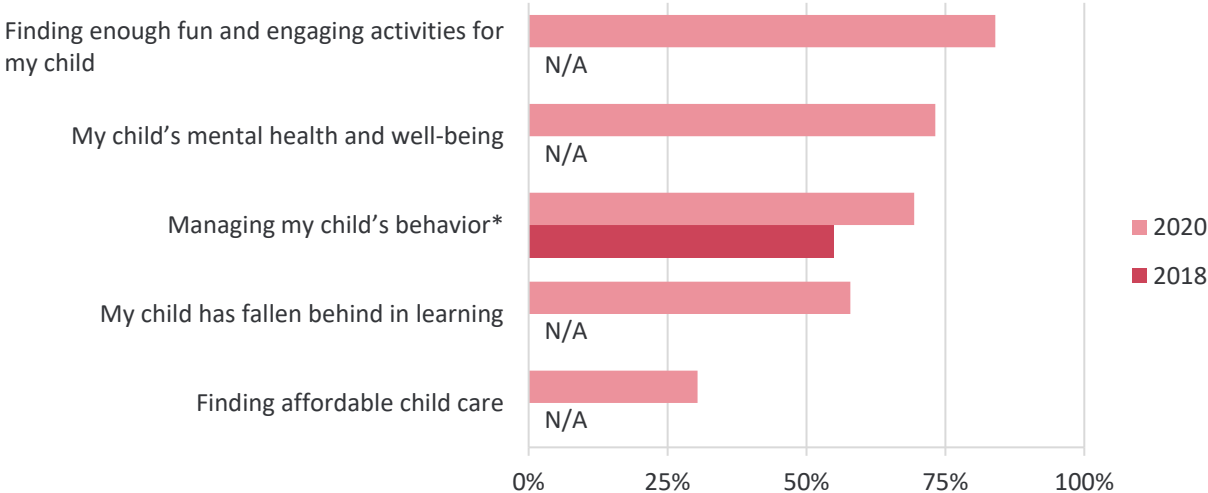


# Parenting and Child Well-Being

## Parent/Caregiver Concerns about Child

In 2020, most parents also reported concerns about finding enough fun and engaging activities for their child (84%); their child’s mental health and well-being (73%); managing their child’s behavior (69%); and their child falling behind in learning (58%). Fewer families (30%) were concerned about finding affordable child care, but 87% of parents/caregivers reported that their child’s child care site closed during the pandemic (see *Early Learning Access* section). A significantly greater proportion of parents/caregivers were concerned about managing their child’s behavior in 2020 than in 2018 (other questions were not asked in 2018). This finding aligns with early research on the pandemic’s detrimental effects on parent/caregiver mental health and children’s behavioral health.<sup>xxiv</sup>

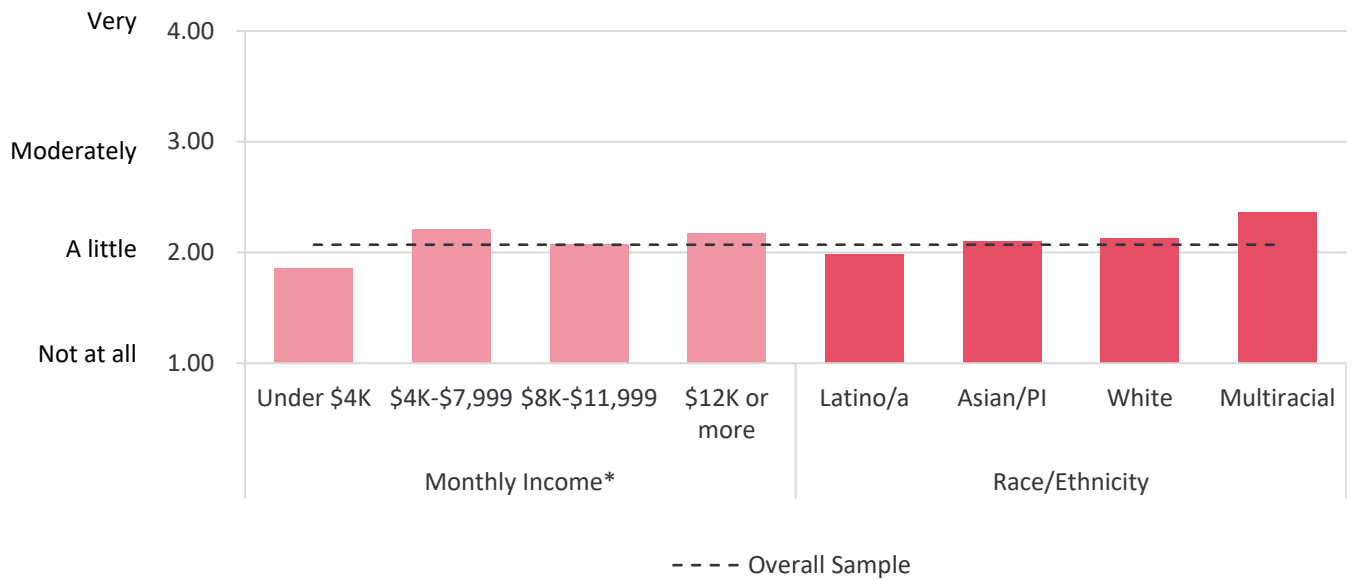
Figure 14. **Percent of Parents/Caregivers Reporting Concerns about Their Child**



Note: N=916-927 (2018); N=304-306 (2020). N/A: Question not asked in 2018. Reflects proportion who marked “a little,” “moderately,” or “very” concerned; proportion who marked “not at all” not shown. Differences statistically significant, \*p<.05.

Parents/caregivers rated the degree to which they were concerned about their child on a four-point scale from “not at all” to “very”. Higher-income parents/caregivers reported more concerns about parenting and their child’s well-being than lower-income parents/caregivers. There were no significant racial/ethnic differences in the degree to which parents/caregivers reported these concerns.

Figure 15. **Average Level of Parent/Caregiver Concerns about Child, by Monthly Income and Race/Ethnicity**



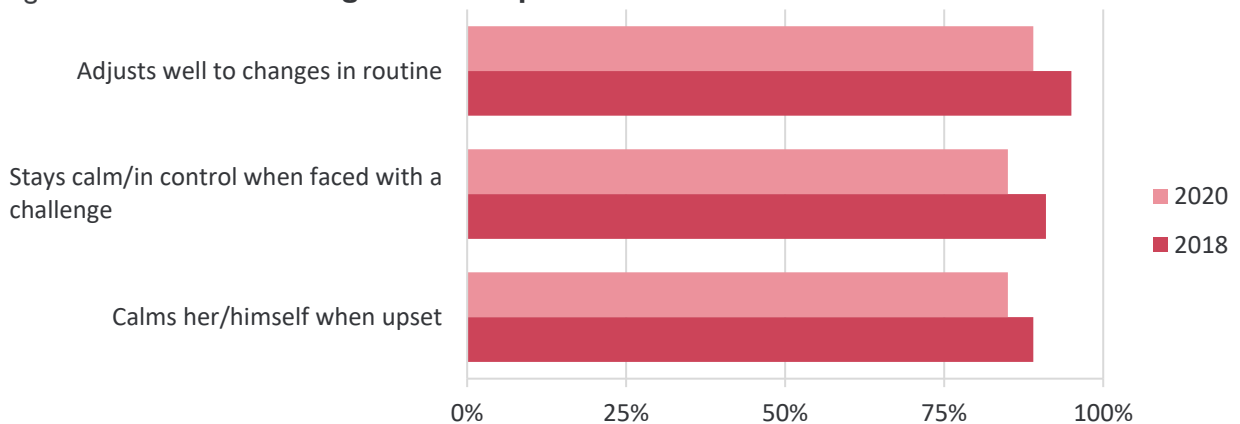
Note: N=280-291. \*Differences statistically significant,  $p < .05$ .

### Child Resilience

Resilience, which was positively associated with school readiness in 2018, was measured by three items on the parent survey: the child adjusts well to changes in routine, can calm her/himself when upset, and stays calm and in control when faced with a challenge. Although the majority of parents/caregivers reported high levels of resilience in both years, resilience levels were somewhat lower in 2020 than they were in 2018.

Parents/caregivers reported **more concerns about managing their child's behavior and lower levels of resilience** in their children in 2020 than in 2018

Figure 16. **Parents/Caregivers' Perceptions of Child Resilience**

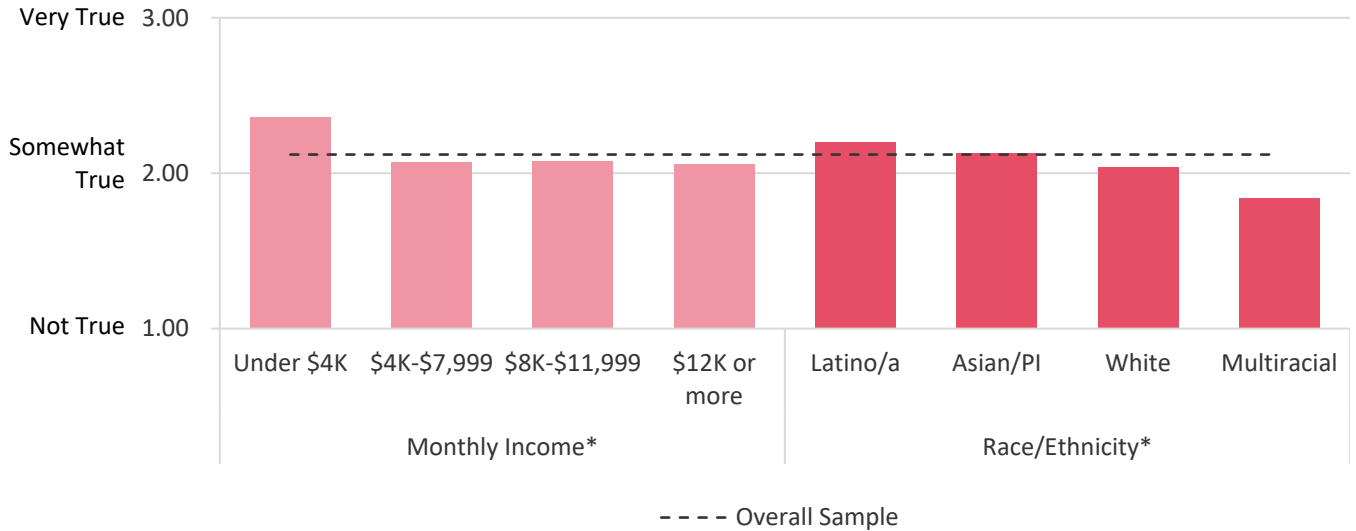


Note: N=945-947 (2018); N=302-305 (2020). Reflects proportion who marked the statement is "somewhat true" or "very true" of their child; proportion who marked "not true" not shown.

Parents/caregivers rated these three statements about their child’s resilience on a three-point scale from “not true” to “very true”. Parents/caregivers from lower-income families reported higher child resilience levels than those from higher-income families. On average, Latino/a and Asian American/Pacific Islander children had higher resilience levels, as reported their parents/caregivers, compared to white and multiracial children.

**Higher-income parents/caregivers reported higher levels of concern about parenting and their child’s well-being and lower levels of child resilience**

Figure 17. **Average Level of Child Resilience, by Monthly Income and Race/Ethnicity**

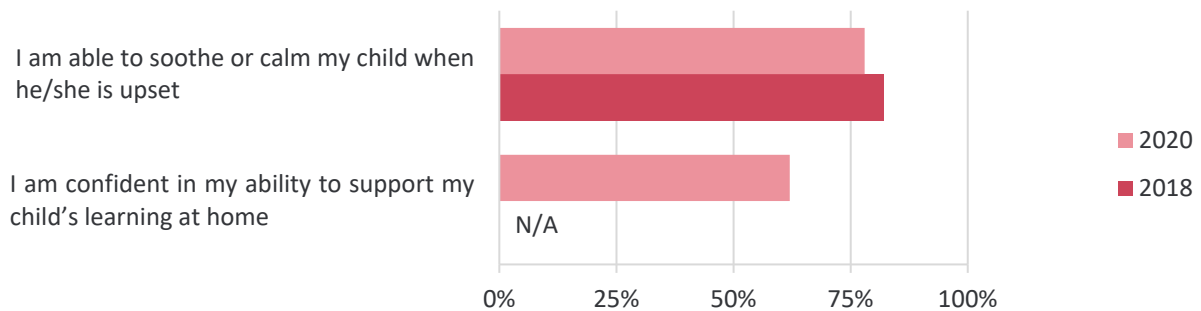


Note: N=280-291. \*Differences statistically significant, p<.05.

### Parenting Efficacy

The parent survey included a set of questions to assess parenting self-efficacy. In both 2018 and 2020, close to 8 in 10 parents reported that they are able to soothe or calm their child. Somewhat fewer parents (62%) reported confidence in their ability to support their child’s learning at home (this question was not asked in 2018).

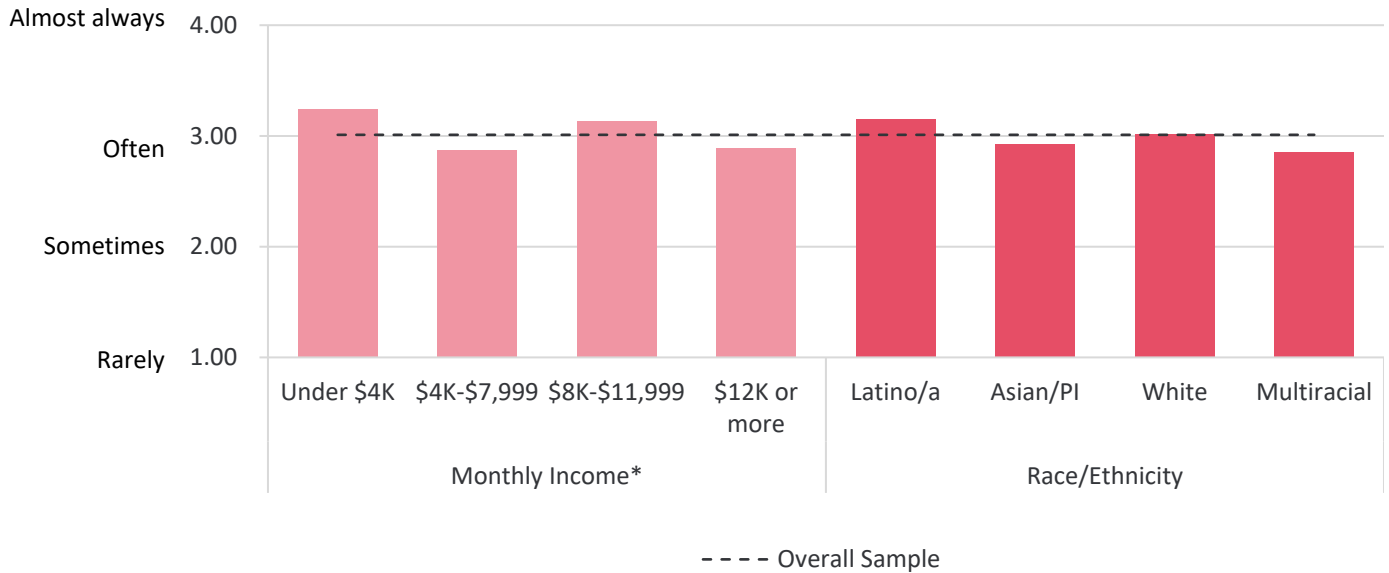
Figure 18. **Percent of Parents/Caregivers Reporting High Parenting Efficacy**



Note: N=926-945 (2018); N=303 (2020). N/A: Question not asked in 2018. Reflects proportion who marked “often” or “almost always”; proportion who marked “rarely” or “sometimes” not shown.

Parents/caregivers responded to the two statements about their parenting efficacy on a four-point scale from “rarely” to “almost always”. Lower-income parents/caregivers (those earning under \$4,000 per month) reported the highest level of parenting efficacy. Parents/caregivers of all races/ethnicities reported similar levels of parenting efficacy.

Figure 19. **Average Level of Parenting Efficacy, by Monthly Income and Race/Ethnicity**



Note: N=278-289. \*Differences statistically significant,  $p < .05$ .

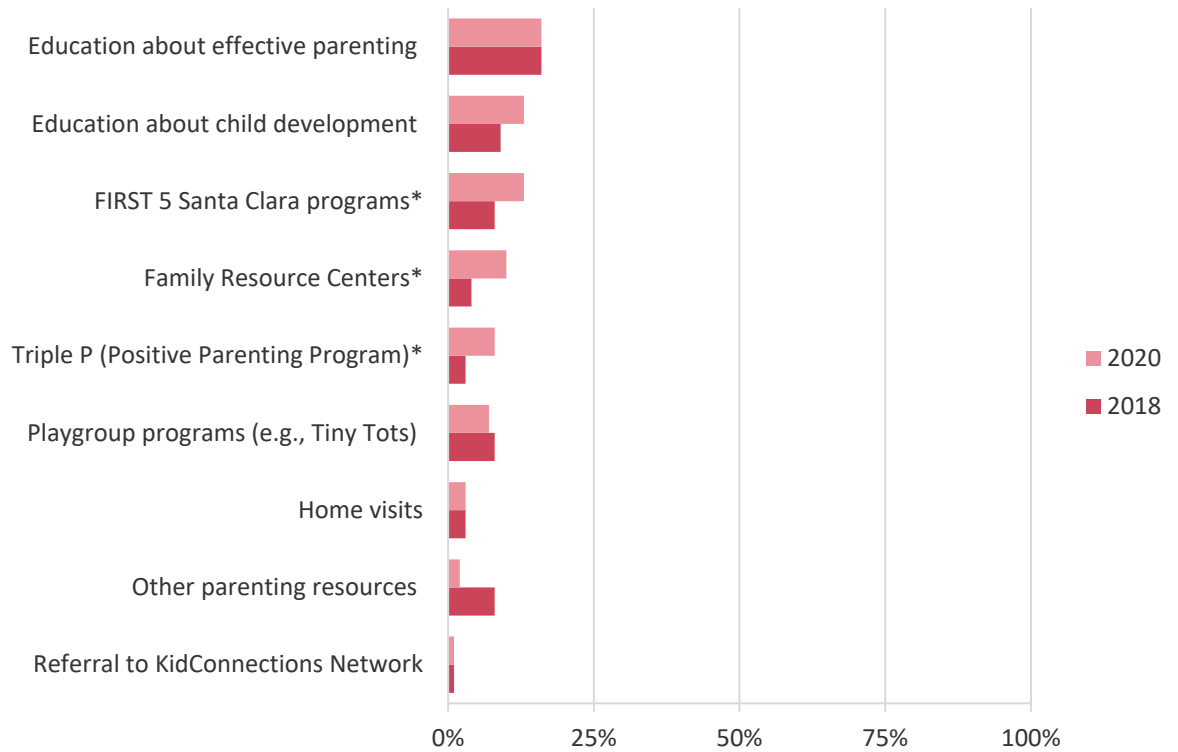
### Use of Parenting Programs, Services, and Supports

Parents/caregivers were also surveyed about their use of a variety of parent/caregiver programs and services. The most commonly used parenting resources in 2020 included education about effective parenting (16%) and child development (13%) and FIRST 5 Santa Clara County services (13%). Fewer parents/caregivers had used other parenting programs or supports, and 61% had not used any of the services listed. Parents/caregivers in 2020 were more likely to have utilized FIRST 5 Santa Clara County services, including Triple P and family resource center services.





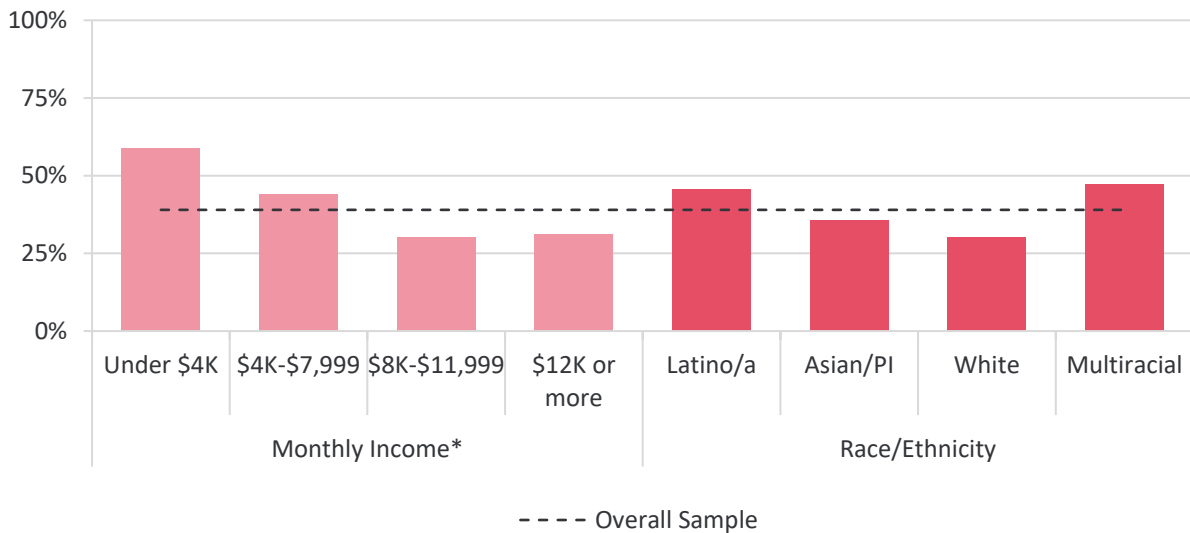
Figure 20. **Percent of Families Using Parenting Programs, Services, and Supports**



Note: N=890 (2018); N=298 (2020). \*Differences statistically significant,  $p < .05$ .

Lower-income parents/caregivers were more likely to utilize the services listed above than higher-income parents/caregivers. Although racial/ethnic differences were not statistically significant, white parents/caregivers had the lowest participation rate in parenting services.

Figure 21. **Percent of Families Using Parenting Program, Services, and Supports, by Monthly Income and Race/Ethnicity**



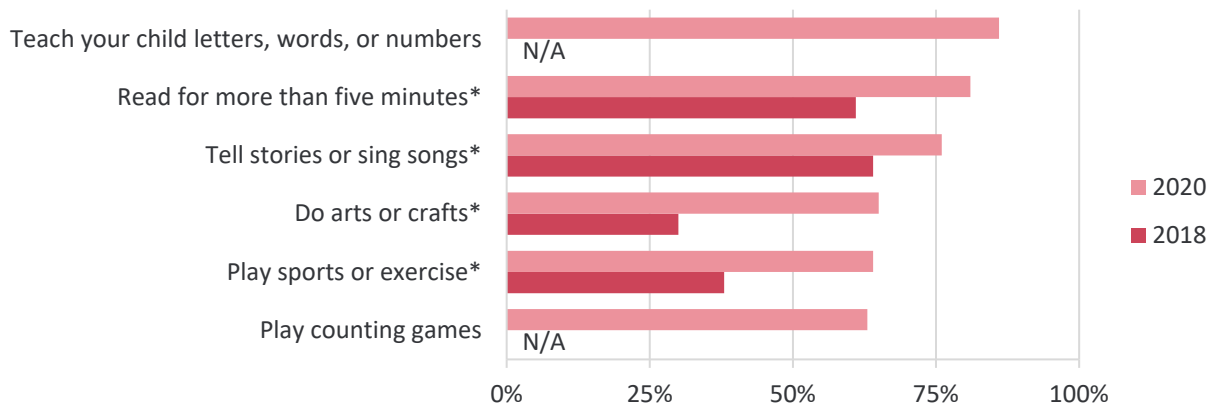
Note: N=271-281. \*Differences statistically significant,  $p < .05$ .

## Family Activity Engagement

To better understand family routines and activities, the survey asked parents/caregivers to report how often they spent time doing a variety of activities with their child during a typical week, including reading, telling stories or singing songs, and playing sports or exercising. As shown below, families were significantly more likely to report engaging in these activities at least five days per week in 2020 than they were in 2018. Families most frequently taught their child letters, words, or numbers; read together; and told stories or sing songs.

Parents/caregivers reported **significantly higher family engagement** in 2020 than in 2018

Figure 22. **Percent Engaging in Family Activities At Least 5 Days per Week**

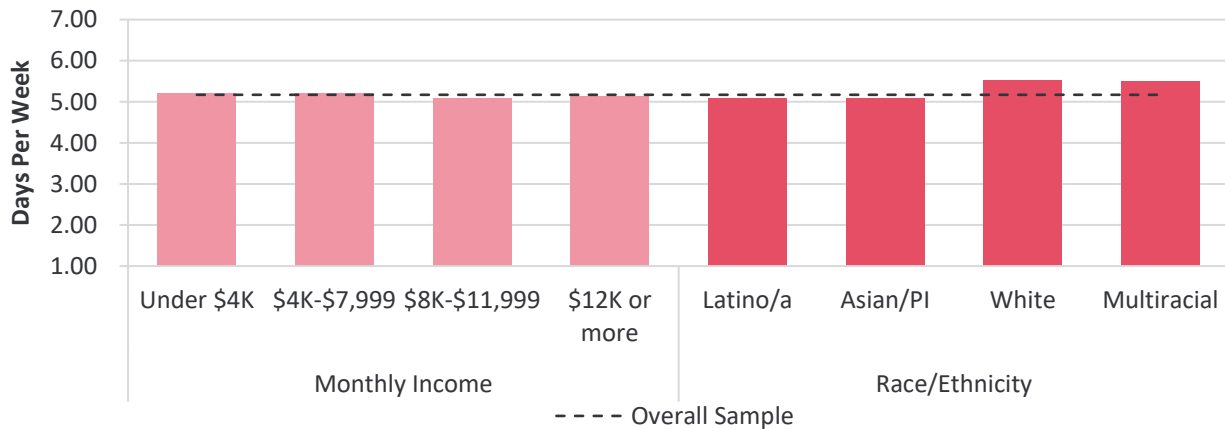


Note: N=871-915 (2018); N=303-305 (2020). N/A: Question not asked in 2018. \*Differences statistically significant, p<.05.

There were no statistically significant racial/ethnic and income differences in the average frequency with which families engaged in activities with their children. However, when each activity type was examined separately, we found that higher-income families and white and multiracial families read with their child more frequently than other families in the sample. There were no significant differences for the other types of activities.

**Higher-income and white and multiracial families read with their children more frequently** than other families

Figure 23. **Average Frequency of Family Activity Engagement, by Monthly Income and Race/Ethnicity**



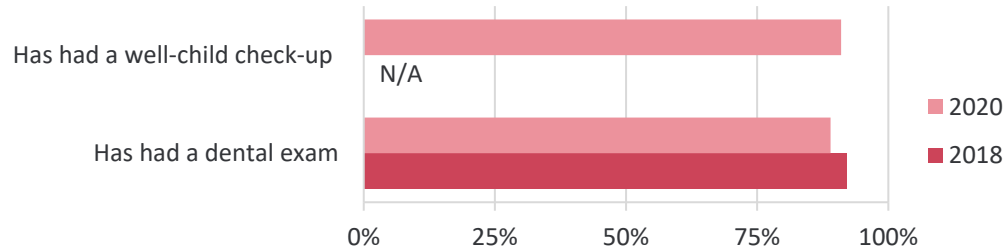
Note: N=277-288.

# Access to Health, Development, and Early Learning Supports

## Health Care Access

Parents/caregivers were asked if their child had visited the doctor and dentist in the past year. In both 2018 and 2020, approximately 90% of children had received a dental exam. Nearly the same proportion of children in 2020 had received a well-child check-up (this question was not asked in 2018, but in that year, 98% had a regular doctor or clinic). Although we did not have 2018 comparison data for well-child checkups, data from the California Department of Public Health suggest that there was a significant decline in well-child visit attendance during the pandemic throughout the state.<sup>xxv</sup>

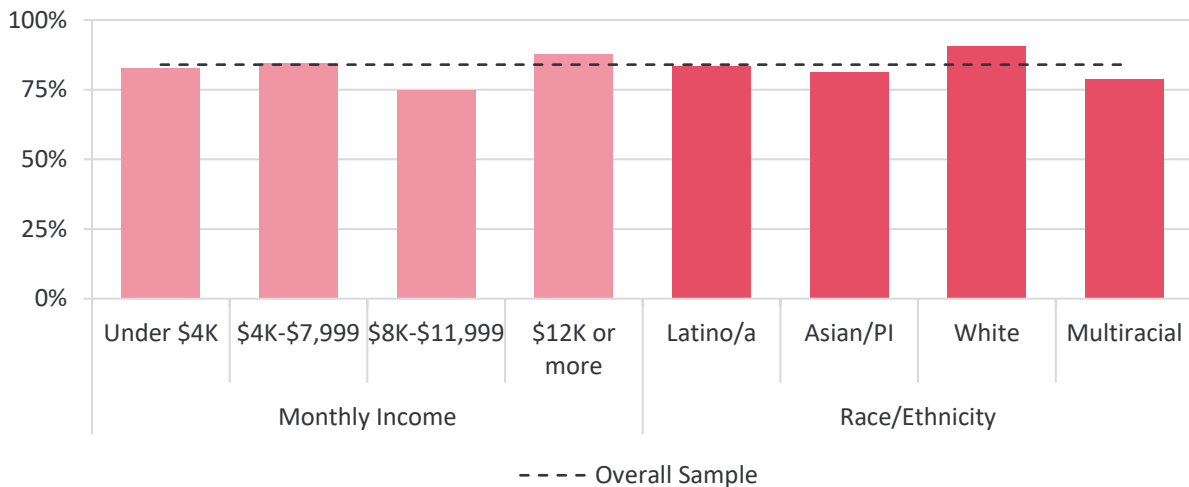
Figure 24. **Children’s Use of Health Care in the Past Year**



Note: N=945 (2018); N=296-297 (2020). N/A: Question not asked in 2018.

Fewer middle-income families reported access to both dental and medical care than lower-income and higher-income families, though the difference was not statistically significant. These families likely earn too much to qualify for free or subsidized care but not enough to afford paying out-of-pocket for care. Similarly, although differences were not statistically significant, white children were most likely to have received both dental and medical care than children of color.

Figure 25. **Children’s Use of Health Care, by Monthly Income and Race/Ethnicity**

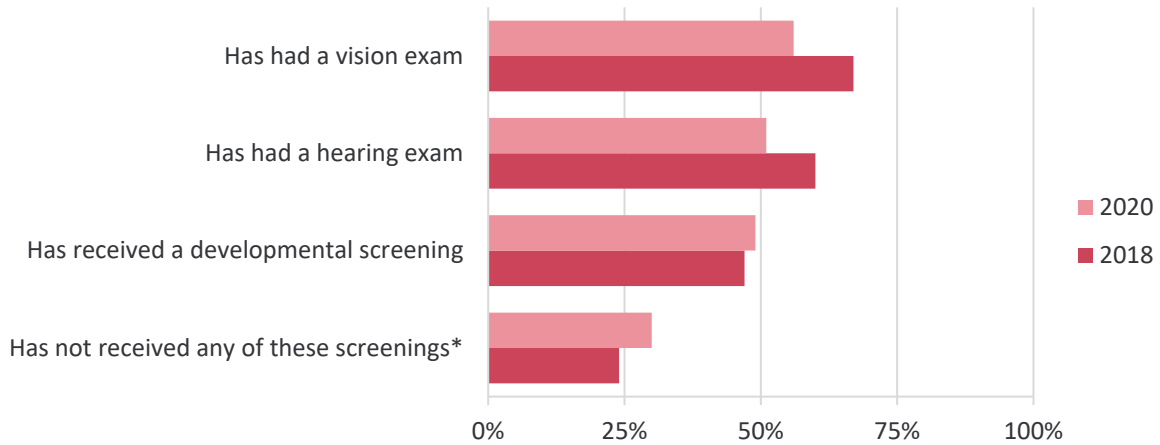


N=277-288.

Parents/caregivers also reported whether the child had received a hearing, vision, or developmental screening in the prior year. Just over half of children had received a vision screening, while approximately 50% had received a hearing or developmental screening in the past year. Children were less likely to have received a screening in 2020 than they were in 2018.

Children were **less likely to receive health screenings** in 2020 than they were in 2018

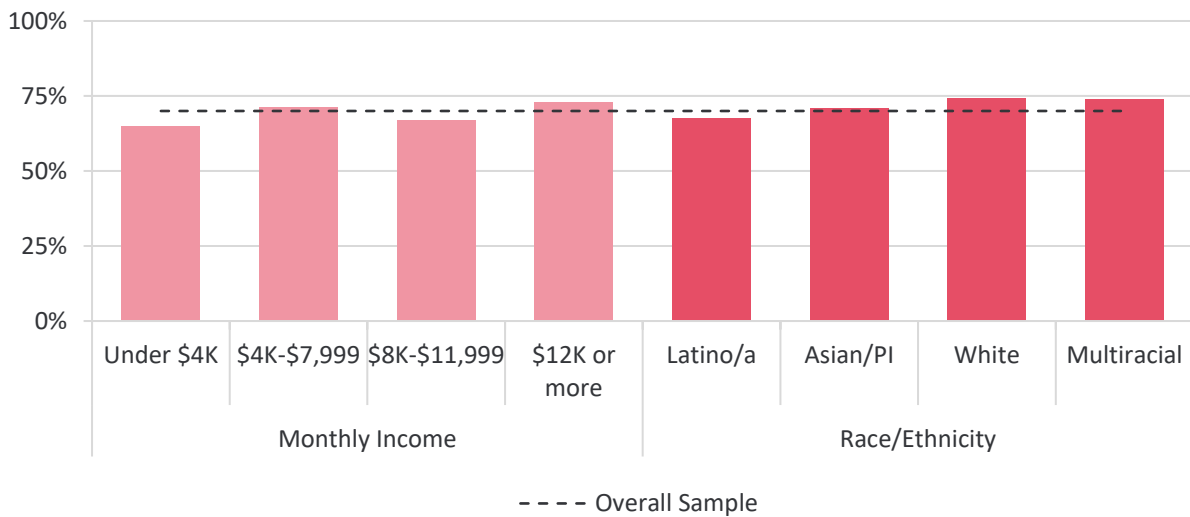
Figure 26. **Children’s Access to Screenings in the Past Year**



Note: N=894-983 (2018); N=300 (2020). \*Differences statistically significant, p<.05.

There were no statistically significant racial/ethnic and income differences in the percent of children who received at least one screening, although lower-income and Latino/a children had the lowest screening rates. Between two-thirds and three-quarters of children had received at least one screening in the prior year.

Figure 27. **Percent of Children With At Least One Screening, by Monthly Income and Race/Ethnicity**



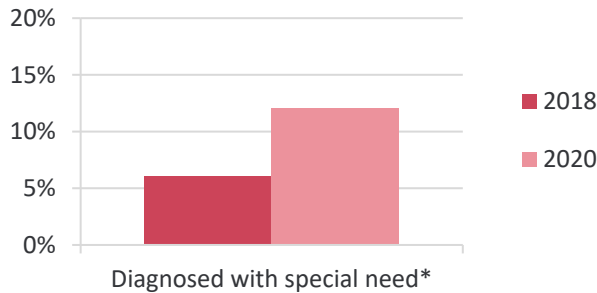
Note: N=276-287.



## Special Needs and Access to Intervention Services

According to parents/caregivers, 12% of children in the 2020 sample had a special need diagnosed by a professional, twice the proportion reported by parents/caregivers in 2018.

Figure 28. **Percent of Children with a Diagnosed Special Needs**

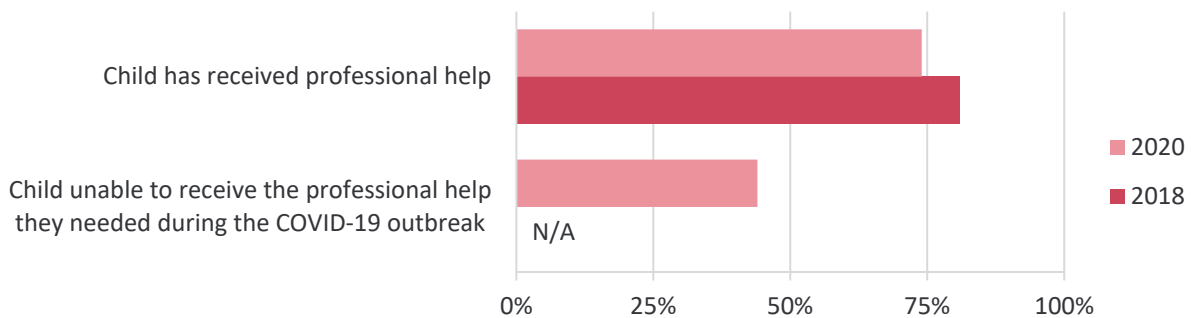


Note: N=1,247 (2018); N=305 (2020). \*Difference statistically significant,  $p < .05$

Among children with special needs, 74% had received professional help for their special need in 2020, compared to 81% in 2018. Forty-four percent of children with special needs were unable to receive the professional help they needed to do to COVID-19. Racial/ethnic and income disparities are not shown due to the small sample size.

**44%** of children with special needs were unable to receive the professional help needed during COVID-19

Figure 29. **Access to Intervention Services**

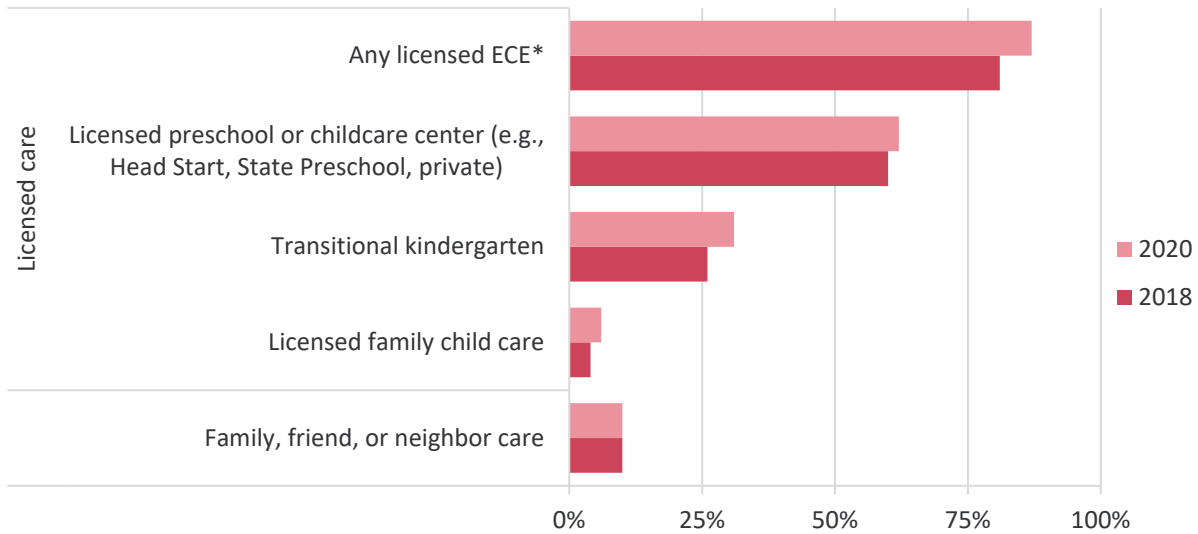


Note: N=75 (2018); N=35 (2020). N/A: Question not asked in 2018.

## Early Learning Access

Rigorous reviews of quality early childhood education programs have found that they contribute to significant gains in cognitive and social-emotional skills, particularly for children from low socioeconomic backgrounds.<sup>xxvi</sup> Likewise, children in the 2018 study demonstrated significantly higher readiness scores if they had attended preschool, Transitional Kindergarten (TK), or other licensed care. Nearly 9 in 10 children (87%) in the 2020 sample attended either licensed preschool, licensed family child care, or TK in the year prior to kindergarten, significantly more than had attended in 2018 (81%), largely due to greater participation in TK among the children in the current study.

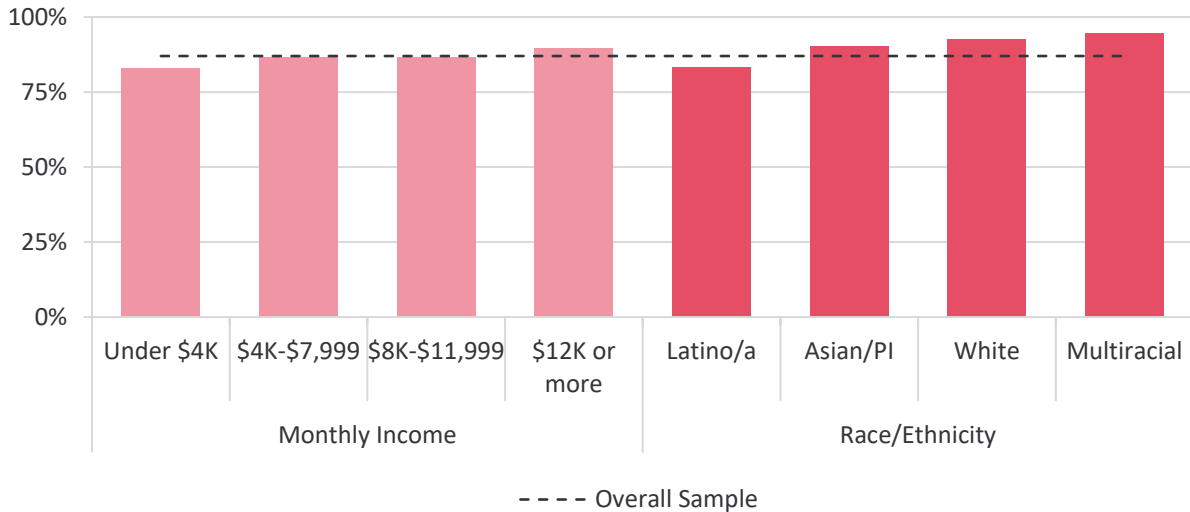
Figure 30. **Students' Early Care Experiences**



Note: N=941-1,183 (2018); N=336 (2020). Percentages sum to more than 100 because more than one source of care could be selected. \*Differences statistically significant,  $p < .05$ .

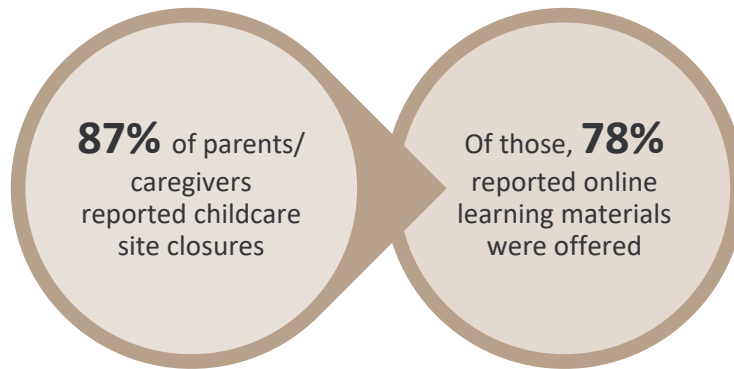
There were no statistically significant racial/ethnic and income differences in the percent of children who attended either licensed preschool, licensed family child care, or TK in the year prior to kindergarten, although lower-income and Latino/a children had the lowest early care and education (ECE) attendance rates.

Figure 31. **Percent of Children Attending Licensed Care or TK, by Monthly Income and Race/Ethnicity**



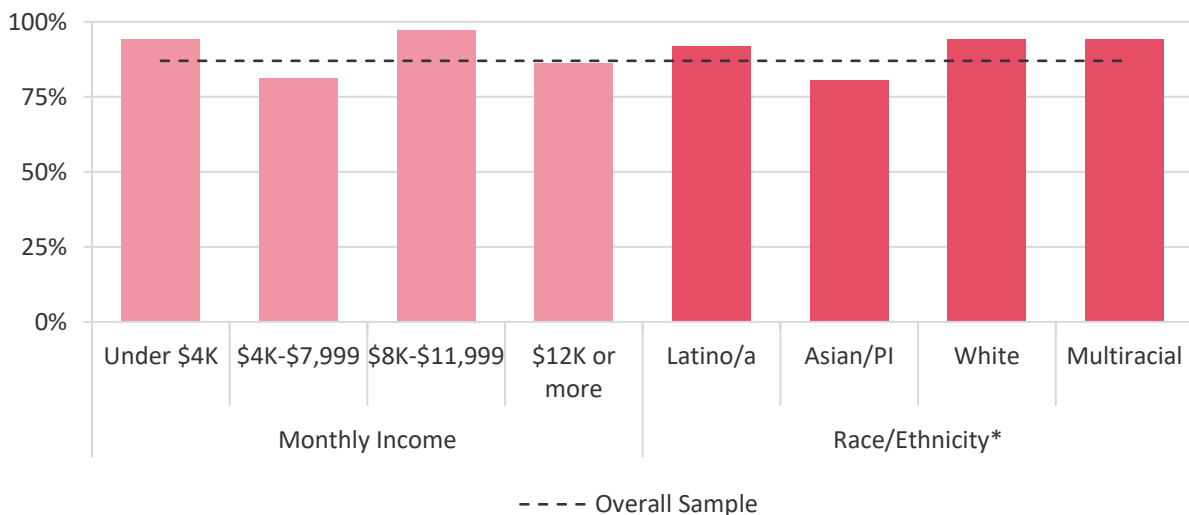
Note: N=281-290.

Although the vast majority of parents/caregivers reported that their child attended licensed ECE in 2020, nearly 90% also reported that their child’s child care site closed during COVID-19. Throughout California, over 2,000 child care sites were forced to close,<sup>xxvii</sup> and the majority of providers in the state that remained open operated with decreased capacity and reduced attendance.<sup>xxviii</sup> Of those parents/caregivers in the current study reporting a child care closure, 78% said that the site offered online learning materials. However, it should be noted that we were unable to assess how developmentally appropriate these materials were.<sup>xxix</sup>



Although there were no statistically significant income differences in reports of child care closures, fewer Asian American/Pacific Islander families reported that their child care site closed relative to Latino/a, white, and multiracial families.

Figure 32. **Percent of Families Reporting Child Care Closures, by Monthly Income and Race/Ethnicity**



Note: N=243-245. \*Differences statistically significant, p<.05.

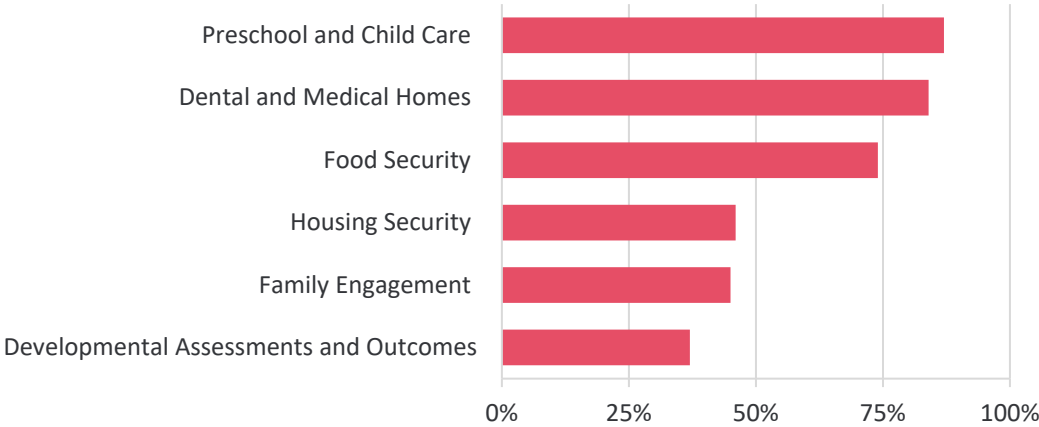
# Child and Family Assets

A child and family asset index was created in order to further explore the strengths and needs of children and families in Santa Clara County. The following six assets were included in the index:

- **Housing Security** - The family has never been homeless and is “not at all” concerned about paying for housing.
- **Food Security** - The family is “not at all” concerned about access to food.
- **Family Engagement** - On average, the family engages in activities together at least five times per week and the parent/caregiver reports high levels of efficacy.
- **Dental and Medical Homes** - The child received both a dental checkup and a well-child visit in the prior year.
- **Developmental Assessments and Outcomes** - The child received a developmental screening in the prior year, has high levels of resilience, and received professional help if diagnosed with a special need.
- **Preschool and Child Care** - The child attended TK, preschool, or licensed family child care.

The chart below illustrates the percent of families who had each asset. Preschool and Child Care and Dental and Medical Homes were the most common assets, reported by 87% and 84% of families, respectively. Just under three-quarters of families were food secure, and 46% had never been homeless and were not concerned about paying for housing. Finally, 45% of families were highly engaged with their children, and 37% had the Developmental Assessments and Outcomes asset.

Figure 33. Percent of Families with Each Asset



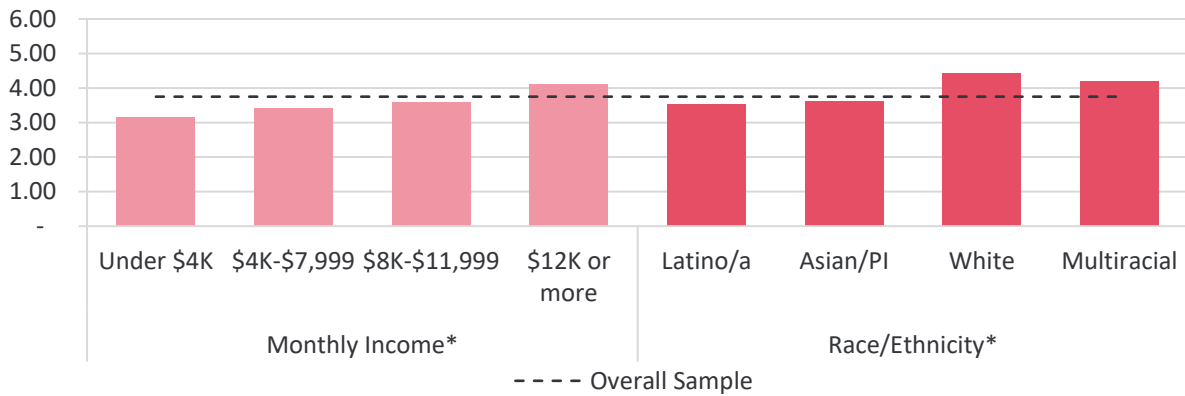
N=282.

The overall sample had an average of 3.7 out of six possible assets. On average, higher-income families had significantly more assets than lower-income families. Families earning under \$4,000 per month had three out of six possible assets, while families earning at least \$12,000 per month had four assets.

Asian American/Pacific Islander and Latino/a families had significantly fewer assets than white children (approximately 3.5 and 4.4, respectively).



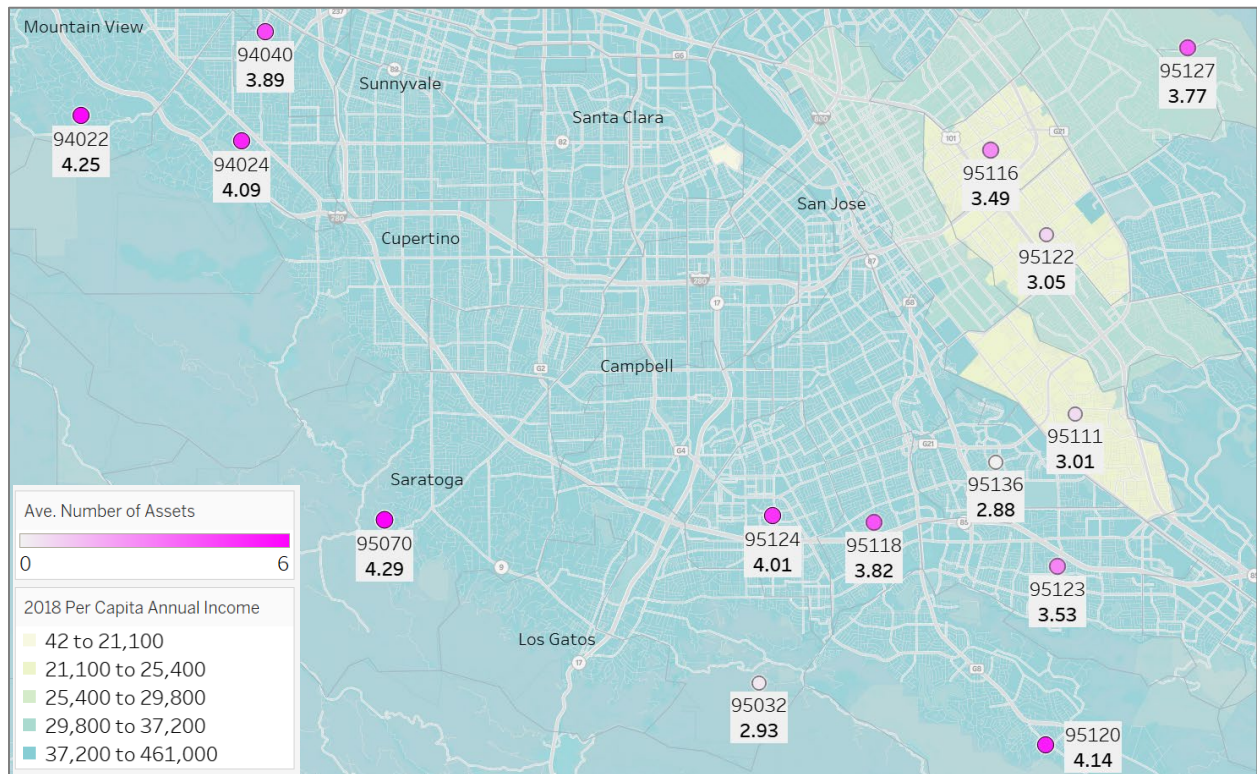
Figure 34. **Average Number of Assets, by Monthly Income and Race/Ethnicity**



Note: N=265-276. \*Differences statistically significant,  $p < .05$ .

As shown in the map below, zip codes in the county with the highest per capita income levels (e.g., in Sunnyvale, and Saratoga) also tended to have the highest number of assets. Lower-income communities (e.g., East San Jose) had the lowest asset levels. There were few participants in the current study who lived in Morgan Hill and Gilroy and therefore these zip codes not shown in the map. However, there is a relatively high level of need in this region, as measured by poverty, outcomes for young children,<sup>xxx</sup> and needs reported by FIRST 5 Santa Clara County Family Resource Center participants during the pandemic;<sup>xxxi</sup> thus it is likely that asset levels are also lower in these areas of the county.

Figure 35. **Average Number of Assets and 2018 Per Capita Annual Income, by Zip Code**



Note: Only zip codes with at least 5 participants shown. 2018 per capita income from U.S. Census, American Community Survey.

## Summary and Discussion

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The COVID-19 pandemic has stressed parents/caregivers and children in unprecedented ways. As this study showed, families in Santa Clara County have experienced increased levels of stress related to job loss, health concerns, food insecurity, and worries about their children’s behavior, development, and mental health. These findings align with research conducted nationally on the increased stress and diminished levels of well-being experienced by caregivers and children during COVID-19.<sup>xxxii</sup>

At the same time, compared to participants in the 2018 Santa Clara County School Readiness Assessment, children were less likely to have received health screenings, likely a consequence of COVID-19 stay-at-home orders and concerns about exposure to the virus. In addition, many children with special needs were unable to access early intervention services, and the majority of families reported child care site closures due to COVID-19. On the other hand, likely because they were spending more time at home, parents were significantly more likely to engage in family activities like reading on a regular basis in 2020 than they were in 2018.

The stress caused by the COVID-19 pandemic was not felt equally across communities in Santa Clara County. Similar to nationwide trends,<sup>xxxiii</sup> lower-income and racial/ethnic minority families in our study were most likely to have experienced stressors like job loss and housing and food insecurity. Similarly, our analysis of data on health, housing, food security, family engagement, and developmental assets showed that asset levels were lowest among communities of color and lower-income communities, including East San Jose. In contrast, perhaps because they were less consumed with worries about meeting their basic needs, higher-income and white parents/caregivers expressed greater concerns about their child’s behavior and well-being. Lower-income families and families of color, on the other hand, may have reported higher levels of child resilience because their children have had more experience than other children adjusting to challenges and changes in their lives, and their parent/caregivers have witnessed this adaptability.

Policies and programs to address the stressors experienced by families are needed to help the community recover from the effects of COVID-19 and ensure children enter school ready to learn. Recommended actions include, but are not limited to:



### **BASIC NEEDS SUPPORT**

Advocate for income and job loss supports and reduce barriers to families accessing basic needs supports and services, including nutritious food and stable housing, to address immediate needs of families in Santa Clara County. Partners for this work include:

- Community-based family support programs
- Santa Clara County Office of Education
- Santa Clara County Office of Supportive Housing
- Santa Clara County Social Services Agency
- FIRST 5 Santa Clara County

- Santa Clara County school districts
- Shelters and supportive housing providers



## **PARENTING SUPPORT**

Address barriers to the delivery of parent education programs and resources that help parents engage in nurturing and supportive parenting practices (e.g., limited access to technology for virtual services).

Partners for this work include:

- Community-based parent/caregiver education programs
- Santa Clara County Office of Education
- Santa Clara County Social Services Agency
- FIRST 5 Santa Clara County



## **HEALTH CARE AND EARLY INTERVENTION**

Increase access to medical care, early intervention services, and mental health treatment and trauma-informed services for children and their parents/caregivers to help them manage the stress caused by the pandemic. In addition, educate parents/caregivers about the importance of continuing to seek care for themselves and their children during COVID-19. Partners for this work include:

- Community clinics
- Community-based behavioral health programs
- Santa Clara County Behavioral Health Services
- Santa Clara County Office of Education
- Santa Clara County Public Health
- FIRST 5 Santa Clara County
- Regional Center
- Santa Clara County school districts



## **EARLY CARE AND EDUCATION**

Invest in the stabilization of child care, which allows parents/caregivers to work and develops the school readiness of their children. Additionally, promote wraparound early care and education programs that not only build children's cognitive skills, but address their social and emotional needs, and provide support to their parents/caregivers. Partners for this work include:

- Santa Clara County Office of Education



- ECE providers (center-based and family child care)
- FIRST 5 Santa Clara County
- Joint Child Care Committee
- Local Child Care Planning Council
- Santa Clara County school districts
- Strong Start Coalition

## **SUPPORT FOR PROVIDERS**

Support the needs of early childhood service providers with financial support, professional development, and technical assistance so they can manage their own stress and transition their outreach and service delivery models to more effectively reach and serve families. All partners have a role to play in these efforts.

## **TARGETED INVESTMENTS TO PROMOTE EQUITY**

Finally, partners should target these investments and supports in communities with the highest need, including lower-income communities and communities of color. Data from the current study and other research have shown particularly high levels of need in East San Jose, Morgan Hill, and Gilroy, but there are also families in need living within more affluent areas of the county.

Many of these recommended efforts have already been underway as partners in Santa Clara County quickly pivoted to address community needs. By working collectively, these partners can continue to help families recover from the effects of COVID-19 and help each child in the county enter school ready for kindergarten and beyond.





## About the Researcher

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Applied Survey Research (ASR) is a social research firm dedicated to helping people build better communities by creating meaningful evaluative and assessment data, facilitating information-based planning, and developing custom strategies. The firm has more than 30 years of experience working with public and private agencies, health and human service organizations, city and county offices, school districts, institutions of higher learning, and charitable foundations. Through community assessments, program evaluations, and related studies, ASR provides the information that communities need for effective strategic planning and community interventions.

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<sup>i</sup> Applied Survey Research. (2019). *School Readiness: Findings from the fall 2018 assessment in Santa Clara County*. San Jose, CA: Author. Retrieved from <https://tinyurl.com/StaClaraSRA2018>

<sup>ii</sup> FIRST 5 Santa Clara County. (n.d.). High risk maps. Retrieved from <https://first5kids.org/our-impacts/agencywide-dashboards/high-risk-maps/>

<sup>iii</sup> Applied Survey Research conducted an analysis of financial, employment, health, child care, and parenting needs reported by families receiving services during the pandemic at family resource centers in Santa Clara County, finding the highest reported needs in San Jose, Morgan Hill, and Gilroy.

<sup>iv</sup> Applied Survey Research. (2019). *School Readiness: Findings from the fall 2018 assessment in Santa Clara County*. San Jose, CA: Author. Retrieved from <https://tinyurl.com/StaClaraSRA2018>

<sup>v</sup> Yoshikawa, H., Wuermli, A. J., Britto, P. R., Dreyer, B., Leckman, J. F., Lye, S. J., Ponguta, L. A., Richter, L. M., & Stein, A. (2020). Effects of the Global Coronavirus Disease-2019 pandemic on early childhood development: Short- and long-term risks and mitigating program and policy actions. *The Journal of Pediatrics*, 223, 188–193. <https://doi.org/10.1016/j.jpeds.2020.05.020>

<sup>vi</sup> Acs, G., & Karpman, M. (2020). *Employment, income, and unemployment insurance during the COVID-19 Pandemic*. Washington DC: Urban Institute. Retrieved from [https://www.urban.org/sites/default/files/publication/102485/employment-income-and-unemployment-insurance-during-the-covid-19-pandemic\\_1.pdf](https://www.urban.org/sites/default/files/publication/102485/employment-income-and-unemployment-insurance-during-the-covid-19-pandemic_1.pdf)

CDC. (2020). *Health equity considerations and racial and ethnic minority groups*. Atlanta, GA: US Department of Health and Human Services, CDC. Retrieved from <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>

<sup>vii</sup> California Department of Education. (2020). DataQuest Retrieved from. <https://data1.cde.ca.gov/dataquest/>

<sup>viii</sup> Santa Clara County Office of Education. Digital equity resources for researchers. Retrieved from <https://www.sccoe.org/covid-19/digital-divide/Pages/for-researchers.aspx>

<sup>ix</sup> In the Santa Clara County 2019-20 kindergarten population overall, 38% of students were Hispanic/Latino, 35% were Asian American/Pacific Islander, 18% were White, 7% were multiracial, and 2% were Black. Source: California Department of Education. (2020). DataQuest. Retrieved from <https://data1.cde.ca.gov/dataquest/>

<sup>x</sup> Crosnoe, R., & Cooper, C. E. (2010). Economically disadvantaged children's transitions into elementary school: Linking family processes, school contexts, and educational policy. *American Educational Research Journal*, 47(2), 258-291. doi:10.3102/0002831209351564

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<sup>xi</sup> U.S. Census. (2020). American Community Survey, 2019 1-year Estimates: Income in the past 12 months. Retrieved from <https://data.census.gov/cedsci/table?q=Median%20income&g=0500000US06085&tid=ACST1Y2019.S1901&hidePreview=true>

<sup>xii</sup> The unemployment rate in Santa Clara County jumped from 3% in February 2020 to a peak of 12% in April 2020 before declining to 6% as of October 2020. Between February and April 2020, approximately 93,000 jobs (9%) were lost. Source: California Employment Development Department. (2020). Santa Clara County profile. Retrieved from <https://www.labormarketinfo.edd.ca.gov/cgi/databrowsing/localAreaProfileQSResults.asp?selectedarea=Santa+Clara+County&selectedindex=43&menuChoice=localAreaPro&state=true&geogArea=0604000085&countyName=>

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