Pandemic Experiences, Persistent Challenges, and Workforce Needs of Los Angeles County Early Care and Education Professionals

Introduction

For over two years, early care and education (ECE) professionals have put their own health at risk to provide care for thousands of California’s children, enabling parents to go to work with the assurance that their children are in safe and nurturing environments and developing foundational skills. As the COVID-19 pandemic has continued and new variants of the virus have emerged, ECE professionals have met increasingly rigorous health and safety standards and bravely navigated the challenges of COVID-19 outbreaks, which have shuttered their classrooms or programs for days or weeks at a time.

California’s ECE workforce – comprised mostly of women of color – has provided an essential service and a critical measure of constancy for families during an unusually difficult time.

California’s 2021-2022 State Budget Act included over $3.0 billion in new funding for ECE, an investment made possible in part through funding California received from the federal American Rescue Plan Act. These new ECE dollars are being used in multiple ways, including to provide flexible stipends to ECE programs; to waive fees for families in state-subsidized ECE programs through June 2022; to raise provider reimbursement rates; to build and renovate ECE facilities; to establish a training fund for family child care providers; to fund thousands of new child care spaces; and to begin phasing in universal transitional kindergarten. However, the pandemic exacerbated decades-old challenges for the ECE field and created new ones, and the most recent budget investments – though robust – are not sufficient to adequately address these challenges. For example, low wages, staffing shortages, teacher recruitment and retention issues, higher cleaning and sanitation costs, and the persistent stress and trauma created by the pandemic are struggles that continue to confront ECE professionals and families across the state.

This report highlights the recent COVID-19 pandemic experiences of over 600 Los Angeles County ECE professionals who responded to an online survey and/or participated in focus groups in November and December, 2021. It provides critical data and recommendations that can help inform policymakers and ECE community members as they consider what investments are needed to stabilize ECE programs through the current pandemic crisis, to provide a critical foundation for the ECE system moving forward, and to better support a field that has been undercompensated and under-resourced for far too long. This report also shines a light on the need to ensure that programs have necessary information and resources to take advantage of new dollars.

Key recommendations are highlighted below, and are addressed in more detail throughout the report and on page 24.

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**Recommendations**

- Increase provider reimbursement rates to a level that enables providers to pay themselves and their staff a fair wage.
- Fund more stipends for higher education coursework and paid professional development for early educators in all ECE settings.
- Fund more professional development training on working with Dual Language Learners (DLLs) and children with special needs, as well as specialists who can work with ECE professionals to provide critical early intervention services.
- Fund outreach strategies to recruit more current and aspiring bilingual ECE professionals to work with DLLs.
- Expand outreach efforts to ECE professionals regarding new grant programs and other funding opportunities.

**OVERVIEW OF ECE SURVEY DESIGN, RESPONDENTS, AND FOCUS GROUPS**

In fall 2021, Child360 and Early Edge California created an online survey designed to elicit feedback about the challenges ECE professionals were facing as the pandemic continued, and about the workforce-related and financial support they needed. During the first several weeks of November, the survey was administered to individuals working in ECE programs throughout Los Angeles County for whom Child360 and the Child Care Alliance of Los Angeles (CCALA) were providing quality improvement services. It was also administered to a group of ECE professionals working in the Pomona Unified School District who were not receiving these services.

In total, **618 early learning professionals completed the survey**, including **499 providers and 119 teachers**. Providers included executive directors; assistant directors; directors; principals; administrators; family child care owners; and site supervisors. Teachers included both assistant and lead teachers. **Over 82 percent of survey respondents were people of color**, with 52 percent identifying as Latinx/Hispanic, and 17 percent identifying as Black/African.

**Fifty-eight percent of survey respondents worked at a center, and 42 percent worked at a family child care home.** Of the respondents who worked at centers, over 40 percent worked at an ECE program at a school district, and smaller percentages worked at nonprofit or community-based organizations, independent/private programs, or ECE programs at a community college or four-year university.

Please indicate the type of program for which you work.

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family child care home</td>
<td>42%</td>
</tr>
<tr>
<td>ECE program at a school district</td>
<td>25%</td>
</tr>
<tr>
<td>ECE program at a community-based organization or nonprofit</td>
<td>16%</td>
</tr>
<tr>
<td>Independent/private center-based program</td>
<td>13%</td>
</tr>
<tr>
<td>ECE program at a community college or 4-year university</td>
<td>4%</td>
</tr>
</tbody>
</table>

Number of respondents: **618**

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6 47 of the 618 survey respondents self-identified with multiple races/ethnicities.

7 Survey respondents included 244 providers and 112 teachers who worked at a center, and 255 providers and 7 teachers who worked at a family child care home.
Approximately half of providers funded their programs through multiple sources. **Thirty-nine percent received California State Preschool Program (CSPP) funding, and 45 percent received parent fees.** Other sources of funding included General Child Care funding (28%), Alternative Payment Program funding (23%), Early Head Start funding (11%), Head Start funding (8%), and funding to run transitional kindergarten (1%).

Seventy-one percent of respondents worked at sites serving multiple age groups, with 93 percent serving preschoolers, 69 percent serving toddlers, 53 percent serving infants, and 42 percent serving school age children. Furthermore, 195 respondents worked at sites serving all four of the aforementioned age groups, and over 84 percent of these respondents worked at family child care homes.

**Over 91 percent of respondents provided in-person care,** while 7.5 percent provided both in-person care and distance learning, 0.7 percent provided distance learning only, and 0.7 percent worked at programs that were currently closed.

Over 60 percent of respondents reported that their programs were open and had never previously closed. This was especially true of respondents who worked at family child care homes, 83 percent of whom reported that their programs had remained open throughout the pandemic. In addition, nearly 38 percent of respondents worked at programs that were previously closed, but were now open; 1.5 percent worked at programs that were temporarily closed with an unknown reopening date; 0.3 percent worked at programs that were temporarily closed, but planning to reopen before the end of the year; and 0.2 percent were at programs that were permanently closed. Across all programs, respondents were most likely to report having been closed for between 13 and 18 months (29%), between one and three months (26%), and between 10 and 12 months (20%). ECE programs at school districts were more likely to report having been closed for between 10 and 18 months (likely due to local school district mandates), while family child care homes and independent/private center-based programs reported shorter closures of one to three months.

In the survey, provider respondents were asked about financial and workforce challenges facing their programs, and about how and whether they planned to utilize ECE relief and expansion funding included in the 2021-22 California State Budget. Both provider and teacher respondents were also asked about the needs and challenges of families in their programs, about the types of workforce support and professional development training they would like to receive, and about how they believed quality should be defined in preschool and infant-toddler settings. Further, teacher respondents were asked what specific challenges they were facing as educators and what would make their jobs more manageable.

In order to further explore key issues addressed in our online survey, we held **two small focus groups: one with eight providers and another with seven lead teachers.** Providers were from nonprofit and community-based programs, family child care homes, and programs affiliated with school districts. Teachers were from nonprofit programs and programs that were affiliated with a school district or community college. All of the participants worked in Los Angeles County, and all worked at sites that received some form of state funding. Focus group participants were asked to share their thoughts on the main issues that were addressed in survey responses. Findings from our online survey and focus groups are discussed in the sections below.

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8 617 respondents answered this question.  
9 604 respondents answered this question.  
10 604 respondents answered this question.  
11 604 respondents answered this question.  
12 229 respondents answered this question.
The COVID-19 pandemic has had a devastating financial impact on the ECE sector. Many ECE providers have experienced significant drops in enrollment and incurred increased costs related to cleaning and sanitation, personnel, distance learning, and facilities modifications needed to meet health and safety guidelines. These financial pressures have been particularly damaging, given that many ECE programs already operate on razor-thin margins, and many ECE professionals make near poverty wages. The survey data below illuminates some of the key financial challenges that providers are currently facing.

In fall 2021, when provider respondents answered a question about their program’s revenue, **51 percent reported that there was a gap between the total monthly cost of running their programs and the amount of reimbursement/revenue they received**. ECE programs at community colleges or four-year universities most frequently reported a funding gap, followed by independent/private center-based programs and family child care homes.

### Is there a gap between the total (current) monthly cost to run your program and the reimbursement/revenue you receive?

<table>
<thead>
<tr>
<th></th>
<th>Gap</th>
<th>No Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>College</td>
<td>80%</td>
<td>20%</td>
</tr>
<tr>
<td>Independent</td>
<td>64%</td>
<td>36%</td>
</tr>
<tr>
<td>FCC</td>
<td>61%</td>
<td>39%</td>
</tr>
<tr>
<td>District</td>
<td>29%</td>
<td>71%</td>
</tr>
<tr>
<td>Nonprofit</td>
<td>25%</td>
<td>75%</td>
</tr>
</tbody>
</table>

**Number of respondents: 410**

Of the 210 providers reporting a gap between the total monthly cost of running their programs and the amount of reimbursement/revenue they received, **nearly half (46 percent) reported a gap of between $3,001 and $10,000**, and just over a quarter (26 percent) reported a gap of under $3,000. In addition, of the 412 providers who responded to a question about their financial situation, only 42 percent indicated that they could cover their costs through June 2022, and over 29 percent of this subset reported that they may need to implement layoffs.

**Some ECE programs experienced reduced enrollment.** Of the 489 providers who answered a question about whether they were operating at or below capacity, 72 percent reported that they were operating below capacity.

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16. 410 providers answered this question.
17. Providers who worked at ECE programs at a community college or four-year university reported the largest gaps, with half of these providers who responded to the question reporting gaps of between $15,001 and over $20,000.
When respondents were asked why they were not operating at maximum capacity, they most frequently reported that they did not have enough families enrolling in their programs to reach full capacity. In addition, 30 percent of survey respondents who were not operating at full capacity indicated that they were choosing not to reach maximum enrollment because they were concerned about health risks associated with COVID-19.\(^\text{18}\) Further, 28 percent of respondents who were not operating at full capacity indicated that they did not have sufficient staff to operate their programs at full enrollment, and 20 percent reported that they had insufficient space to operate at maximum capacity and still keep children socially distanced. Information gathered from providers in our focus groups could help explain why some providers are seeing fewer families enrolling their children in their programs. Providers shared that some parents are not sending their children to in-person ECE settings because they fear COVID-19, or because they previously looked for child care but were unable to find it, and have simply stopped looking. They also noted that some parents who are now working from home prefer to keep their children at home.

**If you are not operating at maximum capacity, please indicate why (select all that apply).**

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not enough children enrolling in my program to reach full capacity</td>
<td>58%</td>
</tr>
<tr>
<td>Choosing not to reach maximum enrollment due to COVID-19 health risks</td>
<td>30%</td>
</tr>
<tr>
<td>Not enough space for maximum capacity with social distancing</td>
<td>20%</td>
</tr>
<tr>
<td>Not enough staff to operate the program at full enrollment</td>
<td>28%</td>
</tr>
<tr>
<td>Other</td>
<td>9%</td>
</tr>
</tbody>
</table>

Number of respondents: 353

Ultimately, decreased enrollment has made it challenging for some ECE programs to cover their expenses. While the state has implemented a hold harmless provision intended to bolster providers’ financial stability, it has not closed all financial gaps. The hold harmless provision enables providers who contract directly with the state to be reimbursed at 100 percent of their contract maximum reimbursable amount or net reimbursable costs, whichever is less.\(^\text{19}\) The provision also enables voucher-based providers to be reimbursed based on the maximum authorized hours of care, regardless of any gaps in attendance of children in their programs.\(^\text{20}\) However, the hold harmless provision only applies to costs associated with serving children who receive state-subsidized care. Consequently, when a provider experiences a drop in enrollment of children who are not receiving

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18. 353 providers answered this question.


20. Ibid.
state-subsidized care, the hold harmless provision does not provide financial relief for this revenue loss. Some providers rely exclusively, or partially, on fees from families not receiving subsidized care to cover the cost of running their programs, and reduced enrollment of these families has had a negative financial impact.

In addition to experiencing drops in enrollment, some providers have seen their expenses increase due to costs associated with frequent and extensive cleaning and sanitizing, facilities modifications to accommodate social distancing, hiring additional staff to help with cleaning and/or to ensure that low adult-child ratios and small, stable groups of adults and children are maintained, and other factors. Ultimately, while there is variability in providers’ financial circumstances, for some providers, reduced enrollment and/or additional costs have made it more challenging to cover necessary expenses.

When asked about the costs they were worried about being able to cover during the school year, providers most frequently cited personnel costs (for current staff), toys and outdoor equipment, and hiring additional staff. Further, hiring additional staff was the cost most frequently cited as a challenge by center providers, while toys and outdoor equipment was the challenging cost most frequently cited by family child care providers.

### Which, if any, of the following costs are you worried about being able to cover during this school year? Please check all that apply.

<table>
<thead>
<tr>
<th>Cost</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toys and outdoor equipment</td>
<td>48%</td>
</tr>
<tr>
<td>Personnel costs (for current staff)</td>
<td>48%</td>
</tr>
<tr>
<td>Cleaning supplies and PPE</td>
<td>43%</td>
</tr>
<tr>
<td>Classroom materials (paper, books, crayons, etc.)</td>
<td>41%</td>
</tr>
<tr>
<td>Facilities costs (renovation/ expansion)</td>
<td>34%</td>
</tr>
<tr>
<td>Internet charges</td>
<td>21%</td>
</tr>
<tr>
<td>Formula, milk, and/or food</td>
<td>15%</td>
</tr>
<tr>
<td>None of the above</td>
<td>14%</td>
</tr>
<tr>
<td>Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

Number of respondents: 412

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21 Additional staff have been hired during the pandemic for a variety of reasons. For example, they have been hired to ensure that low adult-child ratios and small, stable groups of adults and children are maintained; to help school-age children with homework or with distance learning classes when schools have closed for COVID-related reasons; and to assist with the constant cleaning and sanitizing that has been required during the pandemic.
NEW FUNDING FOR THE ECE FIELD

California’s 2021-2022 State Budget Act provided financial relief to ECE programs and families struggling with the financial impacts of COVID-19, as well as funding to increase access to ECE programs and to renovate and construct ECE facilities. Our data demonstrates that while these investments will provide critical assistance to these programs and the families they serve, the ECE field remains underfunded and under-resourced, and increased efforts are needed to ensure that ECE professionals are apprised of and equipped to take advantage of relief or expansion funds available to them.

Reimbursement rate increases

It is well recognized that the early childhood workforce is chronically underpaid. A Learning Policy Institute (LPI) brief reported that “child care and preschool educators, who are disproportionately women of color, earn one third to one half of the wages of K–12 educators, and over half rely on public assistance to make ends meet.”22 The California Legislature recently made strides in addressing this problem by including reimbursement rate increases in the 2021-22 State Budget for providers who operate state-subsidized ECE programs. The Regional Market Rate (RMR) has historically been applied to voucher-based providers, and the Budget raised the RMR ceiling from the 75th percentile of the 2016 RMR survey to the 75th percentile of the 2018 RMR survey, effective January 1, 2022. In addition, providers with direct contracts with the state are now reimbursed at the greater of the 75th percentile of the 2018 RMR survey, or the contract per-child reimbursement amount as of December 31, 2021, the Standard Reimbursement Rate. In addition, the Budget brought all license-exempt providers to 70 percent of the licensed family child care home rate ceiling, effective January 1, 2022 through June 30, 2023.23 It is of note that while voucher-based providers in Los Angeles County saw their rates increase, many voucher-based providers (particularly centers) in rural counties did not.24

When provider respondents were asked how they planned to use additional funding they would receive from increased reimbursement rates, they most frequently indicated that they would use the funding to increase staff wages and to purchase classroom materials (books, whiteboards, crayons, toys, etc.). In addition, one provider in our focus group stated that she would use additional funding to take care of building maintenance (e.g., flooring) at her site, while another provider indicated that she would hire mental health professionals and clinical psychologists to address the mental health needs of children and families in her programs.

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Beginning in January 2022, many California ECE providers who operate early learning programs with state subsidies will see an increase in their reimbursement rates. How would you use this increased funding at your site? Please check all that apply.

- To increase staff wages: 53%
- To purchase classroom materials: 49%
- To purchase PPE and/or cleaning supplies: 36%
- To pay my rent/mortgage: 35%
- To purchase technological devices for the children (tablets, etc.): 35%
- For infrastructure needs (facilities renovation, etc.): 35%
- To purchase food: 25%
- To hire additional staff (and increase wages): 24%
- To build up financial reserves for my program: 21%
- To hire additional staff (but maintain current wages): 19%
- To provide benefits (e.g. health and dental care) for my staff: 16%
- Other: 9%
- My program does not receive state subsidies: 9%

Number of respondents: 353

While these recent reimbursement rate increases will assist providers in covering the costs of running their programs, the rates themselves are based on an outdated market rate survey from 2018, are not keeping pace with inflation, and do not reflect the true cost of providing ECE services. Ultimately, until providers are paid at a rate that reflects the true cost of care, it will be extremely difficult for them to provide themselves and their staff with the equitable wages, health benefits, and retirement security that they deserve.

Provider stipends

California’s 2021-22 Budget included funding for provider stipends to assist programs in meeting challenges caused by the pandemic, such as increased cleaning and sanitation costs and lower enrollment, and to help them remain open or to reopen. Specifically, the state legislature

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25 Child Care Resource Center. (2022). Child care providers’ rates are still not keeping pace with inflation. Fact sheet available upon request at dsavage@ccrcca.org.

appropriated federal ARPA funding to provide one-time stipends to providers in the amount of $600 per subsidized child enrolled in preschool and child care programs. These stipends were distributed by the California Department of Social Services (CDSS) and the California Department of Education (CDE) in fall 2021. When survey respondents were asked if they were aware of these stipends, 71 percent responded affirmatively, 18 percent responded that they were unaware of the stipends, and 11 percent indicated that they did not operate a state-subsidized program. Providers who worked at programs at school districts were least likely to be aware of the stipends, with only 52 percent reporting knowledge of this funding opportunity. Several provider respondents reported that they were not in charge of managing the finances of their programs, and this might help explain the lack of awareness about stipend opportunities among some respondents. Nonetheless, the fact that a portion of providers was unaware of the stipends indicates a need for more vigorous outreach to ECE providers to ensure they are aware of new funding opportunities.

Providers who received the stipends were asked how they planned to use the dollars. The 287 providers who responded to this question most frequently indicated that they would use stipend dollars for personal protective equipment and/or cleaning supplies, and for employee salaries.

If you operate a state-subsidized ECE program and received stipend funding, how do you plan to use the dollars? Please check all that apply.

- PPE and/or cleaning supplies: 57%
- Employee stipends: 18%
- Employee salaries: 54%
- Other: 14%
- Rent/mortgage: 43%
- Employee benefits (e.g., medical, dental): 12%
- Facilities renovation or expansion: 27%
- My program did not receive stipend funding: 6%

Number of respondents: 287

Waiver of family fees

California’s 2021-22 State Budget waived fees for families receiving subsidized child care and development services for fiscal year 2021-2022, and providers were to be reimbursed in full for these fees. The waiver of family fees was intended to support low-income families who were struggling from the effects of the COVID-19 pandemic. When provider respondents were asked how the fee waiver policy had impacted their programs, 36 percent indicated that families in their programs had been able to keep their child(ren) enrolled because they did not have the burden of paying family fees. In addition, 27 percent indicated that they believed new families were able to enroll their child(ren) into their programs because they did not have the burden of paying fees.

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27 The 2021-22 State Budget also included federal ARPA funding for a one-time stipend for all licensed centers and family child care homes. These Licensed Child Care Facility Stabilization Stipends were authorized to be distributed by the CDSS, and were intended to help stabilize existing programs and to provide support in covering increased costs associated with operating during the pandemic. California Department of Social Services. (2021). Licensed child care facility stabilization stipends. https://www.cdss.ca.gov/inf resources/cdss-programs/community-care-licensing/child-care-licensing/licensed-stipends
28 409 providers answered this question.
30 339 providers answered this question.
Unfortunately, eight percent of providers reported that they had not been reimbursed for the fees that were waived for families.

**New child care slot funding**

California’s 2021-2022 State Budget included a commitment to expand child care access by adding 120,000 child care slots in 2021-22, growing to 200,000 new slots by 2025-26, should the state’s economic condition support this increase. In anticipation of this new funding for child care slots, provider respondents were asked whether or not they planned to apply for new General Child Care and Development (CCTR) funding. The General Child Care and Development Program is one of the state programs that subsidizes child care spaces.

**Of the 410 providers who answered a question about whether they would apply for new CCTR funding, 62 percent responded in the affirmative.** Family child care providers and providers who worked for independent/private center-based programs were the most likely to indicate that they would apply for CCTR funding.

Providers who were not planning to apply for new slot funding were asked why this was the case. The most common reasons given were that they did not have adequate physical space to serve more children (20% of respondents), and, due to a staff shortage, they could not serve additional children and still maintain required child-staff ratios (20%). Other frequently cited reasons were that providers were already at licensed capacity for their sites (18%), and there was insufficient demand from families for more spaces at their sites (18%). Finally, 14 percent of respondents indicated that they were not planning to apply for new slot funding because the per-child reimbursement they received was insufficient to cover the costs of serving additional children. Ultimately, it is evident that a variety of barriers will inhibit the ability of some providers to apply for new slot funding.

**New infrastructure grant funding**

California’s 2021-22 State Budget included $250 million for a new infrastructure grant program that is being administered by the CDSS. The Child Care and Development Infrastructure Grant Program is designed to expand access to early care and education opportunities for children by providing resources to build new facilities and to retrofit, renovate, repair and expand existing facilities. $100 million is available for minor construction, renovations and repairs, and $150 million is available for major construction of shovel-ready child care facilities. Non-LEA (local educational agency) providers who meet specific criteria are eligible to apply for the grants, and the Request for Applications (RFA) for Minor Renovations and Repairs was released in February 2022.

**Of the 410 providers who answered a question about whether they were aware of the infrastructure grant funding prior to taking the survey, 80 percent reported that they had been unaware that grant funding was available.** Family child care providers and independent/private center-based programs were the least likely to know about the funding opportunity. After being informed about the infrastructure grant funding, over 41 percent of providers indicated that they would apply for the funding, over 40 percent indicated that they were unsure of whether they would apply, and over 17 percent indicated that they would not apply for the funding. Family child care providers and independent/private center-based programs most frequently reported that they intended to apply for infrastructure grant funding.

Providers who indicated that they did not plan to apply for infrastructure grant funding were asked why this was the case, and 51 percent responded that they did not know if they were eligible to

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32 147 providers answered this question.


34 411 providers answered this question.
apply for the funding. Other frequently cited reasons included not knowing enough about the purpose or parameters of the grant funding to apply (22 percent of respondents), their site not being in need of new construction or renovation (21 percent), and not knowing where to go to apply for the funding (19 percent).

Ultimately, the fact that a significant percentage of providers was unaware of the infrastructure grant program suggests that ECE providers are not necessarily aware of state budget developments as they occur. This context makes it all the more imperative for vigorous outreach to be conducted to providers by state agencies to ensure that they are aware of new funding opportunities, and for funding eligibility guidelines and applications to be user-friendly and clear.

**ADDITIONAL CHALLENGES FACING ECE PROFESSIONALS**

In addition to dealing with the challenge of reduced revenues/reimbursement, many ECE providers are grappling with staff recruitment and retention challenges. Further, low compensation in the field and the constant risk of being exposed to COVID-19 are significantly impacting the morale, sense of well-being, and economic security of both teachers and providers.

**Challenges facing providers**

When provider respondents were asked to identify the most significant challenges their programs were facing, they most frequently cited difficulty finding qualified substitute teachers, difficulty finding qualified preschool teachers, and difficulty in keeping children socially distanced and/or wearing masks. In a similar vein, when provider respondents were asked if they had been able to fill all staff positions at their programs with qualified individuals, 51 percent indicated that they had not been able to do so. Providers at nonprofit organizations most frequently reported staffing challenges, with 63 percent indicating that they had not been able to fill all staff positions with qualified individuals. In addition, recruiting assistant/associate teachers appeared to be a specific challenge, with nearly 19 percent of providers identifying these positions as difficult to staff.

What are the most significant challenges your program is facing right now? Please check up to three answer choices.

- Finding qualified substitute teachers: 35%
- Keeping children socially distanced and/or in masks: 32%
- Finding qualified preschool teachers: 32%
- Need for technological devices for children: 24%
- Finding qualified infant/toddler teachers: 22%
- Retaining current staff: 20%
- Need for PPE and/or cleaning supplies: 17%
- Need more bilingual assistants and/or teachers: 13%
- Need broadband service for children’s families: 9%
- Need better access to COVID testing: 9%
- None of the above: 8%
- Other: 6%

Number of respondents: 362

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35 73 providers answered this question.
36 353 providers answered this question.
37 59 nonprofit providers answered this question.
38 351 providers answered this question: “What positions, if any, have been difficult to staff?”
When providers were asked why they believed they were having trouble recruiting staff, they most frequently responded that qualified candidates are not applying due to low compensation in the ECE field. Several providers in our focus group echoed this sentiment, noting that it is difficult to compete for employees with companies like fast-food chains, which can pay more per hour and whose job openings require less education. One of the teachers in our focus group also highlighted the chronic nature of low compensation in the ECE field, stating, “[Low] compensation has been an issue for years . . . that push to go and get our bachelors, go and get credentials, to go get our masters . . . we’ve done it with the promise of, ‘the salary’s going to catch up’. . . It’s been years, the salary hasn’t caught up. So, at this point, it’s like, we’ve heard the story before, so I think that’s why you’re seeing the exit of many early childhood educators saying, ‘I can’t afford to wait anymore for [compensation] to catch up’.”

When providers were asked why they believed they were having trouble recruiting lead teachers, the second most frequently cited reason (following low compensation) was that qualified candidates are not applying due to fear of potential exposure to COVID-19 in ECE settings. The third most frequently cited reason was that qualified candidates have left the field to pursue other professions. When the same question was asked of providers regarding recruiting assistant teachers or substitute teachers, these second most frequently cited response was that when only part-time work is available, candidates do not apply because they feel the compensation is not worth the effort.

Providers were also asked whether they were having difficulty retaining staff, and if so, why they thought this was the case. Their responses were similar to ones they gave when explaining recruitment issues. The most frequently cited reason for difficulty in retaining staff was that staff are seeking other employment where they can earn higher wages. Providers also frequently indicated that staff are experiencing burnout related to the stresses and pressures caused by COVID-19.

If you are having difficulty retaining staff, why do you think this is the case? Please check all that apply.

- **Staff seeking higher wages elsewhere** 50%
- **Staff experiencing mental health challenges** 20%
- **Not having difficulty retaining staff** 37%
- **Staff worried about COVID exposure** 19%
- **Staff experiencing burnout from COVID stresses** 34%
- **Staff have caregiving responsibilities that keep them from working** 16%
- **I do not offer health, dental, or other benefits** 26%
- **Other** 6%

Number of respondents: 353

Several participants in our focus groups highlighted the impact that staff retention challenges can have on individual programs and on the ECE field. One provider explained, “It’s definitely hard to keep good staff when you find them. And [when they leave], it puts you back to having to try to find somebody that understands early childhood education and who’s willing to work for whatever we’re able to pay.” Further, a teacher suggested that how and whether the issue of retention is addressed will “be a dictator of where [the ECE] field is going to go, because you need to retain good teachers.” She further opined, ”If you don’t have people that are well versed in this field, it’s going to be a disaster at some point.”
**Challenges facing teachers**

When teacher respondents were asked to identify the most difficult challenges they were facing, they most frequently cited worry about being exposed to or infected with the COVID-19 virus, followed by insufficient compensation.

One teacher in our focus group explained that she does not always have adequate support or resources to fully observe COVID protocols. In addition, she and several other teachers noted that some parents send their children to school when they are ill. One teacher said she understood that parents need to keep their jobs and that young children cannot stay home by themselves, but she felt that parents were not considering the impact of their actions on teachers. Several teachers also expressed frustration at what they perceived as a lack of empathy and consideration on the part of administrators regarding the health risks to which teachers are exposed.

Teachers in our focus groups also expressed great frustration about low compensation in the field. One teacher stated, “I don’t think we can brush over the importance of adequate salary for our field. I . . . have been in the field for over thirty years and we do not have a livable salary range.” Another teacher shared that she was struggling with the question of whether or not to remain in the field because of the low compensation. She stated, “I found myself really questioning if I wanted to stay within this field because I do feel like I’m making a sacrifice to my personal comfort and financial stability in order to do something that I’m passionate about. It’s really sad that I can’t keep this as my profession forever and get better at it because the money is just not enough. And we’re seeing that there’s so many jobs in many other fields that pay so much more, and it’s so much less work.” This same teacher also suggested that the “cultural mentality” of preschool being viewed as babysitting would not change until there was “some equity in compensation” with K-12 education. Finally, another teacher pointed to the problem of small differentials between the salaries of new and veteran teachers. She stated, “It’s sad, because I noticed [that when] a new teacher comes in, that teacher is making almost the same amount of money that I am making after 18 years.”

**What are the most difficult challenges you are facing right now as an early educator? Please check up to three answer choices.**

- **Worry about COVID-19 exposure** | 52%
- **Lack of health, dental, or other benefits** | 17%
- **Insufficient compensation** | 40%
- **Completing time-consuming DRDP assessments** | 15%
- **Managing COVID-related health situations** | 37%
- **Not experiencing significant challenges** | 8%
- **Sense of burnout** | 35%
- **Insufficient flexibility from admin about curriculum** | 3%
- **Mental health challenges due to the pandemic** | 33%
- **Other** | 2%

Number of respondents: 100

When teacher respondents were asked what would make their jobs more manageable, they overwhelmingly pointed to higher compensation as a solution. They also frequently cited more support in working with children with special needs, and more opportunities to participate in communities of learning with fellow ECE professionals.
What would make your job as an early educator more manageable? Please check up to three answer choices.

<table>
<thead>
<tr>
<th>Choice</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher compensation</td>
<td>62%</td>
</tr>
<tr>
<td>More flexibility for what and how I teach</td>
<td>28%</td>
</tr>
<tr>
<td>More support for children with special needs</td>
<td>37%</td>
</tr>
<tr>
<td>Health, dental, and/or other benefits</td>
<td>13%</td>
</tr>
<tr>
<td>More participation in communities of learning</td>
<td>34%</td>
</tr>
<tr>
<td>None of the above</td>
<td>8%</td>
</tr>
<tr>
<td>To focus less on academics and more on social-emotional development</td>
<td>30%</td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
</tr>
</tbody>
</table>

Number of respondents: 100

Teachers in our focus group emphasized that they needed more support in working with children with special needs. One teacher shared that she has nine children in her classroom with Individualized Education Programs (IEPs), and she does not have the bandwidth or resources to provide them with all the early intervention assistance they need, while also attending to the needs of the sixteen other children with whom she is working. Another teacher noted that she has no special education training and is struggling to serve a child who has autism, while also supporting the other twelve children in her classroom. Further, another teacher cited the need for both behavioral specialists and speech pathologists in her district. She stated that she sees many children who need speech and language services but who are only working with a speech pathologist for approximately a half-hour per week, with three or four other children at the same time.

Teachers in our focus group also stressed that completing mandatory child assessments, such as the Desired Results Developmental Profile (DRDP), is inordinately time-consuming and can make it difficult for teachers to have the time they need with children and to help them develop critical skills. Several teachers also emphasized that they are being asked to focus more on the development of children’s academic skills at the expense of social-emotional skills, such as self-regulation and problem solving. One teacher stated that children need to be able to “play with peers, communicate with the teacher . . . and share toys.” Another teacher emphasized that children need to “learn regulating strategies so . . . they are able to [have] these skills for a lifetime.” She further expressed that time spent on paperwork and the pressure to push academics “pulls [her] away” from just being there with the kids on the floor, teaching them how to take the deep belly breaths, how to use their big voice, how to say [things] in a firm, respectful way and get their wants and needs handled without causing harm to themselves and harm to others.” She stated that teachers need to be able to “do what we came to this profession to do [which] is to help children learn how to be positive members of society.” Ultimately, several teachers suggested that the content of the DRDP assessment tool, and the frequency with which teachers are asked to utilize it, should be re-evaluated and that they should be afforded more time to focus on social-emotional learning.

39 “The IEP is a written document that describes any accommodations, modifications, or related services a student [who is found to be eligible for special education services] needs in order to receive an appropriate education. It also lists goals and objectives, which are used to measure a student’s progress and determine whether the program and placement are appropriate.” Disability Rights Education and Defense Fund. (2022). The IEP cycle. https://dredf.org/special-education/special-education-resources/the-iep-cycle/

40 “Early intervention is the term used to describe the services and supports that are available to babies and young children with developmental delays and disabilities and their families.” Centers for Disease Control and Prevention. (2019). What is “early intervention”? https://www.cdc.gov/ncbddd/actearly/parents/states.html

41 “The Desired Results Developmental Profile (DRDP) assessment instrument is designed for teachers to observe, document, and reflect on the learning, development, and progress of children, birth through 12 years of age, who are enrolled in early care and education programs and before- and after-school programs. The assessment results are intended to be used by the teacher to plan curriculum for individual children and groups of children and to guide continuous program improvement.” California Department of Education. (2021). Introduction to desired results. https://www.cde.ca.gov/sp/cd/ci/desiredresults.asp
NEEDS AND CHALLENGES OF FAMILIES IN ECE PROGRAMS

Survey respondents were asked about the early care and education needs of families in their programs, about the challenges families were facing, and about their own concerns for children in their programs. Respondents overwhelmingly reported that families needed full-time care, with preschool being the most requested service, closely followed by toddler care. Survey respondents most frequently identified stress as a significant challenge facing families in their programs and reported concern that children were dealing with multiple stressors at home.

When provider respondents were asked what type of care the majority of families in their program needed, 82 percent cited full-time care, 13 percent cited part-time care, and 5 percent cited care during nontraditional hours (early mornings, evenings and/or weekends). In addition, of the 20 providers who indicated that families needed care during nontraditional hours, 18 were family child care providers.

When provider respondents were asked what services had been most requested by families in their programs over the last three months, they most frequently cited preschool services (60 percent) and toddler care (58 percent).

During the last three months, which services have been most requested by families in your program(s)? Please check all that apply.

- Preschool services: 60%
- Toddler care: 58%
- Infant care: 47%
- School-age care (ages 5-12): 27%
- After school care: 25%
- All of the above: 18%
- Care during nontraditional hours: 14%
- None of the above: 4%

Number of respondents: 396

When survey respondents were asked to identify the most prevalent challenges facing families in their programs, they most frequently cited stress and financial insecurity. It is also noteworthy that several other challenges frequently cited by respondents (e.g. joblessness, housing insecurity, and illness related to COVID-19) can contribute to and/or cause the stress being felt by ECE families. Further, one of the providers in our focus groups noted that families are feeling stress due to fear of contracting COVID-19. This provider stated that some parents ask her if she knows whether other families in the program have attended group events such as weddings, and they ask if she can find out if these families have had COVID tests.

Another provider noted that her program surveyed families about their needs and provided a list of potential items they could check, such as clothing, food, and mental health assistance. She stated that, interestingly, the items parents most frequently selected were parent training on child development, identifying extra activities to do with their children, and learning to use technology.

42 396 providers answered this question.
Another provider noted that parents in her program have asked for more communication with the teachers about what is taking place in the classroom, since parents have not been allowed into the center due to the health risks of COVID-19.

What are the most prevalent challenges facing families in your program right now? Please check all that apply.

- Stress: 69%
- Financial insecurity: 58%
- Joblessness: 43%
- Housing insecurity: 40%
- Illness related to COVID-19: 39%
- Struggling to afford ECE services: 33%
- Difficulty securing services for special needs children: 28%
- Food insecurity: 27%
- Struggling to find ECE services: 23%
- Fear related to immigration status: 21%
- Unable to find child care during nontraditional hours: 19%
- Homelessness: 17%
- None of the above: 8%
- Other: 3%

Number of respondents: 461

When respondents were asked what concerns they had for the children in their programs, they most frequently responded that children were dealing with multiple stressors at home. Respondents also frequently cited as a concern children exhibiting challenging behaviors due to trauma they have experienced. In addition, one provider expressed concern that children who are behind in certain skills due to challenges associated with COVID will not receive the empathy or extra support needed from adults when we emerge from the pandemic. She stated, “I’m concerned that people will not be understanding as soon as we get back to normal. They’ll forget that when [children] were two or three years old, they were trying to catch up and they didn’t have certain developmental experiences. They’re going to need more support. I’m concerned that it’s just going to keep moving faster and that gap’s going to get bigger between where they are and where they need to be . . . There’s a certain extent to which I truly feel a sadness in regards to my children, because I look at them and think, ‘is the world going to continue to be understanding of what we’re going through right now?’ I’m thinking of that poor child who lost his mother. Is it going to matter to anybody two years from now when that child’s still struggling with other things?”
Which, if any, of the following concerns do you have for the children in your program? Please check all that apply.

<table>
<thead>
<tr>
<th>Concern</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children dealing with multiple stressors at home</td>
<td>54%</td>
</tr>
<tr>
<td>Children exhibiting challenging behavior due to trauma</td>
<td>37%</td>
</tr>
<tr>
<td>Children not meeting developmental benchmarks</td>
<td>30%</td>
</tr>
<tr>
<td>Children's mental health needs not being addressed</td>
<td>29%</td>
</tr>
<tr>
<td>None of the above</td>
<td>28%</td>
</tr>
<tr>
<td>Children receiving inadequate support for their disabilities</td>
<td>22%</td>
</tr>
<tr>
<td>Other</td>
<td>2%</td>
</tr>
</tbody>
</table>

Number of respondents: 435

WORKING WITH DUAL LANGUAGE LEARNERS

In California, nearly 60 percent of children ages five and younger live in a home where a language other than English is spoken. These children, who are learning two or more languages at the same time, or are learning a second language while continuing to develop their first (or home) language, are known as Dual Language Learners (DLLs). The majority of survey respondents reported serving DLLs in their programs. In addition, respondents reported a multiplicity of languages spoken by children in their programs and by themselves. Further, respondents identified several key barriers to offering dual-language programs, in which children are taught literacy and content in two languages (English and another language).

Nearly three-quarters of survey respondents reported serving DLLs, and 43 percent of these respondents worked in programs in which at least half of the children served were DLLs.

When respondents were asked to identify the languages spoken by children in their programs, 95 percent indicated that children in their programs spoke English, 78 percent reported that children in their programs spoke Spanish, and 14 percent indicated that children in their programs spoke Mandarin. Smaller percentages of respondents indicated that children in their programs spoke Arabic (8%), Armenian (5%), Cantonese (6%), Farsi or Dari (4%), Korean (8%), and Tagalog (6%). Survey respondents themselves reported fluency in a wide variety of languages, including American Sign Language, Arabic, Armenian, Cantonese, Dari, Dutch, English, Farsi, Hindi, Korean, Lithuanian, Mandarin, Russian, Sinhalese, Serbian, Somali, Spanish, Tagalog, and Urdu. However, respondents most frequently reported speaking fluent English (83 percent) and Spanish (56 percent).

Forty-four percent of survey respondents reported serving children in a dual-language program, and just over 87 percent of these respondents reported that the non-English language

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44 Ibid.
45 580 respondents answered this question.
46 427 respondents answered this question: “If you serve Dual Language Learners, what percentage are they of the children in your program?”
47 576 respondents answered this question.
48 Overall, respondents identified twenty-two different languages spoken by children in their programs.
49 579 respondents answered this question.
50 580 respondents answered this question.
of instruction was Spanish. In addition, provider respondents who did not provide a dual-language program for enrolled children were asked if they would like to do so in the future, and 58 percent answered in the affirmative. Family child care providers and providers who worked at district-based programs expressed the greatest interest at 66 percent and 67 percent, respectively.

Providers who expressed interest in offering a dual-language program in the future were asked to identify barriers to doing this, and they most frequently cited a lack of training on effective dual-language program practices. In addition, a provider in one of our focus groups stated that she would need guidance on program requirements, including staff qualifications, in order to offer a dual-language program. Further, a teacher in one of our focus groups cited the need for more bilingual staff in order to run a dual-language program, and another teacher suggested that bilingual educators who can provide ECE services in a second language should receive additional compensation for utilizing this skill.

If you would be interested in providing a dual-language program in the future, what are the barriers to doing this? Please check all that apply.

<table>
<thead>
<tr>
<th>Lack of training on effective dual-language program practices</th>
<th>Lack of qualified staff who speak children’s home language</th>
</tr>
</thead>
<tbody>
<tr>
<td>66%</td>
<td>48%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lack of materials in the home language</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>55%</td>
<td>11%</td>
</tr>
</tbody>
</table>

Number of respondents: 161

WORKFORCE SUPPORTS FOR ECE PROFESSIONALS

In our survey, ECE professionals were asked to indicate their interest in a variety of supports designed to help them increase their credentials and qualifications, hone their craft, and gain knowledge and skills to more effectively serve children and families in their programs. Both provider and teacher respondents most frequently reported an interest in paid professional development and in stipends to enroll in higher education courses. In addition, providers frequently cited an interest in professional development related to managing and mentoring staff and in business management, and teachers frequently cited an interest in professional development related to supporting diverse children and in instructional support. More detailed findings are included below.

Workforce supports

When survey respondents were asked what workforce supports would be most helpful to them, providers most frequently indicated interest in receiving paid professional development that takes place outside of work hours. This was followed by an interest in stipends to enroll in higher education courses. Teachers also most frequently reported interest in receiving paid professional development, but their top preference was for training that takes place during traditional work hours. Teachers also indicated a strong interest in stipends to enroll in higher education courses.

51 253 respondents serving children in a dual-language program answered this question: “If you are serving children in a dual-language program, what is the non-English language of instruction?”

52 277 providers answered this question.

53 125 family child care providers and 49 district-based providers answered this question.
Which of the following workforce supports do you feel would be most beneficial to you? Please check all that apply.

<table>
<thead>
<tr>
<th>Rankings</th>
<th>Providers</th>
<th>Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Professional development in which they are paid to participate <em>outside</em> of traditional work hours (55%)</td>
<td>Professional development for which they receive paid time off to participate <em>during</em> traditional work hours (61%)</td>
</tr>
<tr>
<td>2</td>
<td>Stipends to enroll in higher education courses (52%)</td>
<td>Stipends to enroll in higher education courses (55%)</td>
</tr>
<tr>
<td>3</td>
<td>Professional development for which they receive paid time off to participate <em>during</em> traditional work hours (49%)</td>
<td>Professional development in which they are paid to participate <em>outside</em> of traditional work hours (48%)</td>
</tr>
<tr>
<td>4</td>
<td>Coaching (44%)</td>
<td>Coaching (37%)</td>
</tr>
<tr>
<td>5</td>
<td>Mental health support (39%)</td>
<td>Career advisement on what courses to take to increase professional qualifications, where to find these courses, etc. (32%)</td>
</tr>
<tr>
<td>6</td>
<td>Training on business operations (39%)</td>
<td>Mental health support (31%)</td>
</tr>
<tr>
<td>7</td>
<td>Career advisement on what courses to take to increase professional qualifications, where to find these courses, etc. (33%)</td>
<td>Training on business operations (13%)</td>
</tr>
</tbody>
</table>

Number of respondents: 476

Several ECE professionals in our focus groups emphasized the benefit of stipends in furthering their education. One provider noted that a stipend she received from Child360 (then Los Angeles Universal Preschool) enabled her to receive her bachelor’s degree when she was working as an ECE teacher. She noted that the stipend represented “a lot of money for [her]” at the time. In addition, a teacher in one of our focus groups shared that when she was a young mother with four children, receiving a stipend enabled her to pay for child care and books while she was going to school and earning her degree. Further, one provider emphasized that receiving paid release time to attend class or to study had been very beneficial to teachers in her program.
Professional development preferences

Survey respondents were asked on what professional development topics they were most interested in receiving training. Providers most frequently cited interest in topics related to business and professional growth, and teachers most frequently cited interest in topics related to supporting diverse children and instructional support.

Survey respondents identified over thirty specific topics on which they were interested in receiving professional development training. Providers most frequently reported interest in professional development on managing and mentoring staff and business management. Teachers most frequently reported interest in professional development on working with children with challenging behaviors. A challenging behavior has been defined as “any repeated pattern of behavior, or perception of behavior, that interferes with or is at risk of interfering with the child’s optimal learning or engagement in pro-social interactions with peers and adults.” The Center for the Developing Child at Harvard University also explains that “problematic behaviors may need to be treated as a result of the ACEs or other traumatic experiences someone has had, as opposed to addressing them as simply willful and/or punishable actions.” Trauma-informed care or services are characterized by this understanding. Indeed, children who have experienced trauma “may have impairments across the developmental domains – physical, cognitive, social and emotional, and language and literacy – that manifest as challenging and troubling behaviors in the classroom.” Ultimately, it is important that professional development provided to early educators on behavior management include training on trauma-informed care.


On what topics are you most interested in receiving professional development right now?

<table>
<thead>
<tr>
<th>Providers</th>
<th>Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Managing and mentoring staff (56 respondents identified this topic)</td>
<td>Challenging behaviors, behavior management (29 respondents identified this topic)</td>
</tr>
<tr>
<td>Business management (35)</td>
<td>Working with children with special needs or developmental delays (10)</td>
</tr>
<tr>
<td>Career growth and leadership (31)</td>
<td>Language &amp; literacy (10)</td>
</tr>
<tr>
<td>Family engagement (30)</td>
<td>STEAM (10)</td>
</tr>
<tr>
<td>Observations (DRDP, ASQ, etc.) (30)</td>
<td>Social-emotional development (9)</td>
</tr>
<tr>
<td>Stress/mental health and work-life balance of caregivers (26)</td>
<td>Working with Dual Language Learners (DLLs) (8)</td>
</tr>
<tr>
<td>Applying for funding and grants (23)</td>
<td>Child observations (8)</td>
</tr>
<tr>
<td>Challenging behaviors, behavior management (22)</td>
<td>Child mental health and trauma (6)</td>
</tr>
<tr>
<td>Working with children with special needs or developmental delays (20)</td>
<td>Family engagement (4)</td>
</tr>
</tbody>
</table>

*Only the most frequently identified topics are listed above.

Providers in our focus groups highlighted their interest in receiving professional development on business and office management. One provider stated that she needed assistance in organizing her files, while another noted that she needed professional guidance in making better, more efficient use of her office space. Further, another provider expressed a desire to receive guidance on putting together an employee handbook and on other administrative responsibilities.

Both teachers and providers in our focus groups highlighted the need for professional development on social-emotional learning. One teacher stated that she would like to receive training on “more practical uses of social-emotional interventions that fit into supporting the flow of a classroom.” In addition, several providers explained that there is a need for this training because they are serving more children who lack social-emotional skills. One provider explained that they are seeing children who “haven’t been nurtured in ways that they typically [would] when they’re in our programs . . . we are definitely seeing more children who are lacking empathy, they’re lacking the ability to engage with their peers, engage with other adults.” She continued, “Really focusing on that social-emotional [piece], and boosting their self-esteem, I think . . . is so key right now.” Another provider explained, “We have a lot of kids that are not able to socialize with other kids, they’re not able to express their feelings or they’re withdrawn from the rest of the group because they’re scared . . . And then there are some kids that want to come and hug and play with them, and then the other ones move away or they don’t know how to react, they don’t know how to say certain things that they need to express.”

In addition, several teachers in our focus group highlighted the benefit of providing workshops for parents on the importance of spending one-on-one time with their children at home, and of providing examples of simple activities parents can do with their children that support social-emotional learning. One teacher also emphasized the importance of setting realistic expectations for parents and of approaching parent education in a “very thoughtful, loving way.”

Finally, one teacher suggested that thought should be given as to when professional development trainings are offered or scheduled for teachers. For example, she noted that participating in trainings at the beginning of the school year is less effective because teachers are grappling with a host of logistical issues during this time. She explained, “You’re not thinking about week ten when you’re going to implement certain things; you’re thinking, ‘How do I get through this week?’” She also suggested that providing coaching in tandem with professional development was helpful. In speaking of an effective training she had attended, she said, “There was coaching. There was
support. Not from an administrator, not from my direct supervisor, but from someone else that wasn’t supervising and evaluating me. I had the freedom to actually learn. Like children at times, I made mistakes, and I learned from them. And I was guided, and I was able to participate without the fear of being punished or reprimanded for my learning process. I think that’s what needs to change. Because we’ve all attended [trainings], we’ve heard these great, amazing ideas, but they usually stay in that little folder or pamphlet.”

**Academic and career goals**

In addition to being asked about preferred professional development trainings and other workforce supports, survey respondents were asked what academic or career goals they would like to pursue. Learning an additional language to better communicate with the children and families in their programs was the most frequently selected option by both providers and teachers. This result speaks to the linguistic diversity of the families being served by respondents.\(^{57}\) Earning a bachelor’s degree was the second most frequently selected goal by teachers, and engaging in policy or advocacy work related to ECE was the second most frequently cited goal by providers.

**Which of the following academic and/or career goals would you like to pursue? Please select all that apply.**

<table>
<thead>
<tr>
<th>Providers</th>
<th>Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learn an additional language to better communicate with children and families in my program (30% of respondents)</td>
<td>Learn an additional language to better communicate with children and families in my program (26% of respondents)</td>
</tr>
<tr>
<td>Engage in policy and/or advocacy work related to ECE issues (28%)</td>
<td>Obtain a Bachelor’s degree (25%)</td>
</tr>
<tr>
<td>Obtain a Bachelor’s degree (24%)</td>
<td>Obtain a Master’s degree (22%)</td>
</tr>
<tr>
<td>Obtain a Master’s degree (22%)</td>
<td>Engage in policy and/or advocacy work related to ECE issues (16%)</td>
</tr>
<tr>
<td>I am not interested in pursuing any of these options, even if financial or time constraints did not pose challenges (16%)</td>
<td>I am not interested in pursuing any of these options, even if financial or time constraints did not pose challenges (14%)</td>
</tr>
<tr>
<td>Obtain a Ph.D. or other Doctorate degree (15%)</td>
<td>Become a director (13%)</td>
</tr>
<tr>
<td>Obtain a multiple-subject teaching credential (11%)</td>
<td>Become a lead teacher (13%)</td>
</tr>
<tr>
<td>Become a director (11%)</td>
<td>Obtain a multiple-subject teaching credential (13%)</td>
</tr>
<tr>
<td>Become a lead teacher (8%)</td>
<td>Obtain a Ph.D. or other Doctorate degree (9%)</td>
</tr>
</tbody>
</table>

**Number of respondents: 476**

**INDICATORS OF QUALITY IN ECE PROGRAMS**

Survey respondents were asked what, in their opinion, should be the key indicators of quality in preschool programs and in infant/toddler programs, respectively. They were able to check up to six indicators from a list that was provided to them. Ultimately, respondents most frequently identified “a safe and stimulating environment for children” as a key indicator for both types of programs. In addition, respondents identified the same eight indicators as the most critical for both types of programs (see the table below).

\(^{57}\) Ninety-five percent of respondents reported that children in their program spoke English, 78 percent reported that children in their program spoke Spanish, and 14 percent reported that children in their program spoke Mandarin. Overall, respondents identified twenty-two different languages spoken by children in their programs.
When participants in our focus groups were asked to identify key indicators of quality in a preschool setting, multiple providers stressed that preschool programs should prepare children for kindergarten, engage children in learning through play, and foster social-emotional learning. In addition, several teachers indicated that quality in a preschool classroom could be gauged by the children’s reactions. As one teacher put it, “I think you need to see happy kids. You need to see kids that are learning and engaged and communicating.” She stressed that environments need to be created in which children feel safe, where they are learning, and where they can make mistakes and “it’s ok because it’s part of how we learn.” Another teacher indicated that quality could be identified as “the quiet chaos of a happy, healthy, emotionally stable classroom.” In addition, one teacher suggested that the time-consuming nature of completing DRDP assessments creates stress for teachers that can take away from the quality of their teaching.

<table>
<thead>
<tr>
<th>Key indicators of quality in a preschool program</th>
<th>Key indicators of quality in an infant/toddler program</th>
</tr>
</thead>
<tbody>
<tr>
<td>A safe and stimulating environment for children (87% of respondents)</td>
<td>A safe and stimulating environment for children (85% of respondents)</td>
</tr>
<tr>
<td>Responsive teacher-child interactions (79%)</td>
<td>A loving and nurturing environment for children (82%)</td>
</tr>
<tr>
<td>A loving and nurturing environment for children (78%)</td>
<td>Responsive teacher-child interactions (76%)</td>
</tr>
<tr>
<td>Strong support for literacy and language development (59%)</td>
<td>A welcoming environment for parents (60%)</td>
</tr>
<tr>
<td>A welcoming environment for parents (54%)</td>
<td>Strong support for literacy and language development (48%)</td>
</tr>
<tr>
<td>The program regularly and effectively communicates with parents (27%)</td>
<td>The program regularly and effectively communicates with parents (32%)</td>
</tr>
<tr>
<td>Staff are well trained on diversity, equity and inclusion (25%)</td>
<td>Staff are well trained on diversity, equity and inclusion (23%)</td>
</tr>
<tr>
<td>All lead teachers have at least 24 units in early childhood education, or child development, or both (23%)</td>
<td>All lead teachers have at least 24 units in early childhood education, or child development, or both (21%)</td>
</tr>
<tr>
<td>All lead teachers have a child development permit (18%)</td>
<td>Staff are well trained in serving children with special needs (17%)</td>
</tr>
<tr>
<td>All lead teachers have Bachelor's degrees (17%)</td>
<td>All lead teachers have Bachelor's degrees (14%)</td>
</tr>
<tr>
<td>All lead teachers have professional experience in a classroom setting with preschool age children that is comparable to 24 units of education (15%)</td>
<td>Staff are well trained in trauma-informed care practices (14%)</td>
</tr>
<tr>
<td>Staff are well trained in serving children with special needs (15%)</td>
<td>All lead teachers have a child development permit (14%)</td>
</tr>
<tr>
<td>Staff are well trained in trauma-informed care practices (13%)</td>
<td>All lead teachers have professional experience in a classroom setting with preschool age children that is comparable to 24 units of education (12%)</td>
</tr>
<tr>
<td>Staff are well trained in serving Dual Language Learners (11%)</td>
<td>Staff are well trained in serving Dual Language Learners (10%)</td>
</tr>
<tr>
<td>All lead teachers have demonstrated proficiency in the California Early Educator Competencies (8%)</td>
<td>All lead teachers have demonstrated proficiency in the California Early Educator Competencies (10%)</td>
</tr>
<tr>
<td>Only parents can determine what quality means for their child (5%)</td>
<td>Only parents can determine what quality means for their child (6%)</td>
</tr>
</tbody>
</table>

Number of respondents: 435
RECOMMENDATIONS

The results of our ECE survey and focus groups indicate a need for the following investments and practices to better support the ECE workforce and families with young children, both now and in the months ahead.

- **Increase provider reimbursement rates** to a level that enables providers to pay themselves and their staff a fair wage and better cover the cost of running their programs. Unless reimbursement rates are increased, it also will be difficult for providers to take advantage of new slot funding and to attract the educators needed to help them expand their programs.

- **Fund more professional development training for early educators on working with Dual Language Learners (DLLs),** as well as outreach strategies to recruit more current and aspiring bilingual educators to work with DLLs. **Consider creating financial incentives or increasing compensation for educators who choose to work in dual-language programs.**

- **Fund more stipends for higher education coursework and paid professional development** for early educators in all ECE settings. Further, ensure that funding is sufficient for programs to provide substitutes, if needed, when ECE professionals are attending trainings or courses. In addition, fund the development of trainings on business management, mentoring and managing staff, trauma-informed care and support for behavior management in the classroom, STEAM, language and literacy, and social-emotional learning, if these trainings are not available in sufficient numbers. Further, consider funding conversational language classes for ECE professionals who want to better communicate with linguistically diverse families in their programs.

- **Expand outreach efforts to ECE professionals regarding new grant programs or other funding opportunities.** Consider setting aside funding for outreach in new grant programs or other funding opportunities, to enable the California Department of Social Services (CDSS) to expand its outreach efforts to ECE professionals, and to partner with state associations and/or local agencies to inform hard-to-reach populations (such as license-exempt providers and family child care homes) about new funding.

- **Fund more professional development training on working with children with special needs, as well as specialists (e.g., speech pathologists, behaviorists, physical therapists)** who can work with ECE professionals to provide critical early intervention services to children in their programs. The type and number of specialists hired should be based on individual ECE program needs.
Implementing these recommendations will enable ECE programs to better weather the ongoing pandemic and to address the persistent challenges of staff recruitment, retention, and burnout. In addition, implementing these recommendations will open doors for ECE professionals to advance in their careers, to expand their capacity to serve diverse children and their families, and to take advantage of new state funding opportunities available to them. Further, implementation of these recommendations will demonstrate respect and provide critical support for a workforce that has been chronically undervalued and under-resourced.

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