



The mission of the National Association for Family Child Care is to support and leverage a nationwide network of providers and partners in expanding and promoting the power of family child care.

Our priority is to build the supply of high-quality family child care to meet the needs of infants and toddlers, preschoolers, and school-age children; to support working families with reliable, affordable choices for child care arrangements that meet their needs; and to create crucial early learning opportunities right in our own neighborhoods.

Family child care is the business of child care and the practice of early care and education in the program provider's home. The National Survey of Early Care and Education (NSECE)ⁱ identified one million paid providers caring for children in a home, caring for three million children from birth to age five in these settings. Professional family child care is just one part of the much larger community of home-based child care arrangements that families count on. NSECE identified about 118,000 listedⁱⁱ, paid providers caring for over 750,000 children ages birth through age five.

Family child care is the preferred arrangement of many families. The home-based environment and small group setting is uniquely well-positioned to meet the needs of families often challenged to identify reliable child care options. This includes families with infants and toddlers, families needing care during nontraditional hours, military families, communities of color and immigrant families, families of children with special needs, and families in rural communities.

Family Child Care and the COVID-19 Crisis

It is urgent that we ensure child care is available now for families who must continue to work during the COVID-19 crisis, and it is important that child care businesses and the child care workforce are sustained so that they can be available and ready when the U.S. workforce returns to typical working conditions. Family child care is a crucial part of the early care and education system, and the very fabric of our communities. We must work together to ensure family child care is part of the solution as we face this health crisis.

NAFCC Urges Congress to Invest in Child Care

Early childhood education programs are essential for the millions of children and families they serve and serve an important role during emergency public health and economic emergencies. **If and when child care closes, it is imperative that the decision be tied to public support to pay for all operations and employee wages while they are closed.** There are inherent inequities in the child care system—no public guarantee of health care, livable compensation, or adequate support. **Without immediate assistance, child care cannot exist.** There must also be support for the child care providers that elect to care for first responders and emergency personnel. Our health care workers can't work without these individuals caring for their children. We need to provide them with the health and safety resources they need as essential personnel.

Voices from the Field

NAFCC members and our network of state association leaders are letting us know what they're experiencing on the ground and to express their needs in real-time. NAFCC surveyed family child care programsⁱⁱⁱ.

- 72% of survey respondent have implemented emergency/precautionary procedures
- 77% are in areas where schools have been closed
- 32% have seen a decrease in enrollment as a result
- 55% are unsure of whether or not they will be paid, with 29% certain that they **will not** be paid.
- 73% feel they could not pay back a disaster relief loan, some citing historically razor thin margins
- 78% note limited access to food, cleaning supplies, toiletries and paper goods such as paper towels and diapers.

One state association leader reports that she is staying open because she cannot afford to close, and customers need her. She has three children under three in her home, which allows their parents to stay employed working from home and their children to have continuous and responsive care. Parents find it difficult to work from home and care for an infant or toddler without help. She says she needs help as soon as possible to deal with the looming due date of her mortgage April 1st, as do most members of the state association, none of whom have any extra cash cushion that could make up the difference in lost income. Additionally, she is concerned that programs are not able to access paid sick leave, family leave, or unemployment.

“I AM A SINGLE MOM, IN A HOUSEHOLD OF 4. WE ARE ALL GOING TO BE LIVING OFF MY SON'S WAGES FROM THE GROCERY STORE.”

- Carolyn, California FCC Professional

To open or to close?

There is a lot of uncertainty and a lot of need. State directives on mandatory child care closures change almost daily. Some states are implementing guidance for those who remain open, those who close, and those who are crucial for emergency personnel. Other state leaders direct private child care settings to make their own decision about whether to open or close. Many states leaving out specific guidance for family child care programs.

This is not a simple choice. Our members are making tough decisions to stay open and tough decisions to close. They’re balancing their own financial need, the needs of the families that they serve, the health concerns of themselves and their families. There are many right ways and no one fit.

Federal Recommendations

- **Congress should include at least \$50 billion in child care funding to states to support for child care in their COVID-19 stimulus.** The federal emergency response should provide not only provide specific funding to fund child care for essential workers, but also enough to allow states to plan how best to help child care programs, including family child care, to weather this growing public health and economic crisis, and preserve the nation’s supply of family child care and community-based child care programs for after this is over.
- **Congress should expand support for nutritious meals** to be served through the Child and Adult Care Food program (CACFP) in community-based child care programs, including family child care, to meet the growing need for food as families lose their livelihoods.

- **Congress should provide mortgage forbearance (with no interest, penalty or extension) and relief for renters immediately** and through at least 60 days after the end of the crisis. While the banks have the capital and reserves to manage mortgage forbearances, many residential landlords cannot bear the weight of rent freezes, and many family child care providers are renting.

State and Local Recommendations for Including Family Child Care

- **State guidance to child care programs during this crisis must be clear and specific, and supports must be generous.** Some state guidance has not specifically addressed family child care providers, some of which may be included by the state in the “licensed” category, but others may be legally unlicensed under state law and regulation. Guidance should address these different situations. (insert something about specifically considering family child care and recognizing home based settings and ensuring family child care is included in the availability of resources) States should provide information about guidance and resources to providers in the languages most spoken by the family child care provider community, and include online, webinar, written, and any other means that could reach all home-based providers. Direct support to restart child care programs must be made in grants, not loans.
- **States and localities should give family child care programs the flexibility to choose** whether to be open and the “front line” in service, and that decision to be open or closed should not be based on fear of loss of livelihood. And, supports should be made available to programs regardless of which they choose.
- **Supports made available to center-based programs through emerging strategies at the state and local levels must include family child care professional** and be tailored to both licensed and legally exempt from licensure.
- **States and Child and Adult Food Program sponsors should communicate with family child care educators about flexibility** to provide “grab and go” meals to children and families, even if they do not attend child care out of concern about COVID-19.
- **Include family child care advocates/providers in state emergency response advisories.**

State and Local Recommendations to Sustain and Support Family Child Care Providers

- **States should continue to pay family child care programs that are part of the child care subsidy system supported in part by the federal Child Care and Development Block Grant (CCDBG)** based on enrollment before the crisis hit, not based on attendance now that families are staying home or out of work and school. This will help maintain their capacity to get through this period of low attendance. In addition, those who remain open should receive higher levels of payment – or “hazard pay”.
- **States and localities should support community-level capacity to reach providers** by engaging and supporting family child care networks, child care resource and referral agencies, family resource centers, shared service alliances, and other community based programs to family child care providers in their communities and build crisis response networks to distribute information, resources, and support peer to peer cohorts.
- **States and communities should act to either source and/or distribute dedicated sources of supplies to adequately meet the health, safety and nutrition standards** providers are working to meet, including:

- Health and Safety supplies: no touch & forehead thermometers, hand sanitizer, disinfectant wipes, etc.
- Paper goods, toiletries, cleaning supplies
- Food, especially fresh fruit, fresh vegetables, and meat
- **Provide direct grants to help family child care businesses avoid closure or swiftly re-open after this crisis is under control.** The grants would be available to providers whose private pay clients and subsidy co-payments have dried up. Priority should be given to communities with concentrations of low-income children and where there has been an identified a supply need, such as rural areas.

Recommendations for Philanthropy

- **Provide grants or stipends to state and local groups or individual advocates for family child care, prioritizing providers themselves to be heard about what they need to weather this crisis.** Create a national, state, or local fund to provide support for providers who are often too busy providing child care all day to be able to be heard in city hall, state houses, and Congress. NAFCC has a network of state and regional representatives who are mostly volunteers. Supports would help ensure authentic family child care voices in advisory groups for emergency management agencies in order to provide input on how best to respond to changing circumstances and environments.

ⁱ National Survey of Early Care and Education Project Team (2016). Characteristics of Home-based Early Care and Education Providers: Initial Findings from the National Survey of Early Care and Education. OPRE Report #2016-13, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

ⁱⁱ Among the one million home-based programs with paid providers, approximately 118,000 are licensed, regulated, exempt from licensure, or registered - the states use different terms with different definitions. As a group, these 118,000 paid providers can be referred to as “listed”. The NSECE identified 919,000 *unlisted*, paid home-based providers.

ⁱⁱⁱ *Survey sent to 20,883 constituents: 34.3% response rate. 100% FCCP 23% members. 9% Accredited*