Supporting the Early Childhood Sector Through COVID-19
Updated April 8, 2020

Guiding Principles

Ask grantees and other community organizations what they need. To the extent feasible, don’t assume. Especially as we hear about early childhood and social service programs not being able to withstand closure, we need to understand exactly what would help. For example, home visiting and early intervention programs are seeking authorizations to be able to do telehealth visits. NAEYC and Child Care Aware of America, including local AEYC affiliate and child care resource and referral agencies, are sources of information about what EC providers need in the short and long term. NAEYC just released initial data from a survey of providers on COVID 19 impacts.

We need a BOTH/AND strategy between advocacy and more direct responses. Funders should pursue both direct response and advocacy. Don’t pull back on advocacy and organizing, because equitable public investment strategies will yield more support to families and programs than philanthropic investments would ever be able to do. Advocates are working to expand the safety net and to include low income families and ECE providers in public funding responses.

Philanthropy should consider how to target investments to have the most impact, augmenting and supplementing other public and private responses without reducing the responsibility and obligation of the public sector. For example, Head Start grants will continue to flow to providers even if they are closed and they are expected to pay their staffs. They may be able to also provide “to-go” meals to families, but that may vary location to location based on how feasible. Philanthropic support could help address any gaps in nutrition services or new ways to deliver services to families during the crisis. CCDBG may continue to pay providers, even if they are closed. States have many choices about how to implement ongoing payments to providers and how to ease the burden on families through copay waivers and other flexibilities. Philanthropy can work in public-private partnership to encourage good state policy choices and augment public responses.

Flexible Philanthropic Practice is Key. Grantees should be given broad flexibility to redeploy or reset resources from existing purposes to rapid response. Grantees should be able to suspend and/or modify deliverables and deadlines without prolonged renegotiations (perhaps through direct contact with program officers with minimal paperwork). General operating support is an important resource to allow grantees the flexibility to respond to the changing circumstances.

This will be a marathon, not a sprint. Funders need to balance their response to urgent and immediate needs with their ability to sustain support for the field as it rebuilds over time.

Emerging Areas of Need

Based on what we are hearing so far, and keeping in mind the above guiding principles, the following are some areas of need that early childhood funders may wish to consider. Additional or different needs may emerge.

(1) Advocacy around equitable approaches to the public investment response:

WHY? There are immediate Federal public investments planned through the Families First Coronavirus Response Act and other economic stimulus packages. We know from previous financial crises that responses were highly inequitable, and more relief was available to those with voices at the
table. Now more than ever, we need to have advocates and community members fighting for a fair public investment response. If the public resources flow to low-income communities and providers, this will do more to support them than all the philanthropy resources available.

**OPPORTUNITIES:** Early childhood advocates at the national and state levels, state affiliates of the Center on Budget and Policy Priorities, family and medical leave advocates, and community organizers will all be mobilizing. This is an opportunity for early childhood funders to build bridges with funders working across a variety of social safety net issues. Funders can add funding to these efforts – by enhancing grants you already have with trusted grantees. ECFC will try to keep you apprised of more opportunities as they become available.

**(2) Support for home-based providers:**

**WHY?** Home based providers may not be eligible for some of the relief that will come to center-based providers. In addition, home-based child care may be critical to the response that will require smaller groups of contact and for COVID response workers, longer hours and shifts at atypical times.

**OPPORTUNITIES:**

Home Grown Funders Collaborative – This philanthropic collaborative, focused on home-based care providers is, working on COVID responses for home-based child care. Home Grown will support communication and information sharing around the distinct needs of licensed family providers and facility, friend and neighbor providers during this crisis and will support local and national funders in considering how emergency funding can include and support home-based providers.

National Domestic Workers Alliance (NDWA) – Will advocate to be sure that in-home care workers are covered in public relief efforts. NDWA has also established a Coronavirus Care Fund for people who need direct assistance.

**(3) Emergency Child Care:**

**WHY?** Cities and states across the country are concerned about providing child care for first responders, medical personnel, and non-medical personnel critical to response, including cleaning and support employees, and employees at pharmacies, grocery stores, etc. There may be funds available for this from public sources, including emergency appropriations and Child Care and Development Fund flexibilities. In the meantime, this care is specialized and may cost more.

**OPPORTUNITIES:** These will likely be local opportunities, in conjunction with resource and referral agencies and state or local governments. Here are some considerations: Contribute to “hazard pay” for providers who remain open, covering 1.5-2x their usual rate; Pay for cleaning supplies and deep cleaning as needed; Identify, recruit, and pay for telehealth services for those needing trauma related therapy in the short or long-term; Cover the cost of substitutes as needed; Create a grant or loan program to cover costs needed to keep providers in business if they are closed (cover mortgage or rent costs, utility bills, etc.) If you need help connecting to the efforts in your local community, we may be able to help.

**(4) Support for vulnerable families:**

**WHY?** Families, particularly low-income and hourly wage earners, will be the first to feel the pain of COVID-19’s economic impacts and will feel that pain most acutely. Families are already reporting mass layoffs. Essential workers are spending cash on babysitters for school age children that they would normally have used for household expenses. While food may be available through food programs and distribution sites, families face reduced income for household expenses like housing, medication, and transportation. Families with babies who had received formula and diapers through child care are already reporting inability to access these vital resources. Advocates and public officials are working to make the social safety net keep up with these changing times, but at best there will be a lag while new public funds are dedicated, and new distribution channels are developed.

**OPPORTUNITIES:** Local community foundation COVID-19 response funds; local nonprofits that provide emergency financial assistance; utilizing existing grantees to disseminate resources to known, impacted families.
(5) Advocacy & Implementation for Paid Sick Leave and Paid Family and Medical Leave

WHY? This is a new and powerful moment in the movement to secure paid sick days and paid family and medical leave (PFML) for families. Now is the time to harness new policies from the Families First Coronavirus Response Act, to benefit families and look toward permanent policy solutions. While these new paid leave programs are limited, they represent a significant opportunity to get help to eligible workers AND broaden constituencies for future gains in permanent paid leave laws for working families.

WHAT NEEDS TO HAPPEN?

Continued advocacy with both governments and large business to get more comprehensive and equitable coverage of paid leave — Advocates need an infusion of support to get more coverage (e.g. long term medical leave was not covered) and equitable responses into future national COVID legislation, corresponding State initiatives, and directly with large corporations who are not required to provide paid sick leave or paid family leave under the Covid-19 leave law.

Outreach, education and base building — Organizations will need to help low-income families access and utilize the new paid sick and family leave programs. Then, they are working to capture and tell those stories and engage those individuals in the grassroots base for paid sick leave and paid family and medical leave. The beneficiaries of these temporary COVID-19 leave provisions can be added to the base of voters who will fight for more permanent paid sick days and paid family and medical leave policies.

Implementation support — We need to pivot quickly to ensure that crisis programs are responsive and roll out well. The implementation of these new paid leave policies needs to go well to help the most vulnerable people AND to generate stories about what difference can be made if we build broader, more durable paid leave policies.

OPPORTUNITIES:

Paid Leave for All Campaign: Immediate funds (both C3 and C4) are needed to continue the Federal advocacy in COVID response bills, while building up capacity on the education/outreach/base-building on the need for sustained paid sick days law and a social insurance systems to address paid family and medical leave. Steering Committee members in Paid Leave for All are here. Paid Leave for All also has an implementation working group chaired by CLASP and A Better Balance to work quickly with state officials and state advocates in providing technical assistance, outreach to families, and base building. Interested funders can contact Dawn Huckelbridge.

Paid Family and Medical Leave Fund: The New Venture Fund at Arabella Advisors hosts a pooled fund for strategic investment in paid family and medical leave focused on broadening support and new constituencies (with a special matching funding in supporting racial equity and racial justice groups), building bipartisan support, and providing rapid response support to the paid family and medical leave field. Interested funders can contact Shelley Waters Boots.

Arabella Advisors also hosts the donor table for paid family and medical leave, which is open to any donor interested in funding investments in this policy area. Contact Andrew Peters for more information.

Key Resources for EC Funders
...State Information
...Advocacy Information
...Federal EC Program Guidance
...Response & Relief Funds

www.ecfunders.org/covid-19