PERSEVERING THROUGH THE PANDEMIC

Key Learnings about Children from Parents and Early Educators

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Persevering through the Pandemic: 
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EXECUTIVE SUMMARY

Leveraging data collected in late 2020 and early 2021 as part of the Early Learning Study at Harvard (ELS@H), this report captures the ongoing effects of the COVID-19 pandemic on children, families, and early educators in Massachusetts. It extends our prior findings, which underscored the stressors and supportive home-school connections that families and educators experienced during the earliest months of the pandemic. Here, we build upon these and others’ findings (e.g., see RAPID-EC, SEE-LA) by documenting the changes parents and early educators have observed in young children’s development – and especially the challenges posed to children’s social-emotional well-being and skills. We also highlight the sources of strength and resilience that families and young children drew upon during the height of the public health crisis. Our findings include actionable insights that can help guide efforts to mitigate adverse consequences and bolster supports for children and caregivers during the pandemic recovery period.

Now, more than one year into the global health crisis, the devastating, widespread impacts of the coronavirus 2019 (COVID-19) pandemic are abundantly clear. In the United States, over 600,000 people have lost their lives due to COVID-19 and many more have struggled financially in the wake of broad economic disruption. The consequences for families with young children, as well as for early education and care providers, are unambiguous. Many families have struggled to support children at home while balancing everyday responsibilities, navigating public health threats, and coping with economic uncertainty. Early educators, many of them parents themselves, have faced similar challenges, as well as those associated with keeping their programs afloat.

This report contains five snapshots addressing two guiding questions: How are children doing? And what is helping children and families cope with the challenges they have faced over the past fifteen months? Our findings and their implications are summarized here.

The pandemic has negatively affected young children’s academic, social-emotional, and behavioral development, surfacing a clear need for a careful approach to full reopening this fall. Throughout the pandemic recovery period, and especially as growing numbers of children return to school, children will not only need help in rebuilding their core academic skills, but also with those essential social and emotional skills that underlie all learning and interpersonal interaction. While there is legitimate worry about making up potential losses in opportunities to build foundational academic skills and competencies, jumping to closing these gaps without close attention to the social and emotional needs of children will likely only exacerbate any disruption-related behavioral challenges. Taking time up front to ask children about their well-being and providing them with tools to process what they have experienced will make a substantial difference for all areas in the long run.
Educators and schools have played a central role in supporting families through the pandemic and in helping children navigate its complexities. Going forward, it is important to ensure educators have access to the professional supports they need to continue their critical work, including regular opportunities to strengthen their competencies and skills, connection to networks and supports that can aid mental health and well-being, and appropriate living wages and benefits.

In the face of immense challenge and uncertainty, families have drawn strength from their time together. As society reopens, we must reinforce the critical supports that have helped families cope with over a year of stress and strain, including the foundational relationships that are the basis of a functioning society. Policies and practices that enable families to build and sustain relationships with each other and with others – for example, paid family leave or flexible scheduling in work and child care – will result in a stronger and healthier future for us all.

Note: We use “early educators” as a broad designation for early childhood professionals in a variety of roles: teachers, coaches, specialists, supervisors, and owners or directors.
The biggest challenges are trying to get our kids to be able to interact with other kids. Before our school started in-person learning in October, they only saw any other children for an hour or two every other week at a distance.

What will be the lasting effects from the disruption in their schooling? Is distance learning going to be enough? Are they going to be emotionally changed from the need to stay away from loved ones and friends?

My child was falling behind in her reading skills before this and even with additional help she hasn’t been able to catch up. I don’t believe virtual learning is the cause however it makes it that much more stressful.

The biggest challenges are trying to get our kids to be able to interact with other kids. Before our school started in-person learning in October, they only saw any other children for an hour or two every other week at a distance.

Parents had widespread concerns about the pandemic’s impact on their children’s academic and social-emotional development.

58% of parents reported that their child’s academic development had been negatively impacted by the pandemic (n = 1262)

61% of parents reported that their child’s social-emotional development had been negatively impacted by the pandemic (n = 1265)
Early educators reported changes in children’s behaviors in their settings, but not all changes were negative.

53% of early educators noticed changes in children’s behaviors during the pandemic ($n = 773$)

Among early educators noting behavioral changes, many reported increases in a range of maladaptive behaviors, including:

- Temper tantrums: 39%
- Regression in self-help skills: 39%
- Trouble switching activities: 38%
- Sadness or crying: 36%
- Difficulty separating from parents: 36%

The children need more attention and are more anxious. They need more reassurance of their daily schedule. Separation anxiety is worse.

Children quickly adapted to changes in play due to COVID and will tell each other they can’t have play dates, etc. because of the virus.

Children miss playing with their friends; we have to keep them distanced at all times. They miss having more materials and toys to use and the fact that some learning areas are closed (no free choice anymore).

Smaller classroom size means more attention and less distraction/crowding. Children who were prone to tantrums and lashing out at others have become more calm and focused.
Most parents felt their child’s educator and school were helpful, supportive partners during the pandemic.

87% of parents were satisfied with their child’s school’s response to the pandemic ($n = 1243$)

- 85% of parents agreed their child’s educator and school were doing their best to support their child ($n = 1242$)
- 89% of parents agreed their child’s educator cared about the success of their child ($n = 1237$)
- 85% of parents agreed their child’s school prioritized their child’s safety ($n = 1236$)

The school is very understanding and supportive, and we were able to get free meals over the spring and summer when my husband was out of work. We were able to use EBT cards to help with groceries (something we did not have before the pandemic).

The hybrid model is working well for us. The kids do in-school learning from about 9am-1pm, 4 days/week, which gives me time to take care of my responsibilities. They have Zoom check-ins with their classes at 2pm. Wednesdays are fully remote. It has been a good balance.
My children are much more aware about good hygiene practices, making sure that play areas only have a small number of children playing there and reminding their peers to keep their noses covered while wearing their mask.

WHAT IS HELPING CHILDREN AND FAMILIES COPE?
EARLY EDUCATORS HELP YOUNG CHILDREN NAVIGATE THE PANDEMIC

Early educators have helped children navigate and process the pandemic.

On average, early educators spent 57 minutes per day introducing and reinforcing hygiene protocols with children (n = 679)

- 76% of educators reported children talking about germs (n = 667)
- 70% of educators reported children remarking on safety measures like handwashing or mask wearing (n = 667)
- 56% of educators reported children expressing sadness about not seeing friends or family (n = 667)

Children know about the virus and repeat things they hear. From being home for several months to getting back into a routine, being social with peers is difficult.

Many children are very aware of what is going on in the world with COVID and are very cognizant of health protocols, often to the point of obsession or worry.

My children are much more aware about good hygiene practices, making sure that play areas only have a small number of children playing there and reminding their peers to keep their noses covered while wearing their mask.
WHAT IS HELPING CHILDREN AND FAMILIES COPE?
FAMILY TIME IS A SOURCE OF STRENGTH

In the face of the pandemic’s numerous challenges, families have drawn strength from increased time with each other.

82% of parents reported that their family spent more time together during the pandemic than before (n = 1340)

51% of parents reported that their family spent more time outside during the pandemic than before (n = 1338)

When asked about their “biggest help” during the pandemic, many families listed strong family bonds:

- Each other’s support and love is a biggest strength for my family.
- "We have extra time together as a family."
- "We love and care for one another; that is always a guiding force."
- "Just allowing room for extra love and support for each other."
- "The added time spent does make us all a little more on edge but overall I think it has helped to strength our bond/family unit/gratitude for each other."
- "Being together and enjoying our time together is wonderful."
- "Ourselves. We stick together and help each other."
- "Time at home together and our strong family bond."
METHODOLOGY

Data come from two online surveys – one for parents and one for early educators – conducted in late 2020 and early 2021 (as illustrated in the following figure).

Distribution of dates when surveys were taken, by survey type

Parent Survey

The parent survey was conducted with parents/guardians of children participating in the broader Early Learning Study at Harvard (ELS@H), a population-level, longitudinal study of young children and their early education and care experiences. Now in its fourth year, ELS@H has involved 3,665 children across the state of Massachusetts. The ELS@H sample was constructed in 2017 through three primary methods. First, a household survey took place in over 95,000 households in randomly selected Census block groups across the state in order to identify three- and four-year-old children. Second, children were recruited to the sample if they were in the same early education and care setting as children identified through the household sample. Third, children were recruited if they were in an early education and care setting randomly sampled from administrative records provided by the Massachusetts Department of Early Education and Care.
METHODOLOGY

This survey took place in ELS@H’s fourth year between November 2020 and January 2021. It included an extensive set of questions about parents themselves and their child’s experiences during the pandemic, as well as items about their socioeconomic situation, household dynamics, and typical daily life. In total, 1,434 parents of 1,481 children completed this survey (representing 40% of all 3,665 ELS@H children). These 1,481 children were from diverse sociodemographic backgrounds (11% Asian and Pacific Islander, 10% Black, 17% Latinx, and 79% White) and were on average 7.3 years old (SD = 0.6) at the time of survey completion.

Early Educator Survey

Early educators were invited to participate in the survey for one of two reasons: either they or someone in their setting had cared for a participating ELS@H child in the first or second year of the study when children were three or four years old, or they were randomly selected from a list of licensed family child care providers from the Massachusetts Department of Early Education and Care (EEC). The survey included questions about staff background characteristics as well as questions about how the COVID-19 pandemic may have influenced their employment status, operations at their program, and their concerns for themselves or their families. We sought responses from educators in community-based child care centers, family child care, Head Start, and public school prekindergarten programs. In some cases (e.g., in certain agencies or districts), we were required to receive administrative permission before reaching out to individual educators (n = 105 agencies). Following this administrative outreach effort, the survey was sent to program-level contacts in 1,705 early education settings (900 [53%] of which were randomly selected from EEC lists). Invitations included requests for the program-level contacts to take the survey and to share that link with any educators of three- and four-year-olds in their program. After shareable links were sent out, personalized survey links were also sent to the individuals who had responded to a similar survey we conducted in the previous year but had not yet responded to this new effort. In total, 893 early educators associated with 406 programs completed the survey (representing 24% of contacted programs). Of these 406 programs, 139 were community-based centers (34%), 192 were family child cares (47%), 42 were Head Starts (10%), and 33 were public school prekindergarten programs (8%). On average, 2 educators per provider completed the survey (SD = 2.4, Min = 1, Max = 20). The majority of educators in the survey were White (79%), with 12% identifying as Latinx, 7% as Black, and 4% as Asian and Pacific Islander. Average years of experience as an early educator was 9.3 years (SD = 3.0), and 69% of the sample had a bachelor’s degree or higher.