

**The South Carolina Early Childhood Advisory Council and the United Way Association of South Carolina want to hear how the COVID-19 pandemic has impacted your family and your ability to get child care for your young children. We want to learn how we can "build it back better," when this crisis is over.**

**This survey takes about 10 minutes to complete, and your participation is voluntary. Your responses will not impact your ability to receive services at any time. Your responses will never be reported; they will be combined with other responses for reporting.**


**To thank you for completing the survey, you can enter a drawing for 1 of 10 \$200 Visa gift cards. To enter, you must provide your email address at the end of the survey when prompted. This survey will close on Sunday, August, 9, 2020 at 11:59PM. You will only be allowed to respond once.**

**If you have any questions regarding this survey, please contact Chelsea Richard ([crichard@scfirststeps.org](mailto:crichard@scfirststeps.org); (803) 734-1620). For more information about the South Carolina Early Childhood Advisory Council, visit [earlychildhoodsc.org](http://earlychildhoodsc.org).**

\* 1. Do you live in South Carolina and are the parent or primary caregiver of at least one child under age 6?

Yes

No



2. Thank you for your interest. We are currently only looking for feedback from parents of young children in South Carolina. If you are interested in receiving future surveys, please leave your email address here.



\* 3. Using the drop-downs, tell us how many people, including yourself, in your household are...

Under 6 years old	<input type="text"/>
6 - 11 years old	<input type="text"/>
12 - 17 years old	<input type="text"/>
18 years or older	<input type="text"/>

Moving forward, when we say "young children," we are referring to the {{ Q3.R1.C1 }} child/children under age 6 who live in your home.

March 13, 2020 was the day Governor Henry McMaster declared a "State of Emergency" related to the COVID-19 pandemic in South Carolina.

\* 4. **Before March 13, 2020**, what was the main type of child care your family used for the young children in your home? **Choose one.**

- child care center/daycare/preschool
- Head Start
- public school
- family child care (outside of your home; paid)
- in-home care (nanny/sitter; paid)
- myself/loved ones (family/friend; unpaid)
- I don't know/I'm not sure
- Other (please specify)

5. You answered "{{ Q4 }}" to the question about where your young children received care before March 13, 2020. Did they receive free or reduced price tuition?

Yes

No

Don't know/not sure

6. **Before March 13, 2020**, did your family receive any of the following supports for free or reduced child care costs? **Select all that apply.**

- SC Voucher administered through Department of Social Services
- SC Voucher for Children of Essential Workers administered through Department of Social Services
- Head Start
- Public School
- First Steps 4K
- Free or reduced tuition provided from child care provider directly
- Other scholarship or voucher
- Provided through my employer
- Don't know/not sure
- None of the above
- Other (please specify)

\* 7. **Since March 13, 2020**, has your child care arrangement changed for your young children?

Yes

No

\* 8. What is the main type of child care arrangement your family uses **today** for the young children in your home? **Choose one.**

- child care center/daycare/preschool
- Head Start
- family child care (outside of your home; paid)
- in-home care (nanny/sitter; paid)
- myself/loved ones (family/friend; unpaid)
- summer program/camp
- I don't know/I'm not sure
- Other (please specify)



9. You answered "{{ Q8 }}" to the question about where your young children are receiving care today. Are your children currently receiving free or reduced price tuition?

- Yes
- No
- Don't know/not sure

10. Currently, does your family receive any of the following supports for free or reduced child care costs? **Select all that apply.**

- SC Voucher administered through Department of Social Services
- SC Voucher for Children of Essential Workers administered through Department of Social Services
- Head Start
- First Steps 4K
- Free or reduced tuition provided from child care provider directly
- Other scholarship or voucher
- Provided through my employer
- Don't know/not sure
- None of the above
- Other (please specify)

**\* 11. Have you or another parent/caregiver in your household experienced any of the following since March 13, 2020? Select all that apply.**

- Telecommuting/working from home while caring for children
- Alternating work hours with someone in my household in order to provide child care
- Working outside of normal business hours in order to provide child care
- Working fewer hours in order to provide child care
- Taking paid leave in order to provide child care
- Taking unpaid leave in order to provide child care
- Working outside of the home and bringing children to work with me
- None of the above

\* 12. Is the child care arrangement you have **today** for your young children the **ideal solution** for your family's needs **right now**?

Yes

No

\* 13. You indicated your child care arrangement today is not the best solution for your family's needs. What type of child care solution for your young children would be best right now? **Choose one.**

- child care center/daycare/preschool
- Head Start
- public school
- family child care (outside of your home; paid)
- in-home care (nanny/sitter; paid)
- myself/loved ones (family/friend; unpaid)
- summer program/camp
- program at my workplace
- Other (please specify)

14. Use this space to record any additional comments about your ideal child care solution and why it differs from your arrangement today.



\* 15. When thinking about your child care needs for the next three months, how concerned are you about the following?

	not at all concerned	slightly concerned	somewhat concerned	moderately concerned	very concerned
My ideal child care arrangement won't be available/open.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family won't be able to afford my ideal child care arrangement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family will not have transportation to access available child care options.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I will not be able to return to work/school fully with available child care options.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My work/school hours are not compatible with available child care options.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child and family will be more likely to be exposed to COVID-19.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\* 16. **Fill in the blank.** It is \_\_\_\_\_ for me to find available child care options in my area.

- Very easy
- Somewhat easy
- Neither easy nor difficult
- Somewhat difficult
- Very difficult

17. Please indicate what sources you rely on to find available child care options. **Select all that apply.**

- My employer
- Friends/family
- Local media (newspaper, TV)
- Social media
- Internet search
- A certain website (please specify)

\* 18. How much you agree with the following statements?

strongly disagree      slightly disagree      neither disagree nor agree      slightly agree      strongly agree      not applicable

The COVID-19 pandemic has disrupted my home and family life.

I worry about the effects of the COVID-19 pandemic on my ability to meet my family's basic needs.

I worry about the effects of the COVID-19 pandemic on my mental health.

I worry about the effects of the COVID-19 pandemic on my young child(ren)'s mental health.

I worry my young child(ren) is (are) missing out on important developmental opportunities (socialization and learning) because of the COVID-19 pandemic.


Because my child has a special health care or educational need, I worry my young child(ren) is (are) not receiving adequate support during the COVID-19 pandemic.

19. Would you say your current level of stress or anxiety as a parent/caregiver is...

- much lower than usual
- somewhat lower than usual
- about the same as usual
- somewhat higher than usual
- much higher than usual





20. Thinking over the past month, were you...

- working full-time
- working part-time
- working but not for pay
- not working but looking for work
- not working and not looking for work

21. You indicated you worked part-time in the past month. How many average hours did you work per week?

22. What is the main reason you did not work for pay this past month?


- taking care of children or family
- going to school/a training program
- off-season
- didn't get any hours
- contract/temporary work ended
- on family or maternity leave
- temporarily unable to work for health reasons
- on layoff/furlough
- retired
- disabled
- Other (please specify)

23. You indicated you were going to school/a training program in the past month. How many hours did you do that per week on average?

24. You answered "{{ Q22 }}" as the main reason you did not work last month. Was this related to COVID-19?

Yes

No



25. You indicated that you were working at least part-time in the past month. Are you considered an essential worker?

Yes

No

Don't know/not sure

26. What sector do you work in?

- Essential services (examples: health care workers, first responders, commercial transport, critical state government operations, childcare providers)
- Individuals involved in making sure the public has access to essential services (examples: food, water, gas, utilities, sanitation, medical, child care)
- Critical infrastructure operations (examples: communications, national guard mobilization, transportation)
- Other (please specify)

27. For the {{ Q3.R1.C1 }} child/children under age 6 in your home, use the dropdown menus to select how many are...

Under 1 year old (<12 months old)

1 year old (12 to <24 months old)

2 years old (24 to <36 months old)

3 years old (36 to <48 months old)

4 years old (48 to <60 months old)

5 years old (60 to <72 months old)

28. How are you related to the young children in your home? **Select all that apply.**

- Parent (include biological, step, or adoptive parent)
- Grandparent
- Foster parent or guardian
- Sibling (include biological, step, and adoptive sibling)
- Other relative
- Not related in any way
- Don't know / Not sure
- Other (please specify)



\* 29. What South Carolina county do you live in?

\* 30. Which race/ethnicity best describes you? (Please choose only one.)

- American Indian or Alaskan Native
- Asian / Pacific Islander
- Black or African American
- Hispanic
- White / Caucasian
- Prefer not to answer
- Multiple ethnicity / Other (please specify)

31. What is your annual household income? If you prefer not to answer, put N/A.

\* 32. How old are you?

- Under 18
- 18-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65+
- Prefer not to answer

33. Please use this space to share anything else about your family's child care needs.

Your email address will only be used by the South Carolina Early Childhood Advisory Council and the United Way Association of South Carolina for the purposes described below. We will not share your email address with anyone else.

34. To enter into the drawing for 1 of 10 \$200 Visa gift cards, provide your email address here. If you are chosen as a winner, you will be contacted by email in early August.

35. We are currently recruiting parents/caregivers with young children to participate in future focus groups or surveys. Compensation for participation will vary.

If you are interested in being considered for participation, enter your email address here.