Amidst the ongoing COVID-19 pandemic, residents of Connecticut strive to move on with their lives within an unpredictable economy and ever-changing safety protocol. Parents of young children, who are only now eligible to receive the COVID-19 vaccine, have felt left out of recovery efforts due to their continued need to physically distance themselves from other people to ensure the safety of their children and frequent child care and school closures that impact parents’ ability to work. In Connecticut and countrywide, the pandemic cracked an already strained child care industry. It forced many child care providers running on razor-thin margins to close their doors permanently.

The 2022 State of Early Childhood report by Connecticut Voices for Children (CT Voices) examines the impact of the ongoing pandemic on Connecticut’s early care and education (ECE) landscape. In addition to reviewing data related to availability, enrollment, and funding, this year’s report uses quantitative and qualitative data to shine a light on the needs of immigrant and refugee families navigating Connecticut’s ECE system, support for these families, and policies necessary to support further immigrant and refugee families seeking child care. For various reasons, immigrant and refugee families experience being locked out of public systems and services, compounding the strain parents of young children have experienced during the pandemic. Connecticut’s population of children with at least one foreign-born parent is steadily growing, so it is critical that policymakers remove barriers to accessing ECE to ensure that all children in Connecticut enter school ready to learn and all adults in Connecticut who want to participate in the workforce can do so.

Data about ECE across Connecticut

- **Connecticut’s number of licensed family child care homes (FCCs) has steadily decreased over time, and Connecticut’s number of licensed ECE centers sharply decreased during the pandemic.** The number of licensed ECE centers decreased by 12.4 percent (173 centers) between 2021 and 2022. The number of licensed FCCs decreased by one percent (20 homes) during the same period, continuing a steady decline that CT Voices has tracked since 2002.

- **Connecticut’s number of child care slots has decreased throughout the pandemic.** We define slots as the number of filled and vacant ECE spaces. Between 2021 and 2022, the number of infant and toddler slots available declined by 1,770 at licensed and exempt centers and care homes and by 284 at accredited care facilities. The number of available preschool slots fell by 2,554 at licensed and exempt centers and care homes and 6,673 at accredited care facilities.

- **Pandemic-related expansions to Care 4 Kids have helped many families, but not enough to offset closures and disruptions to other State- and federally-funded programs.** Between 2020 and 2022, Care 4 Kids served 1,002 more infants and toddlers and 997 more preschoolers. These increases are likely driven by shifts in eligibility requirements, which expanded to include families making at or below 65 percent of the state median income (compared to a pre-pandemic limit of 50 percent). However, closures and disruptions to state-funded centers, School Readiness programs, Head Start programs,
Even Start programs, and Smart Start programs resulted in 360 fewer infants and toddlers receiving care through these programs and 6,383 fewer preschool-aged children receiving care through these programs between 2020 and 2021. These closures are especially likely to harm immigrant families, as federal regulations make Care 4 Kids inaccessible to many of these families.

Data about Immigrant Families across Connecticut

- **Connecticut’s immigrant families come from diverse origins.** 14.6 percent of Connecticut’s population was born outside of the United States, and over half are naturalized U.S. citizens. Forty-five percent of Connecticut’s immigrant and refugee population come from Latin American countries, 23 percent from European countries, and 24 percent from Asian countries. Since 2010, a larger percentage of immigrants are coming to Connecticut from Asian countries, while a declining percentage of immigrants come to Connecticut from European countries.

- **A greater percentage of young children and residents born outside of the U.S. live in poverty than the state average, and many towns with high percentages of young children living in poverty and children with foreign-born parents do not have ECE programs designed to serve these families and limited child care options.** Across the state, 14.5 percent of children under the age of six and 11.1 percent of residents born outside of the U.S. live in poverty, compared to the state average of 9.8 percent. 27.7 percent of children under the age of six in Connecticut have at least one parent born outside of the U.S. Programs like Head Start and Even Start are designed to serve families experiencing poverty and families who don’t speak English as a first language, but they are not available in almost half of Connecticut’s municipalities that have above-average numbers of children with a parent born outside of the U.S.

- **Connecticut’s immigrant residents are more likely to rely on shared forms of transportation than residents born in the U.S., which may impact child care needs.** In particular, Connecticut’s immigrant residents who are not naturalized U.S. citizens are more likely than residents who are naturalized U.S. citizens and residents born in the U.S. to carpool, utilize public transportation, and walk to work. They are less likely to drive alone to work and to work from home.
Interviews about ECE and Immigrant and Refugee Families and Providers

To better understand the needs of immigrant and refugee families seeking ECE and immigrant and refugee child care providers, CT Voices conducted interviews with immigrant parents, immigrant providers, and advocates serving immigrant and refugee communities. The following themes emerged from our conversations:

• Information about ECE is not readily available for immigrant and refugee parents, and the enrollment process is complex. Language barriers, complex regulations, lack of knowledge, fear or mistrust of government, and the need to complete multiple applications contribute to immigrant and refugee parents’ struggles to access ECE.

• Language barriers make day-to-day communication between parents and providers challenging. Parents expressed that finding providers who speak their language is a priority.

• There is a mismatch between care hours and work hours. Substantial portions of low-income, Latino/a/x, and Black parents work nonstandard hours. Many parents in this situation are forced to create a complex combination of care systems which tend to be less stable and may result in missed work. It can also result in additional costs to parents.

• Families lack easy transportation to and from care. Connecticut’s data show immigrant and refugee parents are less likely to rely on a private car to get to work and child care. Because of this, distance to child care is a priority for many parents.

• Immigrant and refugee residents who want to start FCCs face barriers. Navigating land-use/zoning laws and the complexity of licensing are both significant barriers to becoming a child care provider.

• Families and providers face discrimination based on immigration status. Discrimination against immigrant families may result in deficit-orientated thinking, which staff care for which children, and providers charging immigrant families fees that they don’t charge to other families. Discrimination against immigrant providers impacts hours, access to benefits, and which staff care for which children.

• Immigrant parents need to know their children and information are safe. Parents need to know that
Immigration and Customs Enforcement (ICE) officers cannot come onto campus without a warrant and that providers will not share their status with ICE. They also need to know that sharing their information with the State will not place their families at risk.

- Parents want to send their children to high-quality learning environments that meet their children's needs. Parents from immigrant and refugee communities want teachers who can connect to their backgrounds and build relationships with them and their children. Trauma-informed care is also especially important for children from immigrant and refugee families. Parents also expressed concern over broader quality issues such as staffing ratios, cleanliness, play space, and curriculum.

- Immigrant and refugee parents would benefit from spaces to support one another. Community spaces like schools, clinics, and libraries should provide space and time for families from immigrant and refugee communities to come together, share knowledge, and support others struggling to access appropriate ECE.

**Policy Recommendations**

1. **Implement policies that move Connecticut toward a system of universal access to affordable ECE.** These policies include increasing Care 4 Kids eligibility to all federally-allowed families, providing State funding to create a Care 4 Kids sister program for low-income families who are not allowed to receive federally-provided funding and middle-income families, and capping co-pays to ensure no family pays more than seven percent of their income on ECE.

2. **Establish a state-level child tax credit.** Connecticut is the only high-cost-of-living state with an income tax that does not adjust for family size or child care expenses. Connecticut lawmakers should make the one-year child tax rebate permanent.

3. **Simplify the ECE application process and the availability of assistance for applicants.** Additionally, applications should contain information regarding children’s right to access ECE and that it is safe to apply for care and access care.

4. **Ensure the accessibility of services and information in multiple languages.** The State should help FCC and center provider networks increase the number of translators and the number of events in a year that provide translation between teachers and parents.
5. **Expand Head Start and Even Start.** Head Start programs are not equitably distributed around the state, and many have closed due to the pandemic and staff shortages. The State should determine an ideal ratio of children living in poverty in a community to program capacity and work to expand programs to meet that ratio. Additionally, Even Start suspended programs during 2021 and is only located in three towns. Even Start is not located in municipalities with the largest immigrant and refugee populations.

6. **Increase the number of providers who are people of color and providers who are immigrants.** Policymakers have worked hard to diversify the Kindergarten-12th grade teacher population, and extending many of these policies to the ECE workforce could prove fruitful. Example policies include extending higher education scholarships in fields related to early care and creating nontraditional pathways to certification.

7. **Increase access to training where educators learn trauma-informed practices and culturally honoring practices.** These trainings already exist, but offering them at a reduced or no cost, on a varying schedule, and with language support would better meet the needs of providers.

8. **Increase compensation for ECE workers.** Providers and staff need fair pay and access to benefits. Early care is essential infrastructure that allows families to work, but it is not yet fiscally supported by the State and federal governments as such. Current staffing shortages are due, at least in part, to the systemic underpayment of the ECE workforce.

9. **Increase and create parity in Care 4 Kids reimbursement rates.** Policymakers should set of goal of increasing Care 4 Kids reimbursement rates to the 90th percentile so that families using Care 4 Kids subsidies can access care at 90 percent of programs in their areas. Connecticut should further equalize the subsidy rates between centers and FCCs.

10. **Augment the flawed market rate system used by the federal government.** The federally mandated market rate system does not reimburse providers for the actual cost of care. Connecticut should create a system to supplement this under-compensation.

11. **Ensure input from immigrant and refugee families at policymaking tables.** Authentic representation of immigrant and refugee voices in policymaking requires in-depth and ongoing collaboration with parents, community members, and experts as policymakers write and implement laws, regulations, and curricula.

12. **Create spaces for immigrant and refugee families to support one another.** Neighborhoods leaders, municipal leaders, and State leaders all have a role to play to help ensure that immigrant and refugee families have safe, accessible, secure places they can meet and offer each other support. Policymakers should work to ensure the residents they represent know about these spaces, have transportation to these spaces, and have child care while they meet.