

The Wellbeing of Child Care Teachers Before and During the Coronavirus Pandemic: Longitudinal Evidence from Virginia

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The coronavirus pandemic (COVID) led to growing recognition of the importance of child care for families and for the economy. It also highlighted how the low compensation, difficult working conditions, and high levels of stress and depression among early educators—longstanding challenges for child care teachers—compromise the sector. Labor force data shows the child care workforce has not returned to its pre-COVID size,¹ while survey data suggests very high levels of teacher burnout and exits.² However, lack of systematic and longitudinal data about early educators makes it difficult to know just how wages and measures of teachers' wellbeing changed during COVID relative to already challenging pre-pandemic conditions.³

This brief addresses this gap. Using unique longitudinal data from Virginia, we describe pre-COVID levels of compensation, financial insecurity, and psychological wellbeing among child care teachers, and track how they changed over a three-year period (2019-2022).






SUMMARY

- The coronavirus pandemic (COVID) highlighted the essential role the child care sector plays for both families and the economy. It also exacerbated existing challenges for early educators, including low compensation, difficult working conditions, and high levels of stress and depression.
- This brief uses survey data from over 700 teachers at 100 child care centers in Virginia to track changes in their compensation, financial insecurity, and psychological wellbeing from pre-COVID (May 2019) to May 2022.
- Teachers' real wages declined from 2020 to 2022 due to inflation. Benefits (e.g., health insurance, retirement) were not accessible to most teachers surveyed at any point.
- Concerns about finances, difficulties affording essential expenses, and food insecurity declined at the peak of COVID disruptions but exceeded pre-COVID levels in 2022.
- Rates of depression increased sharply from 2019 to 2020 and remained elevated.

ABOUT THE DATA AND SAMPLE

We track teachers at 100 publicly funded child care centers that participated in Virginia’s Preschool Development Birth through 5 Grant (PDG B-5) initiative in its pilot year (2019).⁴ We use survey responses from the over 700 teachers employed at these centers at any of four time points: pre-COVID (May 2019), at the height of COVID disruptions (May 2020), a year into COVID (July 2021), and two years after COVID began (May 2022).⁵

Table 1: Teacher characteristics, 2019.

ABOUT THE SAMPLE		
	71%	Lead teacher
	24%	Assistant teacher
	5%	Floater
	<1%	Other role
	20%	Black, non-Hispanic
	16%	Hispanic
	54%	White, non-Hispanic
	10%	Other or multiracial, non-Hispanic
	97%	Female
	37 years	Average age
	25%	Bachelor’s degree or higher
	9 years	Average years working in early childhood education
	12%	Educators with less than one year of teaching experience

Note: Based on responses from 718 teachers.

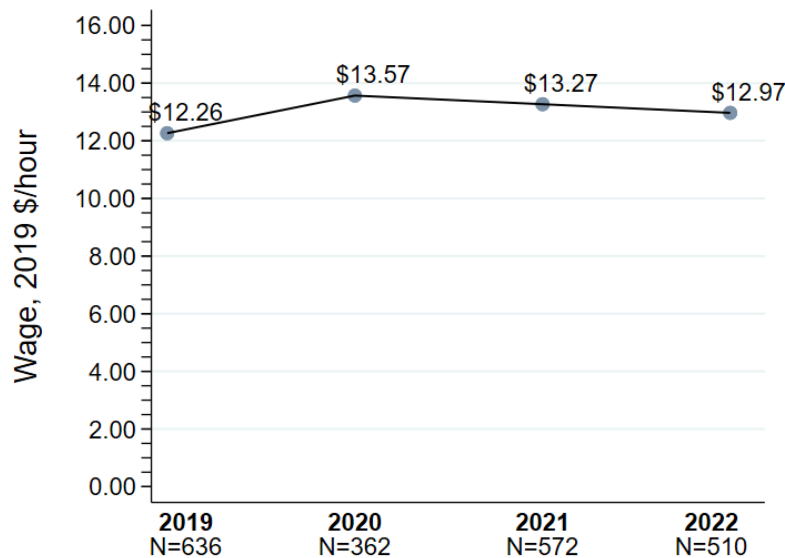
Table 1 shows the characteristics of our sample of teachers. Most survey respondents (71%) were lead classroom teachers, while 24% were assistants. Teachers reported an average of 9 years of experience working in early childhood education, though 12% were in their first year. Teachers were diverse in terms of race/ethnicity.

FINDINGS

Teachers' real wages declined from 2020 to 2022.

Hourly wages grew from an average of \$12.26 in 2019 to \$14.80 in 2022, an increase of about 21% over 3 years. However, once we adjust for inflation, we find that real wages actually declined in value from 2020 to 2022 (Figure 1). Over the full 3-year period (2019-2022), real wages increased just \$0.71 per hour, equivalent to a 6% increase.

Figure 1: Average teacher hourly wage in 2019 real-dollar value, 2019-2022.

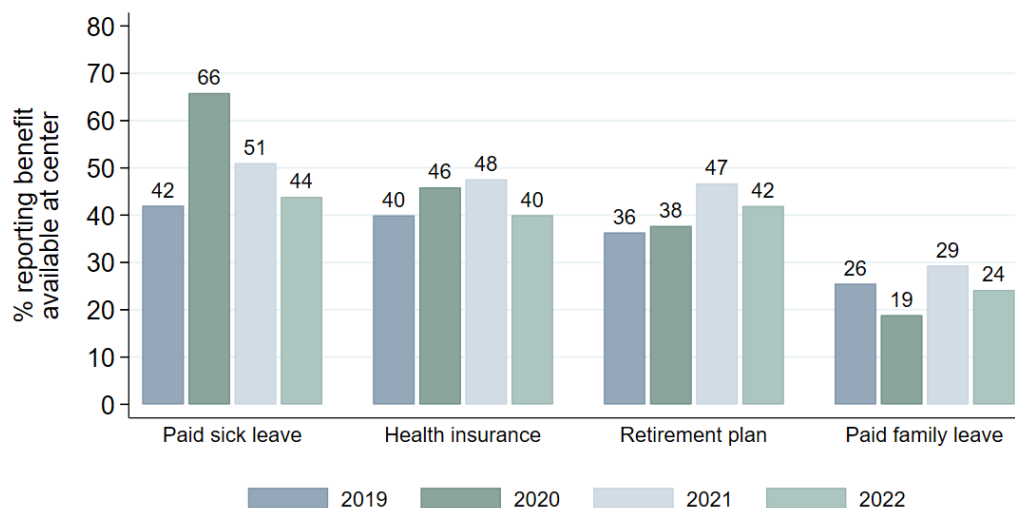


Note: Values were indexed to their 2019 real-dollar value based on the Consumer Price Index for All Urban Consumers (CPI-U). Wages from 2020 were collected in fall 2020 and only reflect responses from teachers who took both the spring and fall 2020 surveys.

Few teachers at child care centers had access to benefits pre-COVID, and this remained the case in 2022.

In May 2019, paid sick leave, health insurance, and a retirement plan were available to less than half of teachers surveyed (Figure 2). Only around a quarter (26%) of teachers reported that paid family leave was available through their employer. Although some of these benefits increased in the early days of COVID, in the most recent data they look similar to pre-COVID levels.

Figure 2. Teachers reporting that benefits were available at their place of employment 2019-2022.



Sample sizes: 2019: 388, 2020: 281, 2021: 351, 2022: 310

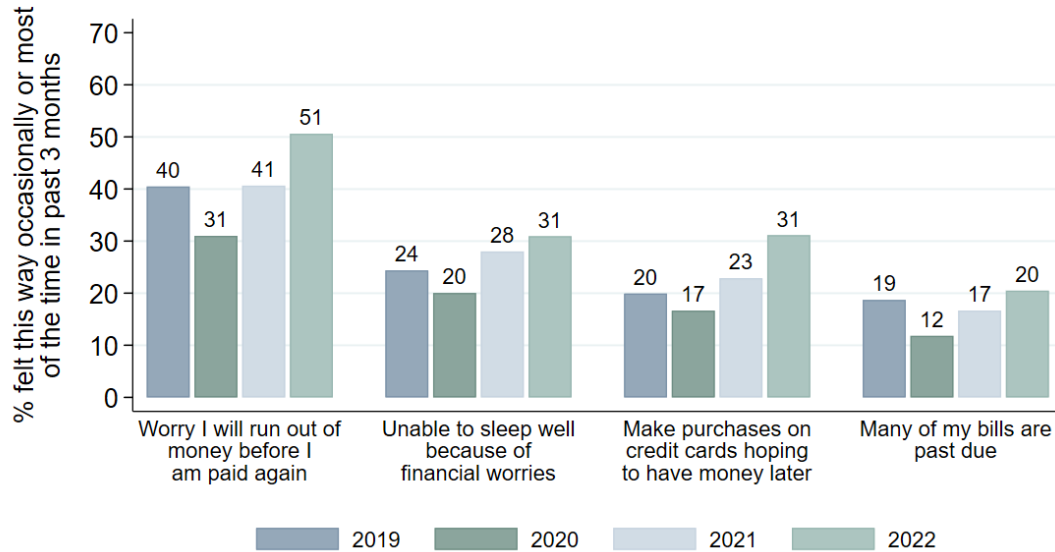
Notes: Samples were limited to teachers who responded to all survey items about benefits available at their site in a given year. Benefit data from 2020 were collected in fall 2020 and reflect only responses from teachers who took both the spring and fall 2020 surveys.

Financial concerns, difficulties affording essentials, and food insecurity declined at the peak of COVID, but by 2022 exceeded pre-COVID levels.

Each year, the survey asked teachers how frequently they experienced concerns related to financial insecurity.⁶ In 2019, 40% of teachers reported that they worried about running out of money before being paid and around a quarter (24%) reported being unable to sleep well because of financial concerns (Figure 3). About 1 in 5 teachers made purchases on credit cards because they did not have cash on hand and had past due bills.

Teachers reported lower levels of financial concerns in at the peak of COVID disruptions (2020) than in 2019. By 2022, however, rates of financial concern across all four survey items surpassed pre-COVID levels. In 2022, over half (51%) of teachers reported that they worried they would run out of money before being paid again and almost 1 in 3 (31%) reported that they were unable to sleep due to financial concerns and made purchases on credit cards because they did not have cash on hand.

Figure 3. Teachers reporting financial concerns, 2019-2022.

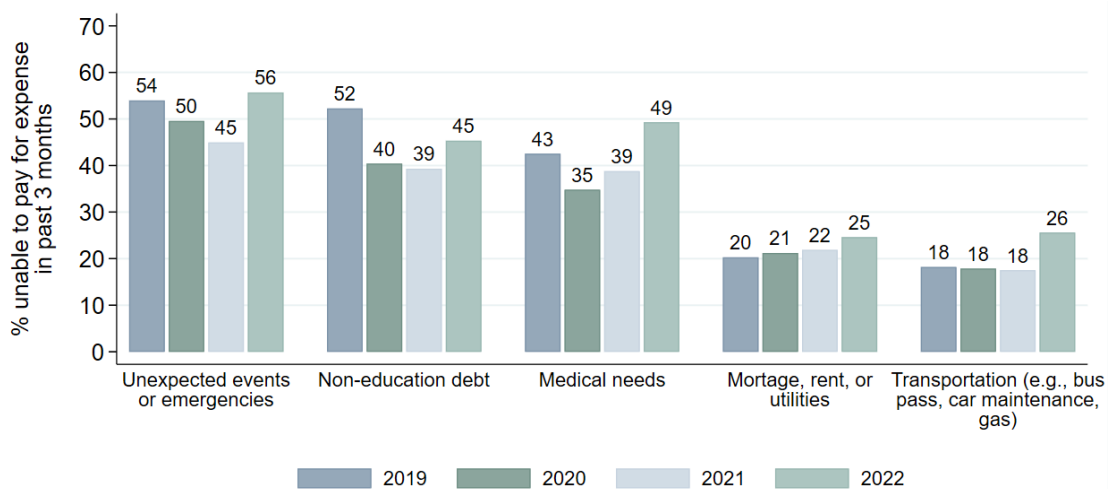


Sample sizes: 2019: 652, 2020: 474, 2021: 546, 2022: 488

Note: Samples were limited to teachers who answered all financial worry survey items in a given year.

The survey also asked teachers about difficulties affording essential expenses. In 2019, more than half (54%) of teachers could not afford to pay for unexpected events or emergencies; about the same percentage (52%) indicated they were unable to pay for non-educational debt; and 43% of teachers surveyed could not afford medical expenses (Figure 4). As with financial concerns, a smaller share of teachers reported that they were unable to afford unexpected events or emergencies, non-educational debt, and medical needs in 2020 than pre-COVID, but by 2022 a larger share of teachers reported being unable to afford these essential expenses, as well as housing and transportation costs.

Figure 4. Teachers unable to afford essential expenses, 2019-2022.

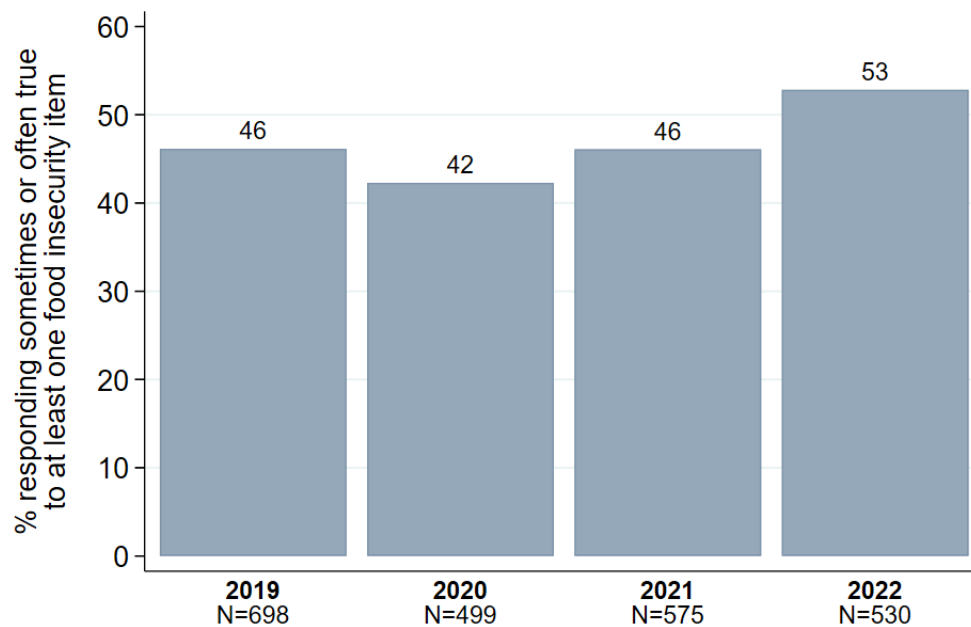


Sample sizes: 2019: 567 to 648, 2020: 345 to 443, 2021: 436 to 519, 2022: 406 to 484

Note: Item sample sizes exclude teachers who reported that an expense was not applicable to them.

We used three survey items to assess the prevalence of food insecurity among surveyed teachers.⁷ Food insecurity was common pre-COVID, with nearly half (46%) of teachers responding “sometimes true” or “often true” to at least one food insecurity item in 2019. Food insecurity declined in 2020, but surpassed pre-COVID levels in 2022 (Figure 5). Teachers were more likely to respond both “sometimes true” and “often true” to all 3 of the food insecurity measures on the 2022 survey than in previous years. More than half (53%) of teachers responded “sometimes true” or “often true” to one or more measures of food insecurity in 2022.

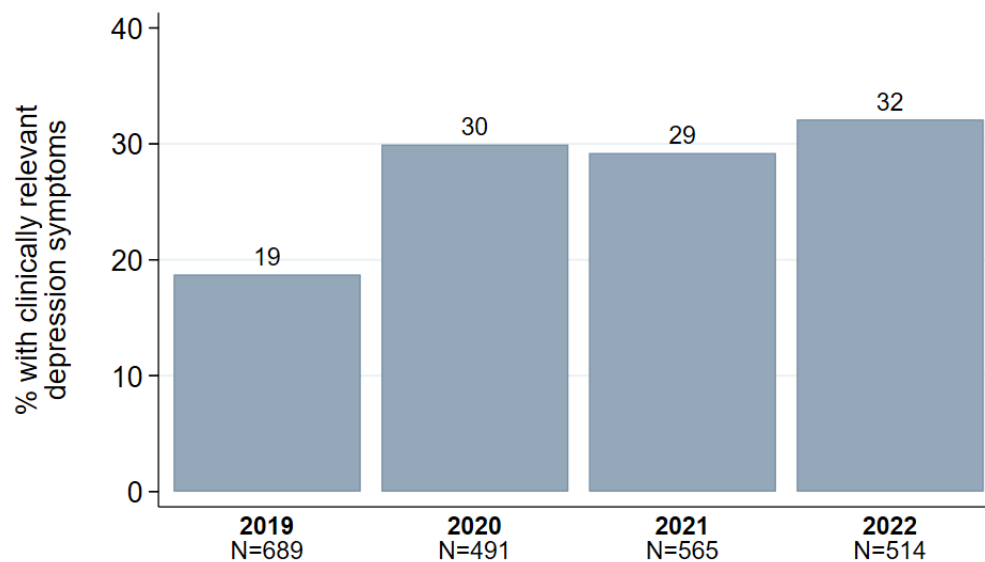
Figure 5. Teachers reporting at least one sign of food insecurity, 2019-2022.



Rates of depression increased sharply from pre-COVID levels.

We asked teachers to rate how often they experienced depressive symptoms across 7 items of the Center for Epidemiological Studies Depression scale (CESD),⁸ a commonly used and well-validated measure of symptoms of major depressive disorder.⁹ Compared to pre-COVID, a larger share of teachers reported clinically relevant symptoms of depression in 2020, 2021, and 2022. The rate of depression among the teachers surveyed increased from 19% in 2019 to 30% in 2020 and further increased to 32% in 2022 (Figure 6). Teachers were more likely to endorse every symptom of depression in 2020, 2021, and 2022 than pre-COVID, with the highest rates of every symptom reported in 2022.

Figure 6. Teachers with clinically relevant symptoms of depression, 2019-2022.



Note: Clinically relevant is defined as a score of 8 or above across the 7 Center for Epidemiological Studies Depression (CESD) scale items asked on the survey. Scores are adjusted based on the number of scale items answered.

DISCUSSION

Our findings from more than 700 teachers at 100 Virginia child care centers show that financial insecurity, food insecurity, and symptoms of depression, already at worrying levels in 2019, were higher among child care teachers in 2022 than they were both prior to COVID and in 2020.¹⁰ Increases in financial hardship align with trends in wages, which declined 4% in real value from 2020 to 2022 amid high inflation. These patterns are troubling not only for the teachers themselves but also for the children they teach and care for and the families and communities that rely on child care. Increased teacher stress and symptoms of depression are associated with higher turnover among child care teachers,¹¹ and higher levels of depression among child care teachers likely have negative impacts on the quality of care and instruction that children receive.¹²

The observed trends are particularly concerning because the 100 child care centers that we studied in the current brief offer teachers higher wages and more benefits than do centers in Virginia more broadly; it seems likely that child care teacher wellbeing challenges in Virginia are even more pronounced than those highlighted here.¹³

Additional financial supports for child care are essential for reversing these patterns. Child care centers have increased wages since COVID began, but as the findings in this brief show, these increases are not sufficient to keep up with inflation. Many centers may lack the resources to increase wages further without raising tuition, which is already too high for many families.

Virginia has already made significant investments in financial support for child care teachers. For instance, through the RecognizeB5 program, they provide teachers at publicly funded child care centers and family day homes with annual payments of up to \$2,500, set to increase to \$3,000 in the next year.¹⁴ In fall 2022, the state also introduced increased subsidy reimbursement rates¹⁵ to better account for the true cost of providing high quality care, including the compensation of teachers. It will be important to measure whether these increases lead to improvements in teachers' wellbeing.

Beyond increased compensation, teachers may benefit from mental health screenings and resources that are often out of reach to low-income workers in a sector that rarely provides health insurance benefits. Additionally, child care teachers need increased access to other professional supports to help them to cope with job stressors.

While operations may be returning to normal two years after COVID began, many child care teachers are struggling even more than they were before the pandemic, when conditions were already very challenging. The gains in financial stability that teachers experienced during COVID have been eroded, returning to concerning pre-pandemic levels. As the sector continues to recover from COVID-related disruptions, more efforts are needed to not just return to the pre-pandemic normalcy of low wages and high turnover, but to establish a new normal that is better for teachers, children, families, and communities.

ENDNOTES

¹ U.S. Bureau of Labor Statistics. (2022) "All Employees, Child Day Care Services [CES6562440001]." FRED, Federal Reserve Bank of St. Louis. November 1, 2022. Retrieved from https://fred.stlouisfed.org/graph/?graph_id=1053802.

² Gittleson, B., & Travers, K. (2022, October 20). Child Care Industry Struggles with Shortage of Workers: 'This is unheard of.' *ABC News*. Retrieved from <https://abcnews.go.com/US/child-care-industry-struggles-%20shortage-workers%20unheard/story?id=91701041>

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Mader, J. (2022, October 28). Finding Child Care is Still Impossible for Many Parents. *The Hechinger Report*. Retrieved from <https://hechingerreport.org/finding-child-care-is-still-impossible-for-many-parents/>

³ Markowitz, A. J., Cubides-Mateus, D. M., & Bassok, D. (2021). Spikes in Teacher Depression During the Pandemic: Evidence from Virginia Early Educators. Retrieved from https://bit.ly/see_partnerships_covid_depression

Whitebook, M., McLean, C., Austin, L. J. E., & Edwards, B. (2018). Early Childhood Workforce Index 2018. Center for the Study of Child Care Employment. Retrieved from <https://eric.ed.gov/?id=ED585491>

⁴ Virginia's PDG B-5 initiative, an effort to improve early childhood education (ECE) quality in the state, began in 2019 with support from a federal PDG B-5 award. The child care centers included in this analysis are located in the 26 Virginia cities and counties that participated in the PDG B-5 2019 pilot year. These communities were demographically similar to the state population as a whole. All publicly-funded ECE programs in these 26 communities, including school-based, center-based, and home-based programs, were invited to participate in PDG B-5, and a total of 415 school and center-based programs (90% of school-based programs and 40% of publicly-funded centers) chose to participate in 2019. For this analysis, we excluded school-based programs and center-based programs that received Head Start funding.

Over time, participation in the PDG B-5 expanded to include 525 non-Head Start centers by May 2022. In order to not conflate changes in working conditions and wellbeing with changes in the centers participating, we focused on the fixed sample of centers that participated in the PDG B-5 in 2019, 2020, 2021, and 2022. The centers in our sample comprise 73% of non-Head Start child care centers in the PDG in May 2019.

⁵ All teachers working with children ages 0-5 for at least 30 hours per week at publicly funded ECE programs participating in the PDG B-5 were invited to take surveys about their experiences working with young children in May 2019, May 2020, July 2021, and May 2022. Teachers could take these surveys online or on paper and in English or Spanish. The surveys could be completed in about 30 minutes and teachers received gift cards for completing the surveys. Among teachers at the 100 child care centers in our sample, sample sizes and response rates were 718 (71%) in May 2019, 685 (68%) in May 2020, 717 (62%) in July 2021, and 704 (59%) in May 2022. For our analyses, we limited the samples to teachers who reported being currently employed at their PDG site, resulting in total sample sizes of 718 in May 2019, 506 in May 2020, 591 in July 2021, and 558 in May 2022. Teachers did not answer questions about wages and benefits in May 2020, so teachers in the May 2020 sample were matched with their responses to wage and benefit items on an additional PDG survey from September 2020.

⁶ Teachers were asked how often they "felt this way" in the past 3 months across 4 statements about financial insecurity. Response options were "Rarely or never," "Some or a little," "Occasionally or moderately," "Most or all of the time," and "Don't know." Responses of "Don't know" were treated as missing.

Please indicate how often you have felt this way during the **past three months**. *Mark one response per line.*

	Rarely or never	Some or a little	Occasionall y or moderately	Most or all of the time	Don't know
I worry I will run out of money before I am paid again.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am unable to sleep well because of financial worries.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I make purchases on credit cards hoping that I will have the money later.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Many of my bills are past due.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

⁷ Teachers were asked “how true” each of 3 statements about food insecurity were for them or members of their household in the past 3 months. Response options were “Never true,” “Sometimes true,” and “Often true.”

Read the three statements below. In the **past three months**, how true was each statement below for you or members of your household? *Mark one response per line.*

	Never true	Sometimes true	Often true
I/we have worried that my/our food might run out before I/we have money to get more.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The food that I/we bought just didn't last, and I/we didn't have the money to get more.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I/we couldn't afford balanced meals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

⁸ Teachers were asked how often they “felt this way” in the past week across 7 symptoms of depression. Response options were “Rarely or never,” “Some or a little,” “Occasionally or moderately,” “Most or all of the time,” and “Don't know.” Responses of “Don't know” were treated as missing. Non-missing responses were weighted from “Rarely or never” = 0 to “Most or all of the time” = 3, summed across the 7 items, and adjusted for the number of items answered. A total score of 8 or higher was considered to reflect clinically relevant symptoms of depression.

Please indicate how often you have felt this way during the **past week**. *Mark one response per line.*

	Rarely or never	Some or a little	Occasionally or moderately	Most or all of the time	Don't know
I did not feel like eating, my appetite was poor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I had trouble keeping my mind on what I was doing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt depressed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
That everything I did was an effort.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My sleep was restless.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt sad.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I could not "get going."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

⁹ Levine, S. Z. (2013). Evaluating the seven-item Center for Epidemiologic Studies Depression Scale shortform: A longitudinal US community study. *Social Psychiatry and Psychiatric Epidemiology*, 48(9), 1519–1526. Retrieved from <https://doi.org/10.1007/s00127-012-0650-2>

¹⁰ To account for the chance that changes in the composition of teachers employed at the centers in our sample contributed to the changes in outcomes over time, we also examined the results in a sample of 137 child care teachers who took every PDG B-5 survey from 2019 to 2022. All trends held in this constant teacher sample.

¹¹ Grant, A. A., Jeon, L., & Buettner, C. K. (2019). Relating early childhood teachers' working conditions and well-being to their turnover intentions. *Educational Psychology*, 39(3), 294-312. Retrieved from <https://doi.org/10.1080/01443410.2018.1543856>

¹² Kwon, K., Jeon, S., Jeon, L., & Castle, S. (2019). The role of teachers' depressive symptoms in classroom quality and child developmental outcomes in Early Head Start programs. *Learning and Individual Differences*, 74(June), 101748. Retrieved from <https://doi.org/10.1016/j.lindif.2019.06.002>

¹³ Among the 100 centers in our sample, the average midpoint hourly wage for lead teachers (halfway between the minimum and maximum wages at the center) in 2019 was \$12.90 compared to \$12.38 among other child care centers that did not receive Head Start funding and participated in the pilot year of the PDG B-5. The centers in our sample were much more likely to offer health insurance benefits to any full-time lead teachers (65% of centers in our sample compared to 42% of other centers) and somewhat more likely to offer retirement benefits (49% of centers in our sample compared to 37% of other centers).

¹⁴ Virginia Early Childhood Foundation, Virginia Department of Education, & University of Virginia. (2022). 2022-2023 RecognizeB5 Program Overview. Retrieved from <https://vecf.org/wp-content/uploads/2022/08/RecognizeOverviewandFAQ8.10.22.pdf>

¹⁵ Peifer, K. (2022, September 28). Child care help coming to Virginia. *Axios Richmond*. Retrieved from <https://www.axios.com/local/richmond/2022/09/28/child-care-virginia-reimbursements>