



Black Parents and Their Babies: Attending to the First 1,000 Days



Equity Research Action Coalition

UNC Frank Porter Graham Child Development Institute



Issue Series Overview

This issue series focused on Black families and babies is funded by the Pritzker Children’s Initiative and is a collaborative effort between the Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute and Child Trends. This series is focused on identifying the strengths-based programs and policies that support the well-being of Black families and their babies.

Across the series, we take the position that Black families are better supported when there is an intentional and strategic focus on designing systems and implementing programs, interventions, and strategies that build on and attend to the cultural assets and strengths of Black families. This series is borne out of this perspective.

We use the term “Black” as a pan-ethnic description of anyone having any ancestral heritage from Africa. This includes individuals who identify as African American—those who were primarily born in America and are descendants of enslaved Africans—as well as those living in America who identify as Black African or Afro-Caribbean. “Black” also includes those who reported being Black alone or in combination with one or more races or ethnicities in their responses to the U.S. Census, such as Afro-Latine.

About the Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute

The Equity Research Action Coalition, a university-based collaborative, focuses on co-constructing with practitioners and policymakers actionable research and evaluation to support the optimal development of Black children prenatally through childhood across the African diaspora. The Coalition works at the intersection of research, program, and practice through anti-racist and cultural wealth frameworks. The Coalition focuses on developing a science-based action framework to eradicate the impact of racism and poverty and all its consequences on the lives of Black children, families, and communities, and to ensure their optimal health and well-being.

About Child Trends

Child Trends is the nation’s leading research organization focused exclusively on improving the lives of children and youth, especially those who are most vulnerable. Child Trends works to ensure that all kids thrive by conducting independent research and partnering with practitioners and policymakers to apply that knowledge. Child Trends believes that programs and policies that serve children are most effective when they are informed by data and evidence and grounded in deep knowledge of child and youth development. Child Trends’ expertise spans early childhood development, child welfare, school climate, reproductive health, family formation, juvenile justice, trauma, and youth development.

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INTRODUCTION

Drawing on data from the Rapid Assessment of Pandemic Impact on Development-Early Childhood (RAPID-EC) family well-being survey, this report presents key findings and recommendations about the effects of the coronavirus (COVID-19) pandemic on 651 Black and Black/multiracial families with babies (i.e., infants and toddlers, birth to age 3) in the United States. The RAPID-EC is an early childhood family well-being survey designed to gather essential information in a continuous manner regarding the needs, health-promoting behaviors, and well-being of children and their families during the COVID-19 outbreak in the U.S. RAPID-EC has partnered with researchers across the country including at the University of North Carolina at Chapel Hill. Data for this report were collected by the RAPID-EC team at the University of Oregon between April 6, 2020, and March 8, 2021.

The first 1,000 days are foundational for healthy development.

The first years of life set the foundation for children’s healthy development and school and life success. Early adversity can change the timing of critical periods of brain development and healthy development. Access to basic resources may reduce families’ experiences of chronic stress and also ensure children are getting access to nutritional, psychosocial, and health care needed for healthy development. Unfortunately, systemic racism and interpersonal experiences of discrimination can influence the health and well-being of both children and adults in multiple and complex ways.

This report focuses on Black families with babies.

We report on the full sample of 7,242 RAPID-EC families with babies to provide broader context for the experiences of Black families. We use the terms “babies,” “infants,” “toddlers,” and “young children” interchangeably, but also recognize there are varying developmental stages and milestones for each. Families in the full RAPID-EC sample were primarily White (76%), with smaller proportions of Black (8%), multiracial (5%), Asian (4%), and American Indian/Alaska Native (1%) families. Six percent of families identified as an “other” racial group. Nine percent of the sample reports being first-generation immigrants and born outside of the U.S., and 16 percent are Latine. Nearly all families (95%) primarily speak English. Survey participants’ average household income was \$83,992, which is significantly higher than the U.S. median household income for 2019 of \$68,703.

For Black families in this report, the average household income was \$56,097, which is higher than the 2019 median income for Black families in the U.S., which was \$45,438 (Census, 2019). Nearly all Black families (99%) primarily speak English, 7 percent report being first-generation immigrants born outside of the U.S., and 11 percent identify as Latine.¹

¹ Consistent with experts in the field, we use “Latine” to refer to individuals whose cultural background originated in Latin America. In U.S. academic circles, “Latinx” is being used as a gender-inclusive term to refer to people from Latin American backgrounds, but Spanish-speakers find that “Latinx” is unpronounceable in Spanish. Therefore, we have opted to use the gender-inclusive term “Latine,” commonly used throughout Spanish-speaking Latin America (Melzi et al., 2020).

Analyses examined Black families by income level.

We conducted descriptive analyses of the RAPID-EC data with attention to Black families with babies. We compared the findings to the full sample of RAPID-EC families with babies to contextualize the findings. Our analyses showed that low-income families were more likely to feel the devastating consequences of the COVID-19 pandemic. Thus, we examined the data by families' income level. Specifically, we examined whether families were below/near poverty (families with incomes that were less than 200% of the federal poverty threshold) or middle income (families with incomes that were above 200% of the federal poverty threshold). These comparisons allowed us to see whether there were differential experiences of the pandemic based on family income level. Not all findings are shown by income level.

The 3Ps of Protecting, Promoting and Preserving is the organizing framework for this report.

This report is organized through the lens of protecting, promoting, and preserving the well-being of Black families and babies. Specifically, under Protecting, we look at Black families' experiences with racism, discrimination, and material hardship. Under Promoting, we look at Black families' economic security, health, and access to early learning opportunities. Under Preserving, we look at Black families' maintenance of cultural identity.

Findings

This report shows that Black families and their babies are surviving, although they feel the weight of racism, discrimination, economic strain, and other inequities, which is compounded by the global pandemic. Racism and discrimination remain a concern for Black families and their babies, along with economic instability and access to early care and education options. Our key findings show that:

- Black families with babies face economic insecurity and material hardships.
- COVID-19 caused disruption in parents' and babies' health care, well-being, and early care and education placements.
- Black families begin promoting their babies' racial identity early.

Recommendations

Black families are disproportionately feeling the negative effects of the COVID-19 pandemic, which is compounded by structural and systemic racism. It is critical that national, state, and local leaders and policies attend to better meeting the needs of Black families and babies. This will require multi-sectoral and cross-agency collaboration rooted in anti-racist practices and policies. We call for immediate actions focused on the following findings:

- Protecting Black babies and their families from racism, discrimination, and material hardship is necessary to ensure babies thrive throughout their life course.
- Promoting economic security, health, and access to early learning opportunities is essential to mitigate against the biological and social vulnerability Black babies and their families face due to racism, discrimination, and bias.
- Preserving Black babies' cultural identity in the early years is as essential as the "three Rs" of reading, writing, and 'rithmetic.

Black Parents and Their Babies: Attending to the First 1,000 Days



Science has confirmed the importance of the first 1,000 days of children’s lives and the importance of supporting the health and economic stability of parents and families to meet the needs of children.² Attention to the first 1,000 days of children’s lives is particularly critical for Black children and their families, who are placed at risk due to structural and systemic racism, which has resulted—and continues to result—in inequities that limit their ability to fully lean into the American dream.

This report examines how Black families with babies are faring in the face of the two pandemics—COVID-19 and racism—using the Rapid Assessment of Pandemic Impact on Development-Early Childhood study (RAPID-EC). The project is funded by the Pritzker Children’s Initiative and led by the Equity Research Action Coalition at the UNC Frank Porter Graham Child Development Institute (the Coalition) in collaboration with Child Trends. The Coalition is a university-based research-practice-policy think tank centered on creating equitable opportunities for Black children and their families and educators. Child Trends is the nation’s leading research organization focused exclusively on improving the lives of children and youth, especially those who are most vulnerable.



² National Academies of Sciences, Engineering, and Medicine [NASEM]. (2019). *Vibrant and Healthy Kids: Aligning Science, Practice, and Policy to Advance Health Equity*. The National Academies Press. <https://doi.org/https://doi.org/10.17226/25466>

Across this series we use the terms “babies,” “infants,” “toddlers,” and “young children” interchangeably, but also recognize there are varying developmental stages and milestones for each.

Black families and babies experience multiple adversities prior to and after birth. There is also a growing understanding of the cultural wealth that Black families use to navigate against structural racism and other racialized experiences.

There are 11.5 million Black babies in the U.S. Over 60 percent of Black babies live in families with income below 200% of the federal poverty level,³ which is more than double the rate for White babies (29%). Black families and babies experience multiple adversities prior to and after birth.⁴ There is also a growing understanding of the cultural wealth that Black families use to navigate against structural racism and other racialized experiences.⁵ To understand the racialized experiences and assets of Black families, Iruka and colleagues (2021) call on the importance of centering the 3Ps—protecting, promoting, and preserving—to support the health and well-being of Black families and babies by attending to cognitive, socio-emotional, and cultural competencies of Black families.⁶

Using the 3Ps framework, this report examines whether we are

- **protecting** Black families and babies from racism, discrimination, and material hardship,
- **promoting** Black families' and babies' economic security, health, and access to early learning opportunities, and
- **preserving** Black families' and babies' cultural identity.

³ Keating, K., Cole, P., & Schneider, A. (2021). *State of Babies Yearbook: 2021*. Washington, DC: ZERO TO THREE.

⁴ Keating, K., Murphey, D., Daily, S., Ryberg, R., & Laurore, J. (2020). Maternal and Child Health Inequities Emerge Even Before Birth. Washington, D.C.: ZERO to THREE. Retrieved from <https://stateofbabies.org/wp-content/uploads/2020/06/Maternal-and-Child-Health-Inequities-Emerge-Even-Before-Birth.pdf>

⁵ Yosso, T. J. (2005). Whose culture has capital? A critical race theory discussion of community cultural wealth. *Race Ethnicity and Education*, 8(1), 69-91. <https://doi.org/10.1080/1361332052000341006>

⁶ Iruka, I. U., Durden, T. R., Gardner-Neblett, N., Ibekwe-Okafor, N., Sansbury, A., & Telfer, N. A. (2021). Attending to the adversity of racism against young Black children. *Policy Insights from the Behavioral and Brain Sciences*. <https://doi.org/10.1177/23727322211029313>

Protecting Black babies and their families from racism, discrimination, and material hardship

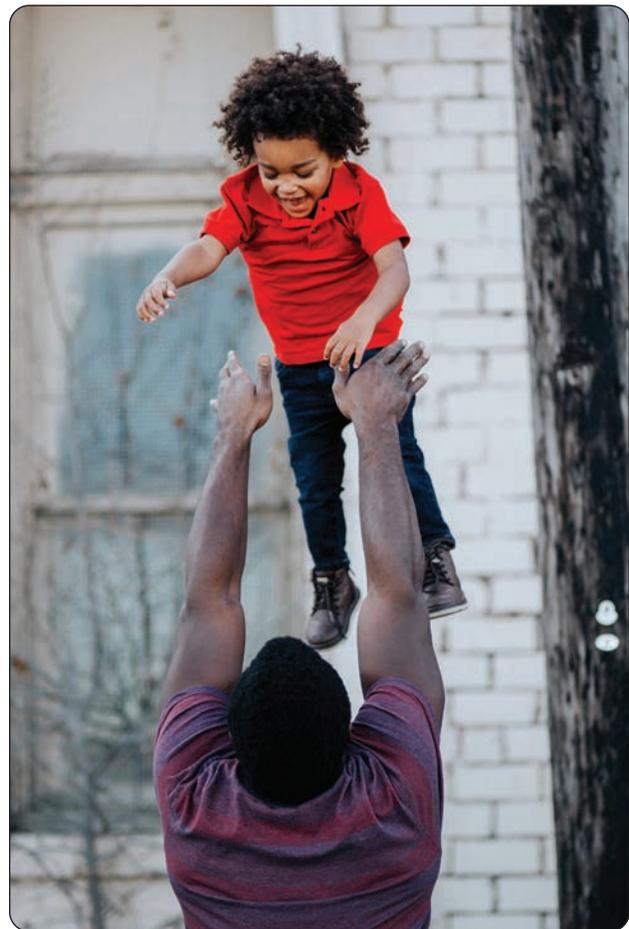
RACISM AND DISCRIMINATION

Racism and racial discrimination were common experiences among Black parents of babies in comparison to the full sample. However, fewer parents reported facing these discriminatory experiences during the pandemic, primarily due to many states imposing lockdown orders.

Many Black parents also reported concerns about their children’s experiences and treatment due to their race. Concerns included discouragement from trying new things, unfair treatment, harsh punishment, and poor quality early care and education.

Science is clear about the impact of racism and discrimination and material hardship.⁷ The National Academies of Science, Engineering, and Medicine “Vibrant and Healthy Kids” report (2019) highlights key areas of social determinants of health that impact the overall well-being of individuals. In the social and community context, the underlying factor of discrimination can have an impact on individuals’ health through increased levels of stress and lack of opportunities.

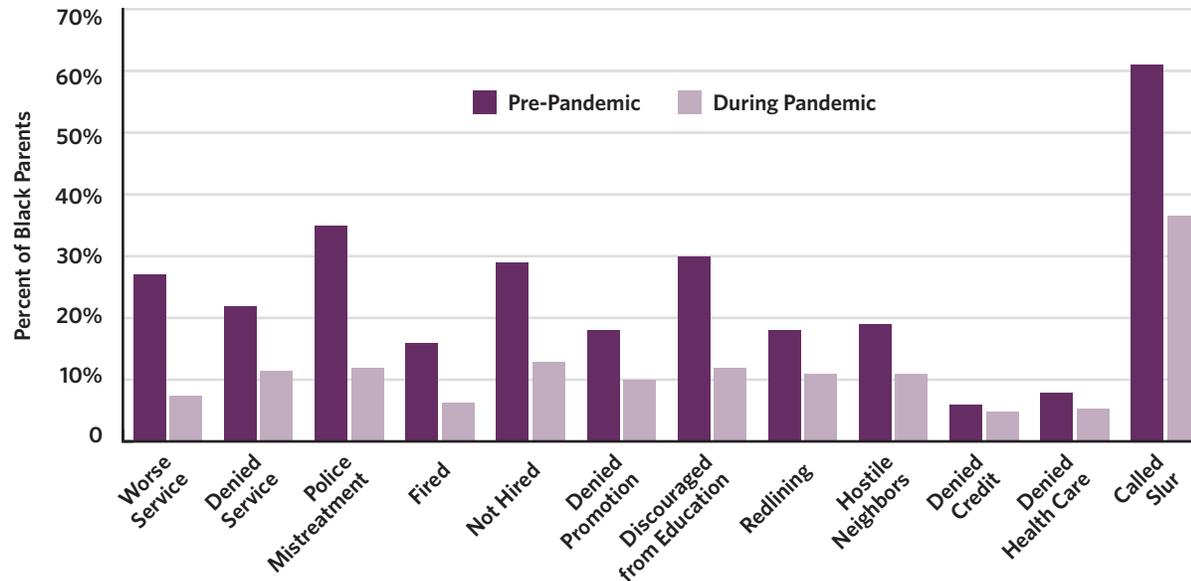
Parents in the RAPID-EC study were asked to share their experiences of discrimination and related concerns for their children. Many Black parents reported experiencing discrimination, both prior to and during the pandemic. Questions focused on 12 different forms of discrimination (e.g., denied service, not hired, police mistreatment) across domains such as housing, education, interactions with the police, interactions with service industries, etc.



⁷ National Academies of Sciences, Engineering, and Medicine [NASEM]. (2019). *Vibrant and Healthy Kids: Aligning Science, Practice, and Policy to Advance Health Equity*. The National Academies Press. <https://doi.org/https://doi.org/10.17226/25466>

The most common form of discrimination experienced by Black parents of babies was being called a derogatory name/racial slur (62% of Black parents reported being called a slur prior to the pandemic compared to 37% during the pandemic). A smaller but still substantial number of Black parents reported experiencing mistreatment by police, being discouraged from educational opportunities, not being hired for a job, and receiving worse service or being denied service (see Figure 1). Across all domains, smaller proportions of Black parents reported experiencing discrimination during the pandemic compared to prior to the pandemic.

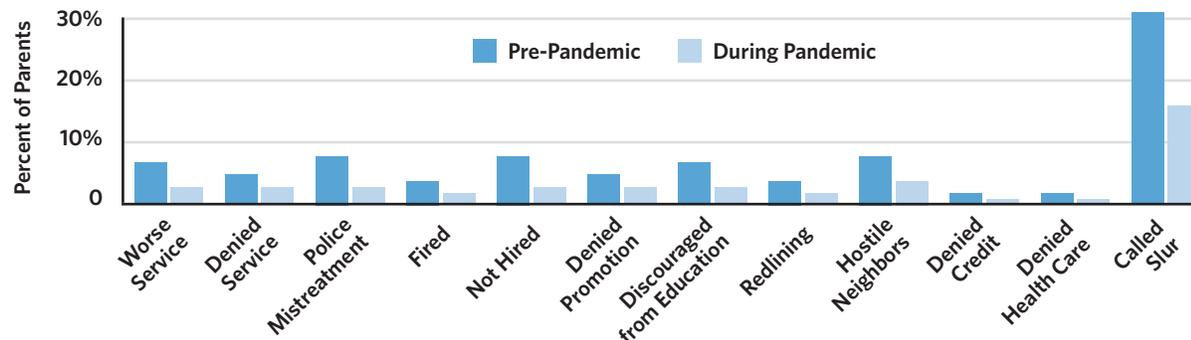
Figure 1. Black Parents of Babies: Experiences of Discrimination



Note. N = 235, RAPID-EC surveyed between August 24, 2020, and March 8, 2021.

Experiences with discrimination were more common among Black parents of babies than among parents of babies in the full RAPID-EC sample. Across all forms of discrimination both prior to and during the pandemic, Black parents were two to five times more likely to experience discrimination than parents in the full RAPID-EC sample (see Figure 2). The most frequent form of discrimination experienced both prior to and during the pandemic for parents in the full RAPID-EC sample and Black parents was being called a derogatory name/racial slur.

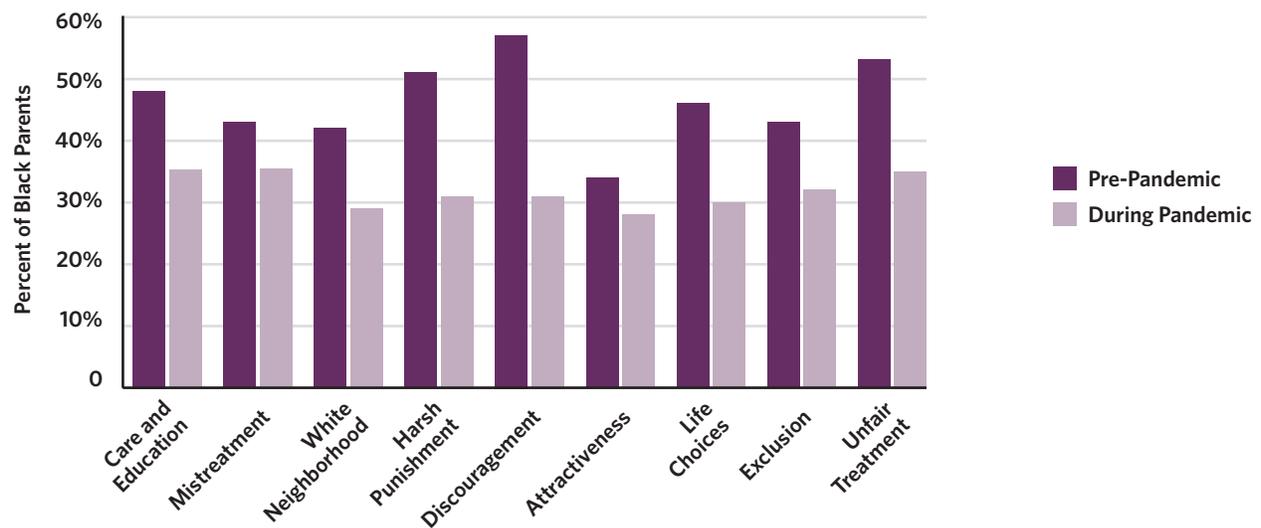
Figure 2. All Parents of Babies: Experiences of Discrimination



Note. N = 3,124, RAPID-EC surveyed between August 24, 2020, and March 8, 2021.

Parents also reported on their related concerns about their children’s experiences and treatment both prior to and during the pandemic due to their race. Many Black parents of babies expressed concerns about these issues (see Figure 3). The most commonly reported concerns for children were discouragement from trying new things (57% prior to and 31% during the pandemic), unfair treatment (53% prior to and 35% during the pandemic), harsh punishment (51% prior to and 31% during the pandemic) and poor quality care and education (48% prior to and 35% during the pandemic). Across all types of concern, fewer parents reported these concerns during the pandemic than they did prior to it.

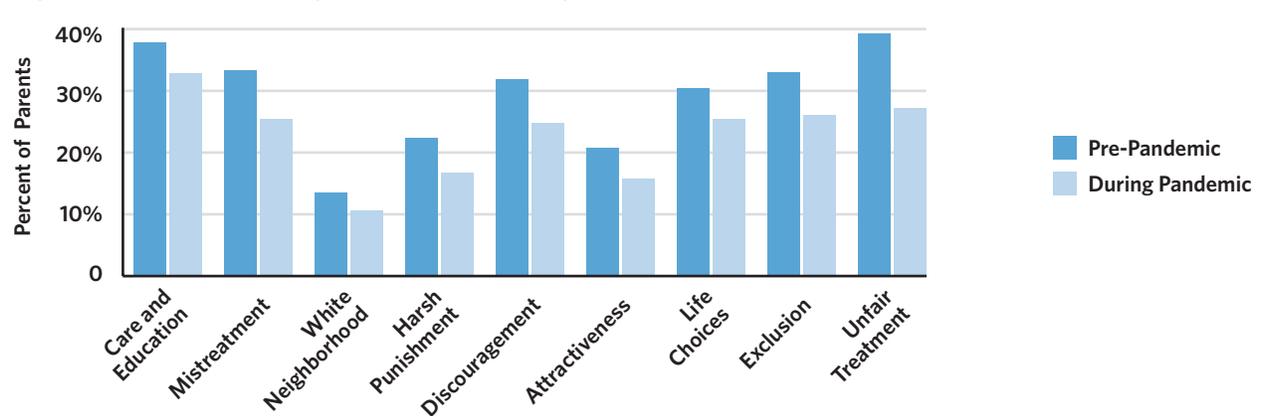
Figure 3. Black Parents of Babies: Concern for Children



Note. N = 235, RAPID-EC surveyed between August 24, 2020, and March 8, 2021.

Greater proportions of Black parents of babies reported all types of concern than among parents of babies in the full RAPID-EC sample (see Figure 4).

Figure 4. All Parents of Babies: Concern for Children



Note. N = 3,124, RAPID-EC surveyed between August 24, 2020, and March 8, 2021.

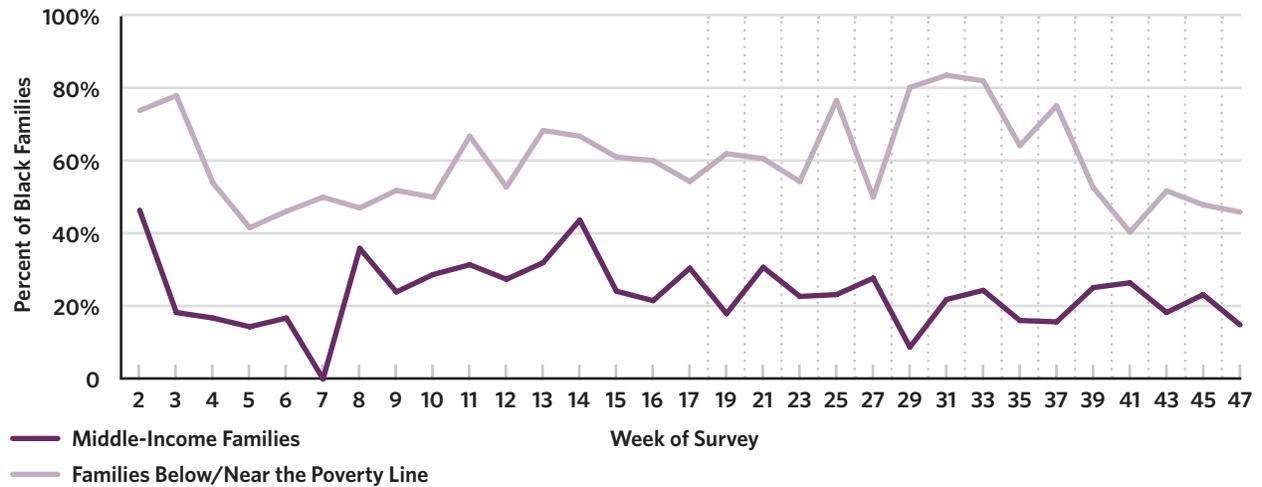
MATERIAL HARDSHIP

Many Black parents reported experiencing material hardship throughout the course of the pandemic, although this number generally decreased over time. Material hardship was particularly pronounced among families living below/near poverty, with one in three Black families living below/near poverty reporting difficulty paying for basic needs, such as utilities and housing.

Parents in the survey were asked whether they experienced any material hardships, or difficulty paying for basic needs such as housing, electricity and water, food, early care and education, and health care, in the month before the survey. Black families with babies living below/near poverty experienced higher rates of material hardships than middle-income Black families throughout the course of the survey (see Figure 5). As many as 84% of Black families with babies living below/near poverty reported experiencing material hardship(s), although the proportion of Black families experiencing at least one material hardship began to decline in early 2021.



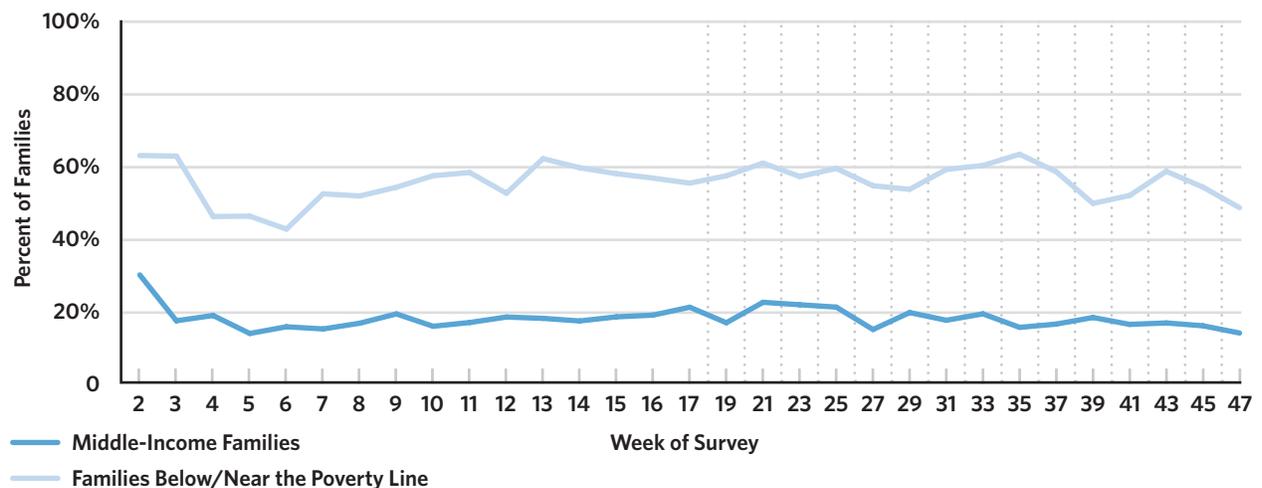
Figure 5. Black Families with Babies Reporting One or More Material Hardships



Note. N = 651, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

Generally, higher proportions of Black families with babies experienced material hardships (see Figure 5) than among families with babies in the full RAPID-EC sample across the length of the survey (see Figure 6). This was true regardless of income level and was particularly true among middle-income families.

Figure 6. All Families with Babies Reporting One or More Material Hardships



Note. N = 7,242, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

As highlighted in Table 1, proportions of families living below/near the poverty line experiencing material hardship(s) were similar among Black families with babies and among families with babies in the full RAPID-EC sample. However, greater proportions of middle-income Black families with babies reported experiencing material hardship(s) than middle-income families with babies in the full RAPID-EC sample. Notably, greater proportions of Black families with babies reported having difficulty paying for early care and education than their peers in the full sample, regardless of income level.

Table 1. Black Families' and All Families' Material Hardships

	Black Families with Babies		All Families with Babies	
	Below/Near-Poverty	Middle-Income	Below/Near-Poverty	Middle-Income
Difficulties Paying for Basic Needs (Hard/Very Hard)	32.29%	7.65%	29.22%	5.99%
Difficulty Paying for: ^a				
Utilities	45.34%	20.77%	45.53%	11.31%
Housing	34.46%	17.49%	35.39%	10.04%
Food	30.32%	16.94%	30.60%	9.47%
Early Care and Education	18.13%	13.67%	12.68%	6.57%
Health Care	10.88%	11.48%	13.07%	7.75%
Material Hardships (3 or More)	29.02%	16.39%	29.09%	8.84%
Receiving Public Benefits	53.91%	18.58%	48.33%	9.39%
Access to Free Food	48.96%	22.95%	44.61%	13.63%

Note. Black families with babies *N* = 651; Full sample with babies *N* = 7,242; RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

^a Based on those who reported having a hard time or very hard time paying for basic needs.



Promoting Black babies' and their families' economic security, health, and access to early learning opportunities

ECONOMIC STABILITY

Income losses during the pandemic were common among Black families. Over half of Black families living below/near poverty reported decreases in their income during the pandemic and 40% of middle-income Black families reported decreased income.

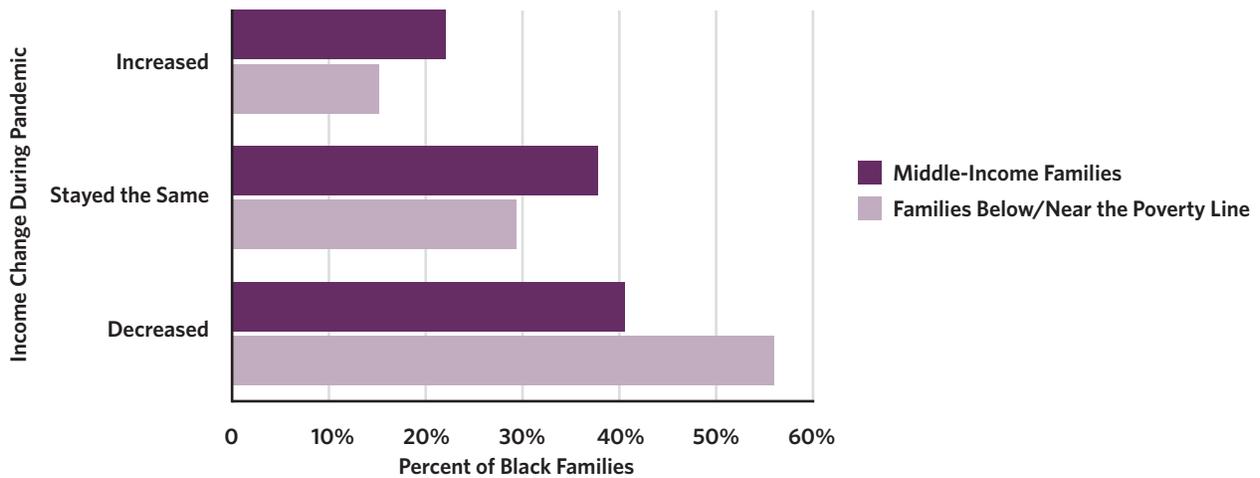
More than one-third of Black families living below/near poverty reported major or extreme financial strain, while more than half of middle-income Black families reported minor financial strain.

Families in the survey also reported on their financial security during the pandemic, including their income stability and experiences of financial strain. Decreased family income was most common among Black families with babies during the pandemic (as opposed to increased income or consistent income; see Figure 7). This finding was more pronounced among Black



families living below/near poverty (55%) but still relatively high among middle-income Black families (41%). Middle-income Black families were more likely to report consistent or increased income during the pandemic.

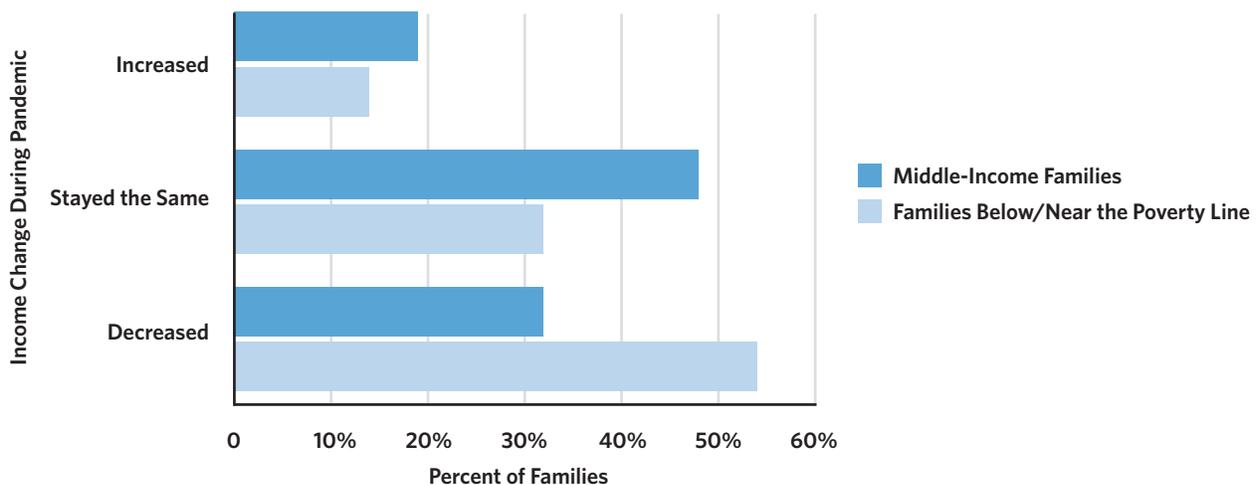
Figure 7. Income Stability During Pandemic among Black Families with Babies



Note. N = 651, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

Although proportions of parents reporting increased, consistent, and decreased income were similar across Black families living below/near poverty and families living below/near poverty in the full RAPID-EC sample, proportions differed among middle-income families (see Figure 8). Middle-income parents in the full RAPID-EC sample were more likely to report consistent income (48%) than their Black peers (37%). Middle-income Black parents of babies, on the other hand, were more likely to report decreased income (41%) than parents of babies in the full RAPID-EC sample (32%). Proportions of middle-income families with babies reporting increased income were more similar across Black families (21%) and families in the full RAPID-EC sample (19%).

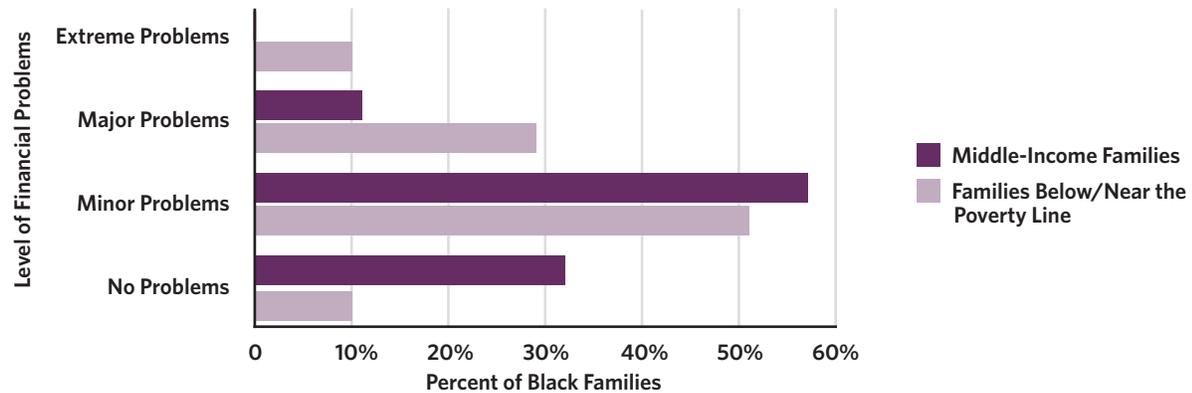
Figure 8. Income Stability During Pandemic among All Families with Babies



Note. N = 7,242, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

In terms of the level of financial strain that parents experienced managing their household economic needs, major and extreme financial strain were more common among Black families with babies living below/near poverty (combined 39%) than they were among middle-income Black families with babies (combined 11%). Greater proportions of middle-income Black families with babies reported minor problems (57% compared to 51%) or no problems (32% compared to 10%) than among Black families with babies living below/near poverty (see Figure 9).

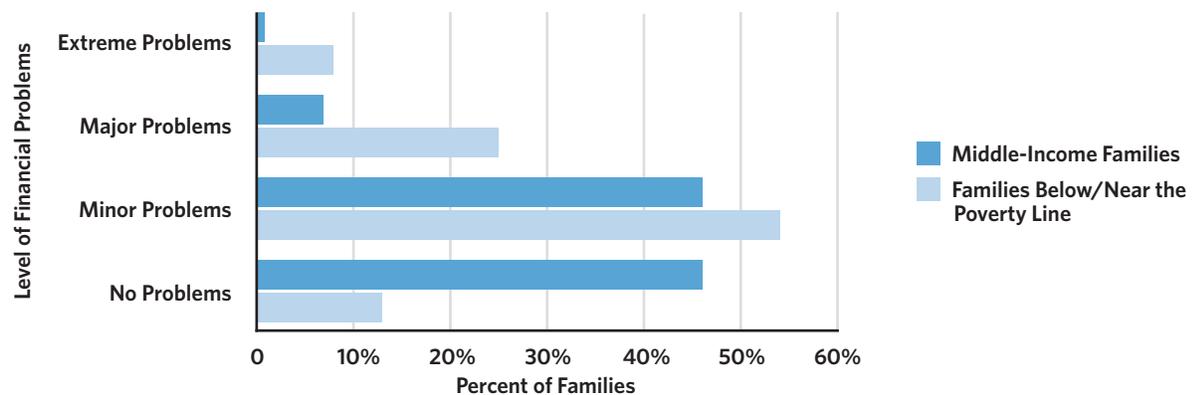
Figure 9. Financial Strain During Pandemic among Black Families with Babies



Note. N = 651, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

More Black families with babies reported experiencing major or extreme financial problems than among the full sample of RAPID-EC families with babies, regardless of income level (see Figure 10). Similar to middle-income Black families with babies, very few middle-income families with babies in the full RAPID-EC sample experienced extreme financial problems.

Figure 10. Financial Strain During Pandemic among All Families with Babies



Note. N = 7,242, RAPID-EC surveyed between April 6, 2020, and March 8, 2021

PARENTS' HEALTH AND WELL-BEING

Three in four Black parents reported delaying their own health care needs during the pandemic, regardless of income level. Black parents reported delaying health care needs primarily due to the concern of being exposed to the coronavirus in health care settings, followed by the inability to find early care and education coverage for their babies so that the parents could attend health care visits.

Black parents across the socioeconomic spectrum reported heightened levels of anxiety, depression, stress, and loneliness during the pandemic compared to prior to the pandemic, although lower than parents in the full sample.

Parents in the survey were asked whether they had delayed getting health care in the month leading up to the survey. The majority of parents, roughly three quarters, reported delaying health care (see Table 2).

Concern for COVID-19 was the primary reason for Black families delaying health care, regardless of income. The inability to find early care and education coverage for their babies was the second leading reason that parents delayed health care. This reason was relatively consistent across Black families and families from the full RAPID-EC sample. However, the inability to find early care and education coverage for their babies was a slightly more common reason among families living below/near poverty.

Table 2. Reasons for Delaying Their Health Care for Black Families and All Families with Babies

	Black Families with Babies		All Families with Babies	
	Below/Near-Poverty	Middle-Income	Below/Near-Poverty	Middle-Income
Delayed Health Care	77.51%	74.95%	80.02%	77.09%
Reason for Delay ^a				
Concern for COVID-19	74.17%	69.37%	75.86%	75.39%
Inability to Find Early Care & Education	47.71%	41.95%	47.39%	40.91%
Time Away from Work	24.39%	24.00%	23.98%	21.55%
Cost	33.71%	30.89%	36.90%	27.51%
Caring for Family	34.47%	17.59%	30.74%	18.56%

Note. Black families with babies $N = 651$; Full sample with babies $N = 7,242$; RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

^a Based on those who reported delaying health care.

Parents in the survey also shared information about their mental health, both prior to and during the pandemic. The majority of Black parents of babies reported experiencing threats to their mental health, including anxiety, depression, stress, and loneliness both prior to and during the pandemic, with even greater proportions experiencing them during the pandemic (see Table 3). For example, the proportion of Black parents with babies living below/near poverty reporting stress increased from 74.6% prior to the pandemic to 85.23% during the pandemic. Among middle-income Black parents with babies, this proportion increased from 71.58% prior to the pandemic to 85.24% during the pandemic.

Even greater proportions of parents with babies in the full RAPID-EC sample reported experiencing threats to mental health than among Black parents. This was generally true both prior to and during the pandemic, but especially true during the pandemic.



Table 3. Mental Health Prior to and During the Pandemic for Black Families and All Families with Babies

	Anxiety		Depression		Stress		Loneliness	
	Pre-Pandemic	During Pandemic						
Black Parents of Babies								
Below/Near-Poverty	62.44%	75.65%	56.74%	69.69%	74.60%	85.23%	77.20%	83.93%
Middle-Income	65.67%	80.87%	50.82%	69.95%	71.58%	85.24%	81.97%	86.33%
All Parents of Babies								
Below/Near-Poverty	68.14%	84.36%	56.87%	75.97%	80.25%	91.49%	81.57%	90.01%
Middle-Income	62.33%	84.33%	40.24%	67.65%	79.31%	91.82%	79.62%	89.93%

Note. Black families with babies $N = 651$; Full sample with babies $N = 7,242$; RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

BABIES' HEALTH AND WELL-BEING

About a third of Black families across the economic spectrum missed a well-baby visit primarily due to concerns about COVID-19. For Black families living below/near poverty, over 15% of families reported concerns due to inability to find early care and education to attend doctor appointments.

Three out of four Black parents reported that their babies demonstrated externalizing (fussy or defiant) behaviors during the pandemic compared to just over half prior to the pandemic. Even though smaller proportions of Black parents reported that their babies demonstrated internalizing (fearful or anxious) behaviors, this proportion nearly doubled during the pandemic.

Many Black families and families from the full RAPID-EC sample, regardless of income, missed a well-baby or well-child checkup during the pandemic (see Table 4). Among both Black families and the full RAPID-EC sample, missing a well-baby or well-child appointment was more common among families living below/near poverty (33.58% of Black families and 35.72% of the full RAPID-EC sample) than among middle-income families (29.11% of Black families and 23.38% of the full RAPID-EC sample). The most common reason for missing checkups was concern for COVID. Inability to find early care and education coverage was another common reason for missing checkups, particularly among families living below/near poverty.

Table 4. Reasons for Delaying Well-baby Checkups for Black Families and All Families with Babies

	Black Families with Babies		All Families with Babies	
	Below/Near-Poverty	Middle-Income	Below/Near-Poverty	Middle-Income
Missed Well-Baby	33.58%	29.11%	35.72%	23.38%
Reason for Delay ^a				
Concern for COVID-19	79.50%	81.45%	75.58%	74.20%
Inability to Find Early Care & Education	16.75%	5.88%	13.96%	8.55%
Time Away from Work	8.00%	9.50%	5.67%	4.88%
Cost	6.00%	6.33%	6.28%	4.81%
Caring for Family	10.5%	2.71%	6.38%	3.81%
Vaccine Hesitancy	15.25%	9.95%	9.18%	4.81%
Doctor Cancellation	9.25%	9.50%	10.90%	9.23%
Transportation	7.25%	0.90%	3.25%	0.55%
Other	8.25%	12.66%	14.34%	22.31%

Note. Black families with babies $N = 651$; Full sample with babies $N = 7,242$; RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

^a Based on those who reported delaying their child's health care.



Parents in the survey were asked whether their children were fussy or defiant (also known as externalizing behaviors) and fearful or anxious (also known as internalizing behaviors) during the previous week and prior to the pandemic. Just over half of Black parents reported that their babies demonstrated externalizing behaviors prior to the pandemic, and this proportion grew to just over three quarters during the pandemic (see Table 5). Smaller proportions of Black parents reported that their babies demonstrated internalizing behaviors, although proportions grew during the pandemic to 36.38% among families below/near poverty and 42.85% among middle-income families.

Parents of babies in the full RAPID-EC sample also reported similar patterns of heightened internalizing and externalizing behaviors during the pandemic compared to prior to the pandemic.

Table 5. Black Families and All Families Report of Their Babies' Externalizing and Internalizing Behaviors

	Externalizing		Internalizing	
	Pre-Pandemic	During Pandemic	Pre-Pandemic	During Pandemic
Black Parents of Babies				
Below/Near-Poverty	57.04%	77.22%	19.06%	36.38%
Middle-Income	51.99%	77.02%	22.68%	42.85%
All Parents of Babies				
Below/Near-Poverty	57.84%	83.28%	22.88%	43.93%
Middle-Income	52.84%	80.19%	19.36%	36.27%

Note. Black families with babies $N = 591$; Full sample with babies $N = 6,853$; RAPID-EC surveyed between April 28, 2020, and March 8, 2021.

EARLY CARE AND EDUCATION

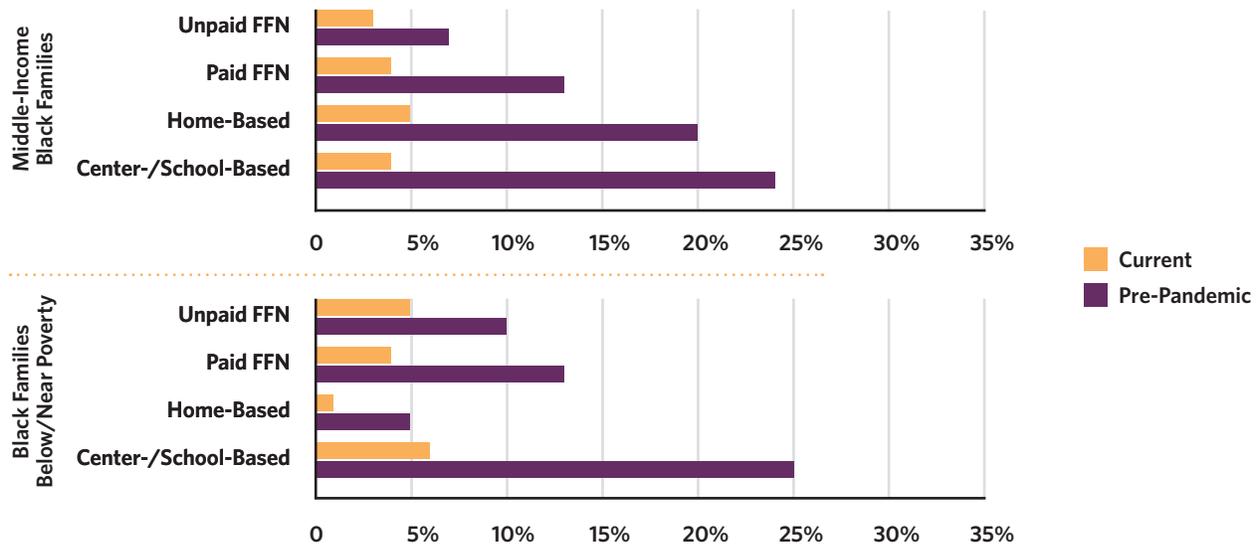
Prior to the pandemic, nearly one in four Black families across income groups reported using center-based early care and education (ECE). Home-based ECE was nearly as common among middle-income Black families (one in five), but relatively uncommon among Black families living below/near poverty. However, ECE usage dropped drastically during the pandemic regardless of income group or ECE type.

Parents reported on their use and type of early care and education prior to and during the pandemic. Early care and education types include paid center-, school-, and home-based options; paid care by a friend, family, or neighbor (FFN); and unpaid care by FFN.

Among Black families with babies, use of ECE was drastically lower—regardless of ECE type—during the pandemic (see Figure 11). This drop in use was relatively consistent regardless of income group, although Black families living below/near poverty used much lower levels of home-based care both prior to and during the pandemic than their middle-income Black peers. Black families living below/near the poverty level also used slightly higher levels of unpaid FFN care both prior to and during the pandemic.



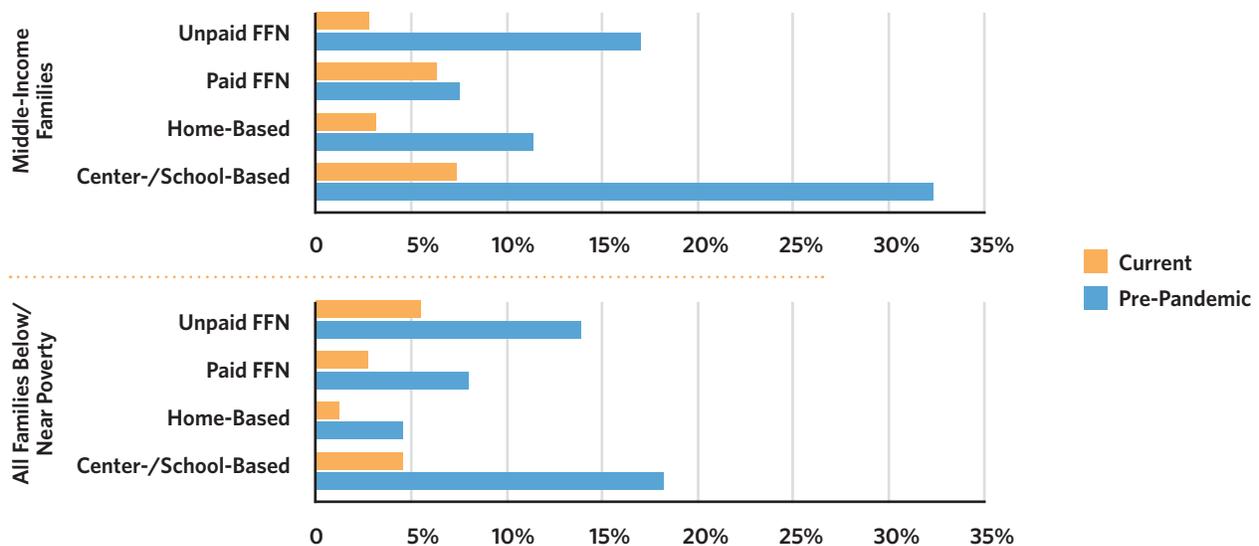
Figure 11. Changes in Nonparental ECE During Pandemic among Black Families with Babies



Note. N = 651, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

Families with babies among the full RAPID-EC sample also reported dramatically lower rates of ECE usage, regardless of type, during the pandemic (see Figure 12). Although middle-income families with babies among the full RAPID-EC sample reported higher levels of center-based ECE and lower levels of home-based ECE prior to the pandemic than Black families with babies, levels of usage dropped to similar levels during the pandemic.

Figure 12. Changes in Nonparental ECE During Pandemic among All Families with Babies



Note. N = 7,242, RAPID-EC surveyed between April 6, 2020, and March 8, 2021.

Preserving Black children’s cultural identity

RACIAL-ETHNIC IDENTITY

Many Black parents reported talking with their babies about the advantages and challenges they may face because of their race. This was especially true among Black families living below/near poverty. More Black families reported engaging in these conversations during the pandemic as opposed to before the pandemic.

Parents were asked whether they talked with their children about the advantages and challenges they may face because of their race or ethnicity. Many Black parents reported engaging in these conversations, particularly among families living below/near poverty (see Table 6). Prior to the pandemic, more than half (56.47%) of Black parents living below/near poverty reported discussing challenges with their babies, while nearly one third (31.53%) of middle-income Black parents reported doing the same. Fewer Black parents reported engaging in conversations about the advantages their children may experience due to their race, although once again rates were higher among Black families living below/near poverty (35.62%) than among middle-income Black families (23.87%). Across the economic spectrum, more Black parents reported engaging in these conversations during the pandemic than they did prior to the pandemic.

Both prior to and during the pandemic, more Black parents of babies reported engaging in conversations around both the advantages and challenges that their children may face due to their race or ethnicity than parents of babies in the full RAPID-EC sample.

Table 6. Discussions about Challenges and Advantages of Race Reported by Black Families and All Families with Babies

	Discussed Challenges		Discussed Advantages	
	Pre-Pandemic	During Pandemic	Pre-Pandemic	During Pandemic
Black Parents of Infants & Toddlers				
Below/Near-Poverty	56.47%	64.97%	35.62%	44.04%
Middle-Income	31.53%	39.06%	23.87%	28.86%
All Parents of Infants & Toddlers				
Below/Near-Poverty	32.75%	34.26%	34.74%	37.87%
Middle-Income	15.64%	17.66%	26.67%	35.46%

Note. Black families with babies N = 235; Full sample with babies N = 3,124; RAPID-EC surveyed between August 24, 2020, and March 8, 2021.

KEY FINDINGS

Consistent with the *Black Parent Voices: Resilience in the Face of the Two Pandemics—COVID-19 and Racism* report released by the RISER Network⁸ in February 2021, this report shows that Black families with babies are surviving, although they feel the weight of racism, discrimination, economic strain, and other inequities, which is compounded by the global pandemic. The first 1,000 days of children’s lives are one of the sensitive periods of development that set children on the path to school and life success. This report reveals that while some of the financial supports provided to families to deal with the global pandemic were helpful, they did not adequately address the needs of Black families with babies. Several themes emerge from this national survey on the experiences of Black families and babies during the global pandemic.

Racism and discrimination remain concerns for Black families and their babies. Black families with babies were experiencing racism and discrimination during the pandemic, although this reduced over time possibly because of the stay-at-home orders. However, families were very concerned about their children’s experiences due to their race, such as discouragement from trying new things, unfair treatment, and inadequate care and quality of education.

Black families with babies face economic insecurity and material hardships.

Over 40% of Black families across the economic spectrum experienced income decreases during the pandemic and reported material hardships. Families reported difficulty paying for basic needs such as utilities and housing, which caused great financial strain. Though some of this strain dissipated over time, these economic challenges were not erased for families, even after receiving financial support such as from the CARES Act.⁹ We will continue to monitor the impact of the American Rescue Plan¹⁰ on Black families with babies.



⁸ Iruka, I. U., Curenton, S. M., Sims, J., Escayg, K.-A., Ibekwe-Okafor, N., & RAPID-EC. (2021). *Black Parent Voices: Resilience in the Face of the Two Pandemics—COVID-19 and Racism*. Researchers Investigating Sociocultural Equity and Race (RISER) Network. <https://www.bu-ceed.org/riser-network.html>

⁹ The Coronavirus Aid, Relief, and Economic Security (CARES) Act was passed by Congress with overwhelming, bipartisan support and signed into law by President Trump on March 27, 2020. This economic relief package of more than \$2 trillion delivers on the Trump Administration’s commitment to protecting the American people from the public health and economic impacts of COVID-19. The CARES Act provides fast and direct economic assistance for American workers, families, and small businesses, and preserve jobs for our American industries. <https://home.treasury.gov/policy-issues/cares>

¹⁰ <https://www.whitehouse.gov/american-rescue-plan/>



COVID-19 caused disruption in parents' and children's health care, well-being, and early care and education placements. Black parents delayed health care visits primarily due to their concerns about being exposed to the coronavirus and an inability to find adequate early care and education. Black parents' mental health was also challenged during the pandemic due to heightened anxiety, depression, stress, and loneliness.

Black parents also reported their child missed a well-baby/well-child checkup primarily due to their concern over the coronavirus, followed by their inability to find adequate early care and education (likely for other children). Parents also reported an elevation in their child's externalizing behaviors, such as being fussier, and internalizing behaviors, such as being more anxious, throughout the pandemic.

Before the global pandemic, Black families with babies used a diversity of early care and education options that included home- and center-based programs and friend, family, and neighbor care. However, the global pandemic limited their use of out-of-home early care and education, including friend, family, and neighbor care, especially for families below/near poverty.

Black families are starting early to promote their babies' racial identity. This is one of the first known national studies that has asked Black parents with very young children whether they are talking with children about the benefits and challenges associated with their race. Many Black families, especially those below/near poverty, discussed with their very young children the challenges they may face because of their race and, to a lesser extent, the advantages they may face because of their race.

RECOMMENDATIONS

Black families are disproportionately feeling the negative effects of the COVID-19 pandemic, which is compounded by structural and systemic racism. It is critical that national, state, and local leaders and policies attend to better meeting the needs of Black families and babies. This will require multi-sectoral and cross-agency collaboration rooted in anti-racist practices and policies. We call for immediate actions focused on the following findings:

Protecting Black babies and their families from racism, discrimination, and material hardship is necessary to ensure babies thrive throughout their life course. Black babies deserve to be born healthy and thriving. They also deserve physically and emotionally safe spaces free from trauma, violence, and exclusion, as well as access to basic resources such as nutritious food and safe and stable housing. Policies that intentionally shelter young Black children and their families from trauma and harm to their physical and emotional selves are essential. Such policies may include paid family leave and increased access to affordable, safe, and healthy housing. More importantly, policies that dismantle structural racism (e.g., school and housing segregation, concentrated poverty, predatory lending, and mass incarceration) should be prioritized.

Promoting economic security, health, and access to early learning opportunities is essential to mitigate against the biological and social vulnerability Black babies and their families face due to racism, discrimination, and bias. Policies are needed that promote health, wealth, and well-being during this sensitive period of brain development. Inclusive policies that address economic, health, and psychological segregation of Black families are necessary to promote healthy outcomes, upward mobility, and equitable access to affordable and high-quality early care and education experiences for children. For example, policies that provide direct cash transfer, economic stability, wealth generation, and universal access to high-quality early care and education could be particularly beneficial for Black families with young children. Anything less will ensure continued disparities.

Preserving Black babies' cultural identity in the early years is as essential as the "three Rs" of reading, writing, and 'rithmetic. Institutions begin early in stripping young Black children of their culture, language, and a positive, healthy racial identity through countless negative narratives about their racial group.¹¹ These racialized traumas create vulnerable identities that impact children's social and emotional competencies. Therefore, policies are needed that support families, educators, and communities in preserving Black children's positive racial identity and self-worth from the time before and after birth. Some policies include pay parity for Black early childhood educators and professionals, access to culturally relevant and sustaining pedagogy and curricula, comprehensive representation of Black history in all learning environments and curricula, and leveraging the cultural wealth of Black families and babies, including their extended family, work ethic, diverse language, and sense of community.

¹¹ Saleem, F. T., Anderson, R. E., & Williams, M. (2020). Addressing the "Myth" of Racial Trauma: Developmental and Ecological Considerations for Youth of Color. *Clinical Child and Family Psychology Review*, 23(1), 1-14. <https://doi.org/10.1007/s10567-019-00304-1>

To truly support Black families and their babies during this sensitive period of brain development, it is essential to eradicate racism and injustices and to implement inclusive policies that provide equitable access to health, wealth, and early care and education. While there are varying experiences due to families' income level, there are many consistent experiences across income groups (e.g., experiences with racism and discrimination, concern for children, material hardship, access to early care and education). Ensuring that these policies address structural and systemic racism and income inequality will be a start to the reparations necessary to recompense for the historical and ongoing extraction of wealth and health from Black families and communities.

LIMITATIONS

While this report presents compelling first-of-its-kind information about how Black families with babies are experiencing the two pandemics—COVID-19 and racism—we are limited by our ability to fully capture how these experiences are impacting the health and well-being of families and children, or their coping mechanisms. For example, we are unable to confirm how parents interpreted the survey questions. In-depth studies centering the voices of Black families are needed to better understand how these families are flourishing even in the face of the twin pandemics. This will help to ensure that national and local programs and policies are created with the unique needs, experiences, and assets of Black families in mind.

