Parents Are Struggling to Provide for Their Families during the Pandemic

Material Hardships Greatest among Low-Income, Black, and Hispanic Parents

Michael Karpman, Dulce Gonzalez, and Genevieve M. Kenney

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The economic havoc and instability wreaked by the COVID-19 pandemic threatens the health and well-being of families across the nation. The adverse effects are particularly consequential for the nation’s 77 million children ages 18 and under, nearly 24 million of whom are younger than 6. Family employment instability and economic hardship can negatively affect the physical and mental well-being of children, particularly young children (Golberstein, Gonzales, and Meara 2019; Kalil 2013). In the early weeks of the pandemic, 1 in 4 parents with children under age 19, about the same share of parents with children under age 6, and more than 4 in 10 Hispanic parents in families with noncitizens reported food insecurity in their households in the past month.2 The pandemic is also disconnecting children from family, friends, schools, and familiar routines and placing significant stress on their parents, who are struggling to balance multiple responsibilities as providers, caregivers, and educators simultaneously.3

In addition to widespread job losses and reductions in work hours, families with children face challenges related to school and child care closures necessitated by the pandemic. With states seeking to reopen their economies as children stay home, many parents must arrange child care to return to work—or else forgo employment and make tough financial decisions to try to make ends meet.4 These decisions are likely to be especially challenging for parents without access to paid leave or who cannot work from home.5
Using data from the Urban Institute’s Health Reform Monitoring Survey (HRMS) collected in late March and early April, we find that more than 4 in 10 parents living with children younger than 19 reported that they or someone in their family lost a job, work hours, or work-related income because of the coronavirus outbreak. This proportion rises to about 5 in 10 for non-Hispanic black parents and low-income parents and to more than 6 in 10 for Hispanic parents. We also find that low-income parents were less likely to be able to work from home and more likely to have had difficulty arranging child care because of the outbreak than higher-income parents. The same holds true for Hispanic parents, who were less likely to be able to work from home and more likely to have had difficulty arranging child care than non-Hispanic white parents. Parents reported coping with the pandemic’s economic impacts by cutting back spending on food, reducing savings, and going into debt. But even with these coping mechanisms, many parents were struggling to meet their families’ basic needs: more than one-third of parents reported problems paying for housing, utility, food, or medical costs in the past month, including roughly half of low-income parents and black and Hispanic parents.

Results

More than 4 in 10 parents reported that they or someone in their family lost work or work-related income because of the coronavirus outbreak. This proportion rises to about 5 in 10 for non-Hispanic black parents and low-income parents and to more than 6 in 10 for Hispanic parents.

Parents were slightly more likely (43.3 percent; figure 1) than childless adults (40.5 percent; data not shown) to report that they or a family member lost a job, work hours, or work-related income because of the outbreak.

Among parents, disparities in job and income losses emerged by both family income and race/ethnicity. More than half (53.1 percent) of lower-income parents—with family incomes below 250 percent of the federal poverty level (FPL)—reported that someone in the family lost a job, work hours, or work-related income, compared with about one-third (33.5 percent) of parents with family incomes at or above 250 percent of FPL. Close to two-thirds (62.2 percent) of Hispanic parents and half of non-Hispanic black parents (49.7 percent) reported one or more of these negative economic impacts, whereas 36.5 percent of non-Hispanic white parents reported experiencing these impacts.

Among parents in families that lost jobs or income, 38.9 percent were living with a child under age 6, and 22.3 percent were either a noncitizen or living with a noncitizen family member (data not shown).
Low-income parents were less likely to be able to work from home and more likely to have had difficulty arranging child care than higher-income parents. The same holds true for Hispanic parents, who were less likely to be able to work from home and more likely to have had difficulty arranging child care than non-Hispanic white parents.

Nearly three-quarters (73.4 percent) of parents were employed at the time of the survey, including 62.2 percent of parents with family incomes below 250 percent of FPL and 84.7 percent of parents with family incomes at or above that threshold (table 1).

Among all working parents, only about 4 in 10 (41.5 percent) can do at least part of their jobs from home. However, working parents with incomes at or above 250 percent of FPL are more than twice as likely to be able to work from home as working parents with lower incomes (54.2 percent versus 24.4 percent). Such differences are similar by ethnicity: 46.6 percent of non-Hispanic white working parents can work from home, compared with 23.4 percent of Hispanic working parents. A previous analysis found that non-Hispanic black adults (both parents and those not living with children) were less likely than non-Hispanic white adults to be able to work from home (Karpman et al. 2020). Lower-income working parents are also less likely than higher-income working parents to have access to paid sick leave, and Hispanic working parents are less likely to have access to paid sick leave than non-Hispanic white working parents.
TABLE 1
Share of Parents Ages 18 to 64 Who Are Employed, Can Work from Home, and Have Paid Sick Leave, Overall and by Family Income and Race/Ethnicity, March/April 2020
Percent

<table>
<thead>
<tr>
<th>Share employed</th>
<th>Employed Parents</th>
<th>Share who can work from home</th>
<th>Share with paid sick leave</th>
</tr>
</thead>
<tbody>
<tr>
<td>All parents</td>
<td>73.4</td>
<td>41.5</td>
<td>65.2</td>
</tr>
<tr>
<td>By family income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 250% of FPL^</td>
<td>62.2</td>
<td>24.4</td>
<td>50.1</td>
</tr>
<tr>
<td>250% of FPL or more</td>
<td>84.7***</td>
<td>54.2***</td>
<td>76.4***</td>
</tr>
<tr>
<td>By race/ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic white^</td>
<td>78.0</td>
<td>46.6</td>
<td>69.5</td>
</tr>
<tr>
<td>Non-Hispanic black</td>
<td>69.1***</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Hispanic</td>
<td>63.3***</td>
<td>23.4***</td>
<td>48.6***</td>
</tr>
</tbody>
</table>

Source: Health Reform Monitoring Survey, quarter 1 2020. The survey was conducted between March 25 and April 10, and 74.5 percent of respondents completed the survey by March 31.
Notes: FPL is federal poverty level. Parents include biological parents, stepparents, and guardians of children under age 19 living in the household. Estimates for the shares of non-Hispanic black working parents who can work from home and have paid sick leave are not shown (—) because of sample size limitations.
*/**/*** Estimate differs significantly from reference category (^) at the 0.10/0.05/0.01 level, using two-tailed tests.

Differences by income and race/ethnicity in parents’ abilities to work from home likely contribute to their differing employment experiences during the pandemic. Higher-income parents were far more likely than lower-income parents to report that they or a family member worked from home because of the coronavirus outbreak, and non-Hispanic white parents were more likely than non-Hispanic black parents and Hispanic parents to report that they or a family member worked from home (table 2).

Most parents report that their children have had to stay home because of school or child care closures resulting from the pandemic. Among all parents, 83.7 percent reported their children are staying home for this reason, including 76.6 percent of parents with children under age 6 (data not shown). Because of these closures, parents have faced new challenges managing work and caregiving responsibilities. One in three parents (33.3 percent) reported that someone in their family stayed home from work to care for children, and one in six parents (16.5 percent) reported difficulties arranging child care because of the outbreak (table 2). Lower-income parents were more likely than higher-income parents to report that their families had difficulty arranging child care because of the outbreak (18.1 percent versus 15.0 percent), and Hispanic parents were more likely than non-Hispanic white parents to have had difficulty arranging child care (21.5 percent versus 14.4 percent). Though these differences are statistically significant, they are relatively small in magnitude, suggesting child care availability is a challenge for parents across the income scale and the racial and ethnic groups we examined.
The shortage of child care options likely creates particular challenges for parents who must work outside the home and find care. Child care issues were also more prevalent among parents of young children: about 1 in 4 parents (25.4 percent) of children under age 6 reported difficulty arranging child care, compared with 1 in 10 parents (10.2 percent) whose children are all ages 6 and older (data not shown).

TABLE 2
Share of Parents Ages 18 to 64 Reporting Selected Impacts of the Coronavirus Outbreak on Family Employment and Caregiving, Overall and by Family Income and Race/Ethnicity, March/April 2020

<table>
<thead>
<tr>
<th>Percent</th>
<th>Share with someone in family who worked from home because of outbreak</th>
<th>Share with someone in family who had to stay home from work to care for children</th>
<th>Share with difficulty arranging child care because of outbreak</th>
</tr>
</thead>
<tbody>
<tr>
<td>All parents</td>
<td>44.5</td>
<td>33.3</td>
<td>16.5</td>
</tr>
<tr>
<td>By family income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 250% of FPL^</td>
<td>24.5</td>
<td>31.1</td>
<td>18.1</td>
</tr>
<tr>
<td>250% of FPL or more</td>
<td>64.7***</td>
<td>35.5*</td>
<td>15.0*</td>
</tr>
<tr>
<td>By race/ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic white^</td>
<td>52.0</td>
<td>30.6</td>
<td>14.4</td>
</tr>
<tr>
<td>Non-Hispanic black</td>
<td>36.8***</td>
<td>36.7</td>
<td>17.5</td>
</tr>
<tr>
<td>Hispanic</td>
<td>24.1***</td>
<td>34.9</td>
<td>21.5***</td>
</tr>
</tbody>
</table>

Source: Health Reform Monitoring Survey, quarter 1 2020. The survey was conducted between March 25 and April 10, and 74.5 percent of respondents completed the survey by March 31.

Notes: FPL is federal poverty level. Parents include biological parents, stepparents, and guardians of children under age 19 living in the household.

*/**/*** Estimate differs significantly from reference category (^) at the 0.10/0.05/0.01 level, using two-tailed tests.

Parents reported coping with the pandemic’s economic impacts by cutting back spending on food, reducing savings, and going into debt.

Many parents reported making difficult financial decisions because of the impact of the outbreak on their families. Of all parents, 49.6 percent reported that their family put off major purchases, 31.0 percent reported their family cut back spending on food, and 30.2 percent reported that their family cut into savings or increased credit card debt (table 3).

Parents in the groups most likely to report that their families lost work and work-related income were also most likely to reduce spending on food and tap savings or debt in response to the crisis: lower-income parents were twice as likely as higher-income parents to cut back spending on food (41.4 percent versus 20.5 percent), an action also taken by 36.4 percent of non-Hispanic black parents and 45.9 percent of Hispanic parents.

Lower-income parents were also about two and a half times as likely as higher-income parents to report reducing savings or increasing credit card debt (43.8 percent versus 16.4 percent), and Hispanic parents and non-Hispanic black parents were about twice as likely as non-Hispanic white parents to
report doing so (47.3 percent and 43.3 percent versus 22.0 percent), potentially widening racial and ethnic wealth gaps.  

TABLE 3  
Share of Parents Ages 18 to 64 Reporting Selected Impacts of the Coronavirus Outbreak on Family Financial Decisions, Overall and by Family Income and Race/Ethnicity, March/April 2020  
Percent

<table>
<thead>
<tr>
<th></th>
<th>Share whose families put off major purchases</th>
<th>Share whose families cut back spending on food</th>
<th>Share whose families reduced savings or increased credit card debt</th>
</tr>
</thead>
<tbody>
<tr>
<td>All parents</td>
<td>49.6</td>
<td>31.0</td>
<td>30.2</td>
</tr>
<tr>
<td>By family income</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 250% of FPL^</td>
<td>55.7</td>
<td>41.4</td>
<td>43.8</td>
</tr>
<tr>
<td>250% of FPL or more</td>
<td>43.5***</td>
<td>20.5***</td>
<td>16.4***</td>
</tr>
<tr>
<td>By race/ethnicity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Hispanic white^</td>
<td>44.4</td>
<td>24.4</td>
<td>22.0</td>
</tr>
<tr>
<td>Non-Hispanic black</td>
<td>55.4**</td>
<td>36.4***</td>
<td>43.3***</td>
</tr>
<tr>
<td>Hispanic</td>
<td>59.8***</td>
<td>45.9***</td>
<td>47.3***</td>
</tr>
</tbody>
</table>

Source: Health Reform Monitoring Survey, quarter 1 2020. The survey was conducted between March 25 and April 10, and 74.5 percent of respondents completed the survey by March 31.  
Notes: FPL is federal poverty level. Parents include biological parents, stepparents, and guardians of children under age 19 living in the household. The share reporting that their families reduced savings or increased credit card debt reported that their families did at least one of the following because of the impact of the coronavirus outbreak: used up all or most savings; took money out of retirement, college, or other long-term savings accounts; or increased credit card debt.  
*/*/**/*** Estimate differs significantly from reference category (^) at the 0.10/0.05/0.01 level, using two-tailed tests.

More than one-third of parents reported problems paying for housing, utility, food, or medical costs in the past month, including roughly half of low-income parents and black and Hispanic parents.

Among all parents, 33.8 percent reported that their families did one or more of the following in the 30 days before the survey: did not pay the full amount of the rent or mortgage or were late with a payment because they could not afford to pay (10.5 percent); did not pay the full amount of gas, oil, or electricity bills (13.0 percent); experienced household food insecurity (24.6 percent); or had someone in the family go without medical care because they could not afford it (15.7 percent; figure 2).

About half of lower-income parents (52.5 percent), Hispanic parents (51.7 percent), and non-Hispanic black parents (48.2 percent) reported one or more of these hardships. Household food insecurity was the most commonly reported hardship, affecting more than one-third of the families of lower-income, black, and Hispanic parents. Particularly concerning is that 9.3 percent of parents, including about 10.8 percent of parents of children younger than 6, 17.5 percent of non-Hispanic black parents, and 13.0 percent of Hispanic parents, reported very low household food security. Though parents in households with very low food security often skip meals to protect their children from hunger, their older children may also employ similar strategies to protect their younger siblings, and the stress of living in households with very low food security can be detrimental to children of all ages (Nord 2013; Popkin, Scott, and Galvez 2016; Waxman, Popkin, and Galvez 2015).
FIGURE 2
Share of Parents Ages 18 to 64 Reporting That Their Families Experienced Material Hardship in the Last 30 Days, March/April 2020

Overall and by family income

<table>
<thead>
<tr>
<th></th>
<th>All parents</th>
<th>Family income below 250% of FPL</th>
<th>Family income at or above 250% of FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any material hardship</td>
<td>52.5%</td>
<td>15.0%***</td>
<td>33.8%</td>
</tr>
<tr>
<td>Did not pay full amount of rent or mortgage or was late with payment</td>
<td>10.5%</td>
<td>17.3%</td>
<td>10.5%</td>
</tr>
<tr>
<td>Unable to pay full amount of gas, oil, or electricity bills</td>
<td>13.0%</td>
<td>21.4%</td>
<td>13.0%</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>24.6%</td>
<td>40.7%</td>
<td>24.6%</td>
</tr>
<tr>
<td>Unmet need for medical care in family because of costs</td>
<td>15.7%</td>
<td>23.7%</td>
<td>15.7%</td>
</tr>
</tbody>
</table>

By race/ethnicity

<table>
<thead>
<tr>
<th></th>
<th>Non-Hispanic white</th>
<th>Non-Hispanic black</th>
<th>Hispanic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any material hardship</td>
<td>51.7%***</td>
<td>48.2%***</td>
<td>48.2%***</td>
</tr>
<tr>
<td>Did not pay full amount of rent or mortgage or was late with payment</td>
<td>25.8%</td>
<td>20.6%***</td>
<td>20.6%***</td>
</tr>
<tr>
<td>Unable to pay full amount of gas, oil, or electricity bills</td>
<td>20.6%***</td>
<td>18.3%***</td>
<td>18.3%***</td>
</tr>
<tr>
<td>Food insecurity</td>
<td>37.4%***</td>
<td>39.3%***</td>
<td>39.3%***</td>
</tr>
<tr>
<td>Unmet need for medical care in family because of costs</td>
<td>12.7%</td>
<td>23.1%***</td>
<td>23.1%***</td>
</tr>
</tbody>
</table>

Source: Health Reform Monitoring Survey, quarter 1 2020. The survey was conducted between March 25 and April 10, and 74.5 percent of respondents completed the survey by March 31.

Notes: FPL is federal poverty level. Parents include biological parents, stepparents, and guardians of children under age 19 living in the household. Respondents who reported any material hardship in the last 30 days reported one or more of the material hardships specified here. For the top figure, estimates with asterisks (*/**/***)) differ significantly from those for parents with family incomes below 250 percent of FPL at the 0.10/0.05/0.01 level, using two-tailed tests. For the bottom figure, estimates with asterisks differ significantly from those for non-Hispanic white parents at the 0.10/0.05/0.01 level, using two-tailed tests.
Discussion

Previous analyses of the HRMS found widespread losses of employment and income in the early weeks of the pandemic, which were most prevalent among the families of low-income and Hispanic adults, particularly Hispanic adults in families with noncitizens (Gonzalez et al. 2020; Karpman et al. 2020). The findings in this brief show the adverse impact the pandemic had on the well-being of families with children as of late March/early April, as well as the disparities in these impacts by family income and race/ethnicity. Parents who are black or Hispanic and parents with lower incomes are disproportionately represented among families that lost jobs, work hours, or work-related income because of the outbreak. Though roughly one-third of parents reported one or more material hardships in the 30 days before completing the survey, these hardships were much more prevalent among families of lower-income and black and Hispanic parents.

Parents in lower-income families faced high levels of both material hardship and psychological distress before the outbreak (Karpman et al. 2018; Sandstrom, Adams, and Pyati 2019), and the pandemic and related hardships on families are likely exacerbating these problems and severely taxing parents’ and children’s mental health. Parents’ stresses and mental health problems are often transmitted to children, and children’s prolonged exposure to stress is associated with poor developmental outcomes (National Scientific Council on the Developing Child 2014).

Policy Solutions

Below, we discuss potential policy responses that would help address the hardships and caregiving challenges parents are facing during the pandemic.

Material hardships. Families' increased difficulties covering basic expenses are coinciding with school closures, presenting additional challenges in meeting children’s health and nutritional needs. Though schools are continuing to offer food to students during the pandemic, logistical and other barriers are making it more difficult for children to receive the lunches and breakfasts they would typically receive at school. Likewise, lack of access to school-based health services and other health care services in the community, including behavioral health, could exacerbate unmet health needs among children and youth (Ali et al. 2019; Lipari et al. 2016). The recent slowdown in vaccination rates among children demonstrates that many are going without check-ups and primary care services because of the COVID-19 crisis (Santoli et al. 2020). For children contending with health problems before the pandemic, these growing economic hardships and disruptions to schooling and health care access are likely to further impede their academic achievement and contribute to worse health outcomes in the long run.

Addressing the hardships parents and their children are currently facing will be key to mitigating the pandemic’s harmful impacts. Additional federal funding is needed to address families’ pressing food, health, and housing needs. Increasing the maximum benefit for the Supplemental Nutrition Assistance Program and providing schools with resources to continue providing school-based meals to children throughout the summer are both critical for protecting children and their families from hunger
and its detriments to health and development (Schwabish et al. 2020; Waxman, Gundersen, and Thompson 2018). As job losses lead to losses of employer-sponsored health insurance, incentives for Medicaid expansion, increased funding for outreach and enrollment assistance, new subsidies for Marketplace health insurance coverage, and offering a national special enrollment period for Marketplace coverage related to the pandemic would help families maintain coverage and continue receiving needed care (Blumberg et al. 2020; Gangopadhyaya and Garrett 2020; Garrett and Gangopadhyaya 2020). Expanding eviction moratoria, providing direct payments to help families pay the rent or mortgage on time, and implementing moratoria on utility shutoffs would help ensure children do not suffer housing instability or homelessness (Goodman and Magder 2020). Because the pandemic has had a disproportionate effect on families with noncitizens (Gonzalez et al. 2020), minimizing harm for children with immigrant parents, who are predominantly US citizens, will require providing supports to families regardless of parental immigration status (Artiga and Damico 2018).

**Caregiving challenges.** We find that the parents most likely to experience adverse employment effects are also least likely to have jobs with benefits that afford them more flexibility and protection, increasing the burden on family caregiving. Many lower-income working parents and Hispanic working parents reported being unable to do their jobs from home or not having access to paid sick leave at their current jobs. Lower-income parents and Hispanic parents were also more likely to report that their families faced difficulties arranging child care at a time when most children are staying home because of school and child care closures.

As states seek to reopen their economies, many working parents with younger children will likely face difficult choices managing their employment and caregiving responsibilities. Most lower-income working parents cannot do their jobs from home and will need child care for their children. Yet many programs are closed and how they can safely reopen remains unclear, despite the guidelines recently released by the Centers for Disease Control and Prevention. In addition, many programs that are still open are facing major financial challenges because of reduced enrollment and increased health and safety requirements. Adding to the uncertainty, it is unclear what child care settings parents will feel comfortable using given concerns about virus transmission, particularly while safety guidelines are still being developed. Though some low-income working parents may be able to rely on family members, friends, and neighbors to provide care for their young children, others may be unable to return to work because of a lack of child care options (Corcoran and Steinley 2019). Finally, evidence shows that high-quality early care and education settings help establish a foundation for lifelong learning and can particularly benefit children who face extra challenges (Reynolds, Ou, and Temple 2018). Yet such care has frequently been hard to find and afford (Halpin, Agne, and Omero 2018)—a problem that will likely worsen because of the pandemic’s impact on the child care field.

Addressing caregiving challenges could mitigate hardships for parents and their children. The Families First Coronavirus Response Act, later amended by the Coronavirus Aid, Relief, and Economic Security, or CARES, Act, provided funding for emergency paid sick leave and paid family and medical leave to workers needing to take time off for a qualifying reason related to COVID-19, such as workers ordered to self-quarantine or needing to care for a child whose school or child care location is
closed because of the pandemic. However, the Families First Coronavirus Response Act excludes firms with more than 500 employees from its paid leave requirements and allows small firms to seek exemptions from these requirements, disproportionately leaving out low-wage workers (CLASP 2020). Expanding federal paid leave policies to cover more families could help stabilize parents’ employment (Smalligan, Boyens, and Gould-Werth 2020). This support would be especially important for parents in states that reopen some businesses while schools, child care centers, or camps remain closed. Policies that address the child care needs of parents who must continue going to work are also vital. Some states have sought to address child care needs during this period by keeping child care programs open for essential workers and providing funding to help parents pay for caregivers. However, families will likely need more assistance to maintain employment and arrange child care.

The COVID-19 crisis has caused significant disruption to children’s daily lives, and the findings in this brief underscore the many ways in which the pandemic poses risks to children’s health, well-being, and development. Ensuring children’s home environments remain as stable as possible and that their educational, nutritional, physical, and mental health needs are met will be paramount to helping families and communities weather the current crisis and to minimizing adverse economic, health, and emotional effects on children.

Data and Methods

This brief draws on data from the March/April 2020 round of the Urban Institute’s Health Reform Monitoring Survey, a nationally representative, internet-based survey of nonelderly adults. Launched in 2013, the HRMS was originally designed to provide timely information on the Affordable Care Act before federal survey data became available. In 2020, the Urban Institute updated the design and content of the HRMS to focus on the impact of the novel coronavirus outbreak and support analyses of vulnerable populations so that the survey continues to provide timely data on critical policy issues. A total of 9,032 adults ages 18 to 64 participated in the March/April 2020 HRMS, which was fielded between March 25 and April 10, with about three-quarters of respondents completing the survey by March 31. The HRMS sample is drawn from Ipsos’s KnowledgePanel, the nation’s largest probability-based online panel. The panel is recruited from an address-based sampling frame covering 97 percent of US households and includes households with and without internet access. Estimates are weighted to represent the national population of nonelderly adults based on benchmarks from the Current Population Survey and American Community Survey. Participants can take the survey in English or Spanish. Additional information about the March/April 2020 HRMS can be found in a previous brief (Karpman et al. 2020).
Notes


6 We define parents as adults who report being parents or guardians of children or stepchildren under age 19 who live with them.


8 Waxman, "Many Families Are Struggling to Put Food on the Table. We Have to Do More," Urban Wire.

9 Waxman, "Many Families Are Struggling to Put Food on the Table. We Have to Do More," Urban Wire.


13 Waxman, "Many Families Are Struggling to Put Food on the Table. We Have to Do More," Urban Wire.


21 For more information on the Health Reform Monitoring Survey, visit http://hrms.urban.org/.

References


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About the Authors

**Michael Karpman** is a senior research associate in the Health Policy Center at the Urban Institute. His work focuses primarily on the implications of the Affordable Care Act, including quantitative analysis related to health insurance coverage, access to and affordability of health care, use of health care services, and health status. His work includes overseeing and analyzing data from the Urban Institute's Health Reform Monitoring Survey and Well-Being and Basic Needs Survey. Before joining Urban in 2013, Karpman was a senior associate at the National League of Cities Institute for Youth, Education, and Families. He received his MPP from Georgetown University.

**Dulce Gonzalez** is a research analyst in the Health Policy Center. Before joining Urban, she interned at the Georgetown University Center for Children and Families, where she conducted qualitative and quantitative analyses on Medicaid, the Children's Health Insurance Program, and the Affordable Care Act. Gonzalez has also worked at the nonprofit organization Maternal and Child Health Access, where she evaluated health and well-being outcomes for women in the Welcome Baby Program, a perinatal home visiting program. She received her MPP from Georgetown University.

**Genevieve M. Kenney** is a senior fellow and vice president for health policy at the Urban Institute. She has conducted policy research for more than 25 years and is a nationally renowned expert on Medicaid, the Children's Health Insurance Program (CHIP), and broader health insurance coverage and health issues facing low-income children and families. Kenney has led several Medicaid and CHIP evaluations and published more than 100 peer-reviewed journal articles and scores of briefs on insurance coverage, access to care, and related outcomes for low-income children, pregnant women, and other adults. In her current research, she is examining the implications of the Affordable Care Act and emerging policy questions related to Medicaid and CHIP. She received a master's degree in statistics and a doctoral degree in economics from the University of Michigan.
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