

## Pandemic Relief Funding for Georgia's ECE Providers Through Short-term Assistance Benefit for Licensed Entities (STABLE)

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During the COVID-19 pandemic, Georgia's Department of Early Care and Learning (DECAL) used state and federal pandemic relief funding to implement approximately 30 initiatives to stabilize the early care and education (ECE) industry and support young children and their families. Of those initiatives, the largest was Short-term Assistance Benefit for Licensed Entities (STABLE), which provided funds to support and stabilize the child care industry. This snapshot summarizes findings specific to STABLE from Child Trends' larger evaluation of DECAL's pandemic relief initiatives. Additional evaluation findings, along with details about the study design, can be found in companion briefs and reports on <a href="DECAL's website">DECAL's website</a>. Throughout, we include quotes from ECE providers to contextualize our findings.

STABLE provided four rounds of funding to licensed center-based and family child care providers. The fourth round of funding was the largest, with a requirement that providers use at least 70 percent of funds for workforce supports and relief for families.<sup>1</sup>

More than 3,800 providers (80-90% of all licensed providers) received at least one round of stabilization funding through STABLE. Over three quarters of providers received STABLE at each round, and almost 3,000 providers received all four rounds of STABLE funding. Funding amounts varied depending on program size and type.

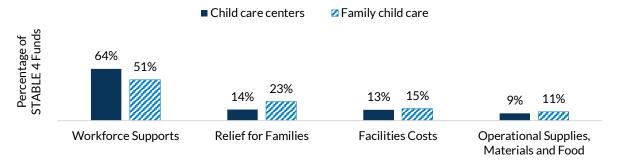
Providers reported that the most helpful pandemic relief projects were those with flexible funds, such as STABLE, where providers could choose how to spend the funds. During the first three rounds of STABLE, center-based programs spent over one third of their funds on retaining or hiring teachers, and family child care providers spent over a third on facilities (e.g., repairs/improvements). In the fourth and largest round of STABLE, centers allocated about two thirds of their STABLE funds to workforce supports, while family child care providers allocated about half of their funds for this purpose (see Figure 1).

"I started my daycare and got licensed right smack dab in the middle of COVID, like as soon as COVID started is when I got licensed. So it was like a sink or swim situation. So when the funding came about, I can't even tell you how relieved I was. Not so much because I'm getting so much money, but because I'm able to keep my doors open. My dream doesn't have to die, you know, the passion I have. I can continue on with it."

"We have had such low turnover since the stabilization grant of being able to give the raises ... So having STABLE, it really helped us be able to kind of meet those gaps."

<sup>&</sup>lt;sup>1</sup> In addition to STABLE, there were other pandemic relief initiatives that provided direct support and relief to families.

**Figure 1.** Percentage of STABLE funds in the fourth round allocated to different categories of spending, by provider type

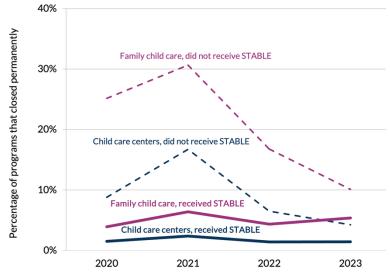


Source: Child Trends' analysis of STABLE funds data.

Note: STABLE funding used for relief for families was in addition to other pandemic relief initiatives that provided direct support to families.

Child care centers and family child care providers that participated in STABLE had significantly lower permanent closure rates than programs that did not, and family child care providers that did not participate in STABLE had the highest closure rates (see Figure 2). This pattern of permanent closures was especially evident during the first two years of the COVID-19 pandemic.<sup>2</sup>

**Figure 2.** Permanent program closure rates from 2020 to 2023 for providers that did and did not receive STABLE, by provider type



Source: Child Trends' analysis of STABLE funds and licensing data

Overall, providers appreciated having flexible funding that allowed them to choose how to spend the funds. Almost all licensed providers in Georgia received at least one round of STABLE funding, and providers that participated in STABLE had significantly lower permanent closure rates than programs that did not.

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<sup>&</sup>lt;sup>2</sup> These analyses cannot rule out alternative explanations for these patterns, such as organizational capacity, so we cannot know whether STABLE funding was responsible for keeping programs open.