

Supplementary Online Content

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eAppendix. Study Survey

This supplementary material has been provided by the authors to give readers additional information about their work.

eAppendix. Study Survey

SURVEY QUESTIONS

Below are the questions used in the present analyses as presented in the baseline (May/June 2020) and follow-up (May/June 2021) surveys.

BASELINE SURVEY QUESTIONS

1. Do you typically work in child care EITHER as a child care provider who works directly with children OR as a child care director or administrator who works in a program that provides child care? (Please select “Yes” if you work in home-based or family-based child care, nanny/in-home child care, or center-based child care, such as a child care program, Head Start or any other program that provides care for young children.)
 - Yes
 - No, I don’t provide child care or work in a child care program

2. Which of the following most accurately describes you? (*please check all that apply*)
 - Female
 - Male
 - Non-binary
 - Transgender
 - Intersex
 - I will specify..._____
 - I prefer not to answer

3. Are you of Hispanic, Latino or Spanish origin? (*please check one*)
 - Yes
 - No
 - I prefer not to answer

4. How would you describe yourself? (*please check all that apply*)
 - American Indian or Alaskan Native
 - Asian
 - Black or African American
 - Native Hawaiian or Other Pacific Islander
 - White
 - Other_____
 - I prefer not to answer

5. How old are you in years?
 - under 18
 - 18-24
 - 25-34
 - 35-44
 - 45-54

- 55-64
- 65-74
- 75-84
- 85 or older
- I prefer not to answer

6. Which of the following best describes your child care program or service?
- Center-based Child Care (such as a child care program, Head Start, etc.)
 - For-profit center
 - Not-for-profit agency center
 - School-based
 - Head Start or Early Head Start
 - Drop-in child care (the children change every day)
 - Faith-based child care program
 - Other center-based _____
 - Home-based or Family Child Care (providing child care in your own home)
 - Nanny or In-Home Child Care (providing child care in the children's homes)
7. Did your program ever close for any amount of time because someone (either staff, a child, or someone else) had COVID-19 or had symptoms similar to COVID-19?
- Yes
 - No
8. Currently, about how many children are served in your entire child care center? (Please include all children in the entire program site, even children not specifically in your classroom. If you do not know the exact number, please provide your best estimate.)
- a. Total children served in entire child care center?
 - 1-25
 - 26-50
 - 51-100
 - 101-150
 - 151-200
 - 201 or more
 - b. Of the number above, how many children are 0 years old?
 - 1-10
 - 11-25
 - 26-50
 - 51-75
 - 76-100
 - 101 or more
 - c. Of the number above, how many children are 1-2 years old? [*Same options as (b)*]
 - d. Of the number above, how many children are 3-5 years old? [*Same options as (b)*]

- e. Of the number above, how many children are 6 years old or older? [*Same as (b)*]
9. Currently, about how many adults work on a regular basis in your entire child care center? (*Please include all adults in the entire program site, even adults not specifically in your classroom. If you do not know the exact number, please provide your best estimate.*)
- 1-5
 - 6-10
 - 11-20
 - 21-25
 - 26-30
 - 31-35
 - 36 or more

10. Please answer the following questions based on what you or someone else in your classroom or program were able to do throughout most of the month of April, for the days your program was open.

	<u>Never</u>	<u>Some days</u>	<u>Most days</u>	<u>Every Day</u>
a. Someone screened <u>all children</u> for COVID-19 symptoms <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Someone screened <u>all staff</u> for COVID-19 symptoms <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Someone checked <u>all</u> children's temperatures <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Someone checked <u>all</u> staff temperatures <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. <u>All</u> other adults wore a mask or facial covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. <u>All</u> children (2 years and older) wore a mask or facial covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Someone ensured that <u>all</u> seating and bedding/cots were at least 6 feet apart at <u>all</u> times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. The program staggered arrival and pick up times to limit physical congestion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. <u>All</u> children were picked up and dropped off outside of the program (families did <u>not</u> come inside)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOLLOW-UP SURVEY QUESTIONS

1. We are sending this survey to you because you completed a survey for us last Spring 2020 and said you were interested in participating in follow-up surveys.

This survey is for anyone who is either currently employed as a child care provider OR has worked in child care at any point during or just prior to the pandemic. This includes but is not limited to:

- Center-based Child Care Providers
- Home-based or Family Child Care Providers
- Nanny or In-Home Child Care Providers
- Child Care Providers that are OR have been working in-person
- Child Care Providers that are OR have been working remotely or online
- Child Care Providers that have been laid off
- Child Care Providers whose program is now temporarily OR permanently closed
- Other Child Care Support Professionals, such as nurses, therapists, psychologists, consultants, supervisors, etc.

Do you consent to participation in this survey? (*please select one.*) [presented with consent form]

- Yes, let's go!
- No, I'm positive I did not complete a child care survey from Yale in Spring 2020 or I've never worked in a child care program.
- No, I completed the first survey, but I don't want to complete this one.

2. Did either your current or former child care program ever close for any amount of time because someone (either staff, a child, or someone else) had COVID-19 or had symptoms similar to those of COVID-19?

- Yes
- No

3. Please answer the following questions based on what you or someone else in your classroom or program are currently able to do, for the days your program is open.

	<u>Never</u>	<u>Some days</u>	<u>Every Day</u>
a. Someone screens <u>all children</u> for COVID-19 symptoms <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Someone screens <u>all staff</u> for COVID-19 symptoms <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Someone checks <u>all</u> children's temperatures <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Someone checks <u>all</u> staff temperatures <u>at least 1 time per day</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. <u>All</u> other adults wear a mask or facial covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. <u>All</u> children (2 years and older) wear a mask or facial covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Someone ensures that <u>all</u> seating and bedding/cots are at least 6 feet apart at <u>all</u> times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- h. The program staggers arrival and pick up times to limit physical congestion
- i. All children are picked up and dropped off outside of the program (families did not come inside)