

QUALITY INFANT-TODDLER CHILD CARE

With our country facing increasingly tough economic times, and a growing number of mothers entering the labor force to help support their families, child care is more important than ever to families and to the overall health and well-being of our country. Second only to the immediate family, child care is the setting in which early childhood development unfolds for nearly six million children under age 3.¹ Quality child care offers the promise of a solid future by providing our youngest children nurturance, support for early learning and language development, preparation for school, and the opportunity for all infants and toddlers to reach their full potential. Child care is no longer viewed as simply a basic support for parents, but an exciting opportunity to promote the early education of young children. It is also a significant component of the economic infrastructure of states—providing long-term benefits for the government, businesses, and workers in terms of jobs, revenue, and future economic success.²

Research indicates that the strongest effects of quality child care are found with at-risk children—children from families with few resources and under great stress. Unfortunately, at-risk infants and toddlers often receive poor quality child care that can diminish their potential and lead to poor cognitive, social, and emotional developmental outcomes.³ Research suggests that even small improvements in staff ratios and training and modest caregiver compensation initiatives can produce considerable improvements in the observed quality of care for young children.⁴ Yet our nation's child care policies are not being influenced by this knowledge. Federal and state policymakers can act now to ensure that families are able to seize the potential of quality child care for their infants and toddlers.



Continuity of Care

When infants and toddlers are in non-parental care, they need to form a secure attachment to their child care providers in order to thrive. Young children can only form these critical attachments when their child care providers remain stable over time.⁵ Leading experts agree that having one primary caregiver for more than a year, and optimally from entry into child care until the child is at least 3 years of age, is critical for an infant's emotional development.⁶ When a child experiences too many changes in caregivers, it can lead to reluctance to form new relationships.⁷

FAST FACTS

● More than **12 million** infants and toddlers live in the United States—almost half live in low-income or poor families.⁹

● **56%** of mothers with children under the age of 3 are employed.¹⁰

● Each day nearly **6 million** children under 3 spend some or all of their day being cared for by someone other than their parents.¹¹

● More than **40%** of infants and toddlers are in child care classrooms of poor quality.¹²

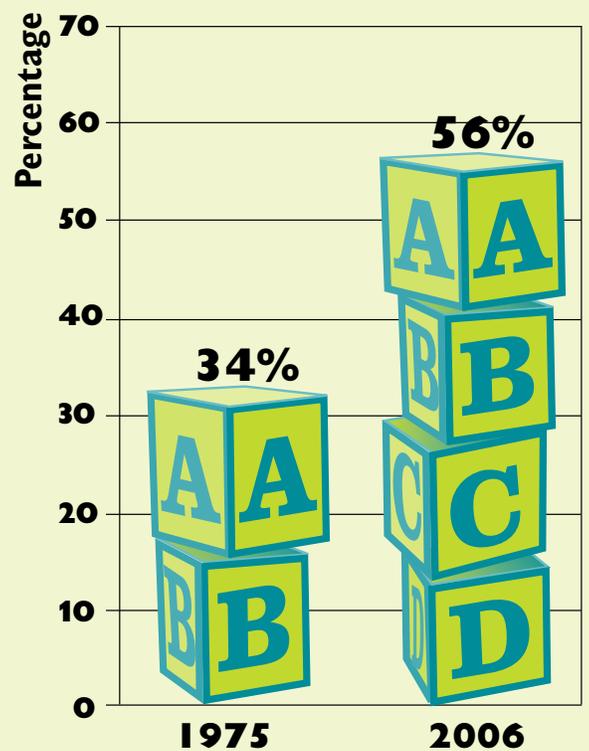


1. Increase funding for the Child Care and Development Block Grant (CCDBG). All babies and toddlers, particularly those living in poverty, need access to quality child care when their parents are at work. Twenty-eight percent of children served through the Child Care and Development Block Grant (CCDBG) are infants and toddlers. Although the recent economic recovery package included 2-year supplemental funding for CCDBG, additional resources will be required to meet increasing demand for services. Federal policymakers should increase funding for CCDBG to help ensure that more low-income infants and toddlers have access to quality child care settings.

2. Substantially increase the infant toddler targeted funds as funding for CCDBG grows. The infant-toddler targeted funds of the CCDBG, currently allocated through the appropriations process, sets aside funds for activities specifically designed to improve the quality of infant and toddler care. Although the recent economic recovery package included an increase of \$93.6 million to improve the quality of infant and toddler care, additional resources will be required to enhance quality initiatives. Federal policymakers should increase the funds targeted for infants and toddlers and include these funds in the CCDBG reauthorizing legislation to help states invest in specialized infant-toddler provider training, provide technical assistance to programs and practitioners, and link compensation with training and demonstrated competence—all of which enhance quality and, in turn, lead to later school success.

3. Allocate sufficient state funding so that rates can be set at the levels needed for programs to provide high quality infant and toddler care. The amount of funding states choose to make available to pay providers and caregivers for serving subsidized children directly affects the quality of care the children receive, particularly for babies and toddlers.¹⁵ The more funding a regulated child care program or setting receives per child, the more dollars that program can use to attract and retain highly qualified staff and to finance other quality features. High quality licensed infant and toddler care is more expensive for programs to offer,¹⁶ due to additional quality requirements such as fewer children per child care provider; more space per child, special equipment (e.g., cribs), and additional health and safety requirements (e.g., sanitary areas for diaper changing). States should ensure that adequate funding is available so that rates can be set at the levels needed to ensure that programs can provide high quality infant and toddler care.

Percentage of Women in the Labor Force with Children Under 3





4. Improve compensation for providers working with infants and toddlers. Child care programs are struggling to attract and retain well-qualified individuals to work with infants and toddlers because of poor compensation. In 2006, the national average wage for a child care worker was only \$9.05 per hour or \$18,820 annually, below the federal poverty rate, and many child care workers do not receive benefits.¹⁷ Even when child care providers enjoy their work, they often cannot afford to stay in the field. This creates high turnover and instability, which interferes with continuity of care. Federal and state lawmakers should provide more funding to ensure that providers are adequately compensated, which is vital to ensuring the stability of a qualified early childhood workforce.

5. Establish a statewide network of infant and toddler specialists who provide technical assistance and support to individuals who are providing care to children under the age of 3. Many states have created infant-toddler specialist networks to support the infant-toddler caregiver workforce and improve the quality and availability of infant-toddler child care.¹⁸ Infant-toddler specialists typically include child development, mental health, family support, and health professionals. They provide support to caregivers and employ a variety of approaches including mentoring, coaching, consultation, training, technical assistance, and referral.¹⁹ Guidance and support may be provided on issues such as social and emotional health, early development, family support, and program quality. Policymakers should dedicate funds to establish a statewide network of infant and toddler specialists to support the individuals who are providing care to children under 3.

6. Strengthen licensing standards to address the unique needs of infants and toddlers. Licensing standards for regulated child care settings are vitally important to promote key elements needed for high-quality infant-toddler care. Infants and toddlers have unique needs that cannot be ignored when states create their licensing standards. For example, very young children need developmentally appropriate care with higher staff-to-child ratios and smaller group sizes than those for older children. Policymakers should ensure that state licensing standards address ratios/group size, health and safety concerns unique to infants and toddlers, and training specific to very young children, and that state child care agencies monitor and enforce licensing standards.

7. Design Quality Rating and Improvement Systems (QRIS) inclusive of infants and toddlers. Many states are implementing Quality Rating and Improvement Systems (QRIS) to establish a method for both defining and promoting quality in child care settings.²⁰ Importantly, the elements included in the QRIS apply to the care of all children. Given the unique developmental needs of infants and toddlers, their care should be the subject of specialized criteria and standards. For example, states should require that infants are served in

Policymakers should dedicate funds to establish a statewide network of infant and toddler specialists to support the individuals who are providing care to children under 3.



smaller group sizes than toddlers and that principles related to quality care for babies, such as continuity of care and safe sleep policies, are supported. As of May 2008, 17 states had a statewide QRIS—seven of these states required that infants be served in smaller groups than toddlers and six states required lower ratios for infants and toddlers in their QRIS standards.²¹ Policymakers should encourage states to ensure a deliberate focus on babies and toddlers in state QRIS and provide financial resources to help child care providers move toward higher standards.

8.

Provide technical assistance and support for family, friend, and neighbor care (FFN).

Family, friend, and neighbor care (FFN) is the most common form of non-parental care in the United States. Infants and toddlers are most likely to be in relative care as their only non-parental source of care.²² Babies and toddlers from lower-income families are more likely than children from higher-income families to be in FFN care.²³ The quality of FFN care varies. These providers are often isolated and may lack complete—as well as culturally and linguistically appropriate—information about child development. Policymakers should provide technical assistance and support for FFN providers so they can best serve the infants and toddlers in their care.

9.

Support research on assessing infant and toddler child care quality, supply, and demand.

Even though increasing numbers of infants and toddlers are moving into out-of-home care at younger ages and for longer periods of time, we are missing opportunities to continuously improve quality child care that promotes positive child outcomes. Federal and state policymakers should provide funds to support research on assessing infant and toddler child care quality, supply, and demand as well as to help states and communities determine what targeted improvement measures make the most difference for infants and toddlers. In addition, Congress should commission the National Academy of Sciences to determine key components of quality and study the cost of such components in various child care settings.²⁴



The quality of care ultimately boils down to the quality of the relationship between the child care provider and the child; skilled and stable providers promote positive development.



Research

The quality of the relationship between the child care provider and child influences every aspect of young children's development. The quality of child care ultimately boils down to the quality of the relationship between the child care provider and the child; skilled and stable providers promote positive development.²⁵ A secure relationship between the infant and the caregiver can complement the relationship between parents and young children and facilitate early learning and social development.²⁶ Young children whose caregivers provide ample verbal and cognitive stimulation, who are sensitive and responsive, and who give them generous amounts of attention and support are more likely to be advanced in all aspects of development compared with children who fail to receive these important inputs.²⁷

Quality child care promotes cognitive, language, and social and emotional development. Intensive, high quality, center-based child care interventions that provide learning experiences directly to the young child have a positive effect on early learning, cognitive and language development, and school achievement.²⁸ One of the features that distinguish higher quality care is the amount of language stimulation provided. High quality child care, where providers are both supportive and offer more verbal stimulation, creates an environment where children are likely to show advanced cognitive and language development.²⁹ For virtually every developmental outcome that has been assessed, quality of care also shows positive associations with early social and emotional development.³⁰ Higher quality care is generally related to more competent peer relationships during early childhood and into the school years. It provides environments and opportunities for socialization, problem-solving, empathy building, sharing, and relating.

Quality child care contributes to later school success. Studies that examine children's development over time have shown that higher quality child care is a predictor of improvement in children's ability to understand spoken language, communication skills, verbal IQ skills, cognitive skills, behavioral skills, and attainment of higher math and language scores—all of which impact later school success.³¹ Research also indicates that participants in high quality child care and early education programs may also experience lower levels of grade retention and placement in special education classrooms.³²

High quality child care is particularly important to low-income children. Low-income children often start behind their peers when they enter school. When child care is of very high quality (as is the case with model early childhood programs), the positive effects can endure into the early adult years, particularly for children from the poorest home environments.³³ In fact, one study found that children in the second grade who had enrolled in high quality child care demonstrated greater mathematical ability and thinking and attention skills and experienced fewer behavior problems than other children in the same grade.³⁴ Yet, at-risk infants and toddlers often receive child care of such poor quality that it may actually diminish inborn potential and lead to poorer cognitive, social, and emotional-developmental outcomes.³⁵

Research demonstrates that the strongest effects of quality child care are found with at-risk children – children from families with few resources and under great stress.



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About Us

The ZERO TO THREE Policy Center is a nonpartisan, research-based resource for federal and state policymakers and advocates on the unique developmental needs of infants and toddlers. To learn more about this topic or about the ZERO TO THREE Policy Center, please visit our website at www.zerotothree.org/policy.



National Center for Infants, Toddlers, and Families

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