



The Infant-Toddler Set-Aside of the Child Care and Development Block Grant: **Improving Quality Child Care for Infants and Toddlers**

Second only to the immediate family, child care is the context in which early childhood development unfolds, starting in infancy.ⁱ 61% of children under age 4, including 44% of children under age 1 are in some form of regularly scheduled child care. The evidence associating the quality of infant and toddler care with early cognitive and language outcomes “is striking in consistency.”ⁱⁱ Furthermore, high quality child care is associated with outcomes that all parents want to see in their children, ranging from cooperation with adults to the ability to initiate and sustain positive exchanges with peers, to early competence in math and reading -- all of which are key ingredients to later school success.ⁱⁱⁱ

Research indicates that the strongest effects of quality child care are found with at-risk children – children from families with the fewest resources and under the greatest stress.^{iv} 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.^v To prevent these harmful outcomes, we must ensure that all young children have access to child care of at least adequate quality.

★ POLICY RECOMMENDATIONS

- 1. Maintain at least a \$100 million Infant-Toddler Set-Aside.** The \$100 million set-aside, currently earmarked through the appropriations process, has helped states to invest in specialized infant-toddler provider training, to provide technical assistance to programs and practitioners, and to link compensation with training and demonstrated competence – all of which enhance quality, and in turn, lead to later school readiness. Including an increased set-aside in the authorizing legislation will help states expand their efforts to improve the quality of infant and toddler child care – which will ultimately result in children who are better prepared for school and life.
- 2. Increase CCDBG’s Quality Set-Aside.** An increase in the quality set-aside from four to ten percent will help to ensure that more children have access to high quality child care experiences that are critical to their healthy development and to later school success. These additional funds will provide the opportunity

for States to continue to support and develop innovative strategies for improving the quality of child care.

★ RESEARCH

High-quality child care translates to a child's ability to succeed in school, to develop relationships, and to develop social competence. While hours of care, stability of care, and type of care are all associated with developmental outcomes, it is the quality of care, and in particular, the quality of the daily interactions between child care providers and babies and toddlers that most significantly impact development.^{vi}

- **Quality Child Care Promotes Cognitive & Language 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.^{vii} One of the features that distinguishes higher-quality care is the amount of language stimulation provided. High-quality child care where providers are both supportive and offer more verbal stimulation create an environment where children are likely to show more advanced cognitive and language development.^{viii}
- **Quality Child Care Promotes Social & Emotional Development:** For virtually every developmental outcome that has been assessed, quality of care shows positive associations with early social and emotional development.^{ix} 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 receptive language and functional communication skills, verbal IQ skills, cognitive skills, behavioral skills, and attainment of higher math and receptive language scores – all of which impact later school success.^x 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.^{xi}

★ FAST FACTS

- Each day, an estimated six million children under age three spend some or all of their day being cared for by someone other than their parents.^{xii}
- 61 percent of mothers with children under age three are in the workforce.^{xiii}
- About one-third of infants and toddlers in both single and two-parent families are in two or more non-parental child care arrangements.
- Of more than 400 centers studied in four states, only 8 percent of infant classrooms were of good or excellent quality. Forty percent of infant programs were rated as having poor quality.^{xiv}
- The NICHD Study of Early Child Care found that 3 out of 4 infant caregivers provided only minimal stimulation of cognitive and language development.^{xv}

- The cost of providing infant/toddler child care can be as high as \$12,000 annually.^{xvi}
- The cost of providing developmentally appropriate care is only 10 percent higher than the cost of providing mediocre care.^{xvii}

About Us

ZERO TO THREE Policy Center is a non-partisan, research-based, nonprofit organization committed to promoting the healthy development of our nation’s infants and toddlers. To learn more about this topic, or about the ZERO TO THREE Policy Center, please contact us at 202-638-1144 or on the Web at www.zerotothree.org/policy.

ⁱ Shonkoff J., and Phillips, D. (Eds.) (2000). National Research Council and Institute of Medicine. *From Neurons to Neighborhoods: The Science of Early Childhood Development*. Washington, DC: National Academy Press.

ⁱⁱ *Ibid.*

ⁱⁱⁱ *Ibid.*

^{iv} *Ibid.*

^v *Ibid.*

^{vi} *Ibid.*

^{vii} *Ibid.*

^{viii} *Ibid.*

^{ix} *Ibid.*

^x United States General Accounting Office, *States Have Undertaken a Variety of Quality Improvement Initiatives, but More Evaluations of Effectiveness are Needed*. (GAO-02-897). September, 2002.

^{xi} Frank Porter Graham Child Development Institute, University of North Carolina, Chapel Hill, *Early Learning, Later Success, The Abecedarian Study, Executive Summary*, 2000.

^{xii} Ehrle, J., Adams, G., and Tout, T. *Who’s Caring for our youngest children: Child care patterns of infants and toddlers*. Washington, DC: The Urban Institute, 2001.

^{xiii} Phillips, D. and Adams, G. “Child Care and Our Youngest Children.” *Caring for Infants and Toddlers*, Packard Journal 2001.

^{xiv} Cost, Quality and Child Outcomes Study Team. *Cost, Quality and Child Outcomes in Child Care Centers*, Public Report, 2nd edition. (Denver Economics Department, University of Colorado at Denver, 1995).

^{xv} NICHD Early Child Care Research Network. Characteristics of infant child care: Factors contributing to positive caregiving. *Early Childhood Research Quarterly* (1996) 11 (3): 269-306.

^{xvi} Schulman, Karen. *The High Cost of Child Care Puts Quality Care Out of Reach for Many Families*. Washington, DC: Children’s Defense Fund, 2000.

^{xvii} Cost, Quality and Child Outcomes Study Team. *Cost, Quality and Child Outcomes in Child Care Centers*, Public Report, 2nd edition. (Denver Economics Department, University of Colorado at Denver, 1995).