

## **Child Care Quality: What It Is, Why It Matters, and How To Improve It**

All parents want high-quality care for their children that helps them develop their potential, ensures that they are cared for in safe, healthy environments, and enables them to enter school ready to succeed. However, there is a shortage of accessible, affordable, high-quality child care, leaving parents with too few choices. Research shows that many children are in poor or mediocre care, which can jeopardize their health, safety, and development.

### **Key Components of High-Quality Child Care**

- Research demonstrates that children have better outcomes if they participate in high-quality child care programs, which have several essential characteristics, including:
  - Basic protections for children’s safety and health.
  - Well-educated teachers who are caring, knowledgeable in child development, and well-compensated.
  - Low child-teacher ratios and appropriate group sizes that allow children to receive personal attention from their teachers.
  - An age-appropriate curriculum that encourages learning and supports children’s cognitive, social, emotional, and physical development.
  - Parents who are engaged in their children’s learning and help foster their children’s development.<sup>1</sup>

### **High-Quality Child Care Promotes Children’s Ability to Succeed in School**

- Children in higher-quality care display greater language ability and pre-math skills, view their child care and themselves more positively, have warmer relationships with their teachers, and have more advanced social skills than those in lower-quality classrooms. These findings hold true for all children, although high-quality care has particularly strong positive impacts on at-risk children.<sup>2</sup>
- Studies show that poor-quality care can significantly impact a child’s development. Children in poor-quality care have weaker reading and cognitive skills and display more aggression towards other children and adults.<sup>3</sup>
- Nearly half (46 percent) of kindergarten teachers report that at least half of their class has specific problems with school readiness, including difficulty following directions, lack of academic skills, disorganized home environments, and/or difficulty working independently.<sup>4</sup> In addition, teachers in districts with higher levels of poverty, in urban districts, and with

larger proportions of minority students report greater rates of difficulty in school transition.<sup>5</sup> Children need higher-quality early care and education experiences that better prepare them for school.

- The impact of high-quality child care and early education continues to be seen throughout a child's education, especially for low-income children. Studies show that low-income children who receive high-quality child care and early education are less likely to be held back a grade and are more likely to attend college than their peers who did not enroll in such programs, according to several studies.<sup>6</sup>

### **Despite the Importance of High-Quality Care to Children, It Is Not Widely Available**

- Even though strong licensing requirements that mandate low child-teacher ratios and provider training can help improve child care quality, many states do not set adequate standards in these areas. The National Association for the Education of Young Children (NAEYC) recommends that a single caregiver be responsible for no more than four infants, six toddlers, or 10 preschool-age children.<sup>7</sup> However, only one state and the District of Columbia mandate that child care centers meet these standards for children through age four, and 12 states do not require that child care centers meet any of these standards for children through age four.<sup>8</sup> In addition, 11 states allow directors of child care centers<sup>9</sup> and 39 states allow child care teachers to begin working with children without any training in early childhood education.<sup>10</sup>
- A four-state study of child care centers conducted in 1995 found that only one in seven child care centers provided good-quality care—care that promotes healthy development—and that only one in 12 infant and toddler rooms provided developmentally appropriate care.<sup>11</sup> This study found that 74 percent of child care centers were mediocre quality and 12 percent of child care centers were poor quality.<sup>12</sup> Among rooms serving infants and toddlers, 51 percent were mediocre quality and 40 percent were poor quality.<sup>13</sup>
- A 2000 study of child care settings in four Midwestern states rated nearly half (49 percent) of the settings as mediocre and rated about one-fifth (18 percent) as poor.<sup>14</sup> Nearly two-thirds (63 percent) of center-based care for infants was considered mediocre, with another 8 percent rated as poor, while 43 percent of family child care was determined to be mediocre, with a full 27 percent considered poor.<sup>15</sup>

### **Federal and State Strategies That Can Improve Child Care Quality**

- To ensure that more low-income children have access to higher-quality care, the federal government should increase overall funding for the Child Care and Development Block Grant (CCDBG), the major federal child care program, as well as the proportion of CCDBG funds that is targeted toward improving the quality of care. Currently, states are required to spend a minimum of 4 percent of their CCDBG funds on quality activities; in 2005, states exceeded this minimum, devoting 10 percent of total federal and state expenditures to quality activities.<sup>16</sup> States use these funds for purposes such as teacher education and professional development, teacher compensation initiatives, grants and loans to child care programs and

providers, monitoring compliance with licensing and regulatory requirements, activities to promote early language and literacy, and consumer education.<sup>17</sup>

- Strong state licensing regulations can improve the quality of child care. One four-state study found that states with more demanding licensing standards have fewer poor-quality child care centers.<sup>18</sup> A separate study involving Midwestern states found that family child care that required licensing and annual inspections was twice as likely to be labeled as good quality as registered care that did not require inspections or care that was exempt from licensing or regulation.<sup>19</sup>
- Basic safety and health standards—such as requiring that all playground equipment is surrounded by soft surfaces, that children are immunized and that a current health record is maintained for each child, and that toxic substances are kept out of reach from children—can reduce accidents, prevent illnesses, and save children’s lives.<sup>20</sup>
- High-quality learning environments and teachers with training in early childhood education can reach children more effectively, provide age-appropriate instruction, and lead to improved early reading skills and development.<sup>21</sup> One way to encourage teachers to receive such training is through initiatives such as the T.E.A.C.H. Early Childhood® Project and the Child Care WAGE\$® Project. These programs support scholarships and salary supplements for providers that have formal child care credentials or training beyond the high school level as a means to help improve child care quality. T.E.A.C.H. is designed to encourage providers to further their education, while WAGE\$ is designed to attract, retain, and reward teachers who already have higher education levels. Twenty-one states were implementing T.E.A.C.H.,<sup>22</sup> and four states had licensed WAGE\$® Projects as of 2008.<sup>23</sup>
- North Carolina’s Smart Start initiative provides funds to local communities for a range of early childhood programs and services, including activities to improve the quality of care through training, technical assistance, grants for materials and facilities, education scholarships and salary supplements for teachers, higher reimbursement rates for higher-quality child care, and other efforts. Smart Start has produced positive results for child care programs and the children they serve, according to a study involving 110 child care centers observed between 1994 and 1999 and again in 2002. The quality of the centers steadily and significantly improved between 1993 and 2002. In addition, participation in Smart Start-funded activities was significantly positively related to quality. Finally, children in higher-quality centers demonstrated significantly better cognitive and language skills and abilities than children in lower-quality centers, after accounting for the children’s background characteristics.<sup>24</sup>
- By setting adequate reimbursement rates for providers serving children who receive child care assistance, states increase the likelihood that providers will be willing to serve these children and that parents will have a choice of good child care. States can further ensure that good-quality providers agree to accept subsidies by providing higher rates to providers who meet higher quality standards. Such tiered reimbursement systems can give a financial incentive to providers to improve and the resources to do so.<sup>25</sup> Thirty-one states, and the District of Columbia, pay higher reimbursement rates to programs that are nationally

accredited or meet higher standards in areas such as staff training and credentialing, curriculum requirements, and staff pay.<sup>26</sup>

- Sixteen states had statewide child care quality rating and improvement systems (QRIS) as of April 2008.<sup>27</sup> Under these systems, child care homes and centers are rated based on the extent to which they meet a set of quality criteria addressing areas such as teacher credentials, child-staff ratios, and classroom learning environments. The quality ratings give parents useful information about the quality of a child care center or home. States provide resources and incentives to help child care centers and homes steadily improve their quality ratings.
- States can look to the military's systemic approach to child care that simultaneously seeks to improve the quality, affordability, and availability of child care. The U.S. Department of Defense, in its Military Child Development System, mandates basic standards for health, safety, child-staff ratios, and staff training that are enforced in all child care settings; requires accreditation for all military child care centers; sets wages at levels comparable to military occupations requiring the same skills and ties wages and advancement for child care workers in its centers to caregiver training to reduce staff turnover; links child care centers, family child care homes, before- and after-school programs, and resource and referral services to assist parents in finding care through a single point of entry; and subsidizes the cost of high-quality child care for all families with a sliding fee schedule based on income to ensure that personnel with the lowest incomes can afford child care.<sup>28</sup> A study by the National Women's Law Center on developments since 2000 found that the military has continued to build on its comprehensive system of child care, and made a range of improvements, notably in integrating its youth programs, strengthening accreditation, and expanding a range of child care support. Its compensation system has kept pace with inflation and its parent fees have increased at less than the rate of inflation.<sup>29</sup>

---

**Sources:**

<sup>1</sup> Richard Fiene, 13 Indicators of Quality Child Care: Research Update (National Resource Center for Health and Safety in Child Care, University of Colorado, 2002), *available at* <http://aspe.hhs.gov/hsp/ccquality-ind02/> (last visited Mar. 28, 2008); Diane Paulsell, Julie Cohen, Ali Stieglitz, Erica Lurie-Hurvitz, Emily Fenichel, Ellen Kisker, Partnerships for Quality: Improving Infant-Toddler Child Care for Low-Income Families, (Princeton, NJ: Mathematica Policy Research, Inc., 2002), *available at* <http://www.mathematica-mpr.com/publications/PDFs/partnership.pdf> (last visited Mar. 28, 2008); National Center for Early Development and Learning, "Teacher Education, Wages Key to Outcomes," NCEDL Spotlights (18), 2000, *available at* <http://www.fpg.unc.edu/~ncedl/pdfs/spot18.pdf> (last visited Mar. 28, 2008); National Association for the Education of Young Children, A Guide for Families: Using NAEYC Standards to Find Quality Programs for Young Children, *available at* <http://www.rightchoiceforkids.org/docs/FamilyGuide.pdf> (last visited Mar. 28, 2008).

<sup>2</sup> Suzanne Helburn, Mary L. Culkin, Carollee Howes, Donna Bryant, Richard Clifford, Debby Cryer, Ellen Peisner-Feinberg, and Sharon Lynn Kagan, Cost, Quality, and Child Outcomes in Child Care Centers (Denver, CO: University of Colorado, 1995); Ellen S. Peisner-Feinberg, Richard M. Clifford, Mary L. Culkin, Carollee Howes, Sharon Lynn Kagan, et al., The Children of the Cost, Quality, and Outcomes Study Go to School (Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center, 1999).

<sup>3</sup> National Institute of Child Health and Human Development Early Child Care Research Network, "Cognitive, Linguistic, and Social Consequences of Early Experience: Child Care and Social Competence," Paper presented at the American Association for the Advancement of Science Annual Meeting, Anaheim, CA (1999); and National Institute of Child Health and Human Development Early Child Care Research Network, "How Child Care Relates to Children's Cognitive and Language Development," Paper presented at the American Association for the Advancement of Science Annual Meeting, Anaheim, CA (1999).

<sup>4</sup> Robert C. Pianta and Karen La Paro, "Improving Early School Success," *Educational Leadership*, 60 (7), 2003, 24-29.

<sup>5</sup> Pianta and La Paro.

<sup>6</sup> Arthur J. Reynolds, Judy A. Temple, Dylan L. Robertson, and Emily A. Mann, "Age 21 Cost-Benefit Analysis of the Title I Chicago Children Parent Center Program, Executive Summary, June 2001," Report presented at the Annual Meeting of the Society for Prevention Research, Washington, DC (2001), *available at* <http://www.waisman.wisc.edu/cls/cbaexecsum4.html> (last visited Apr. 16, 2008); Frances Campbell, Craig Ramey, Joseph Sparling, Isabelle Lewis, Margaret Burchinal, Elizabeth Pungello, and Shari Miller-Johnson, Early Learning, Later Success: The Abecedarian Study (Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center, 1999); National Institute of Child Health and Human Development, Preschoolers Who Experienced Higher Quality Care Have Better Intellectual and Language Skills (NIH Backgrounder) (Washington, DC: National Institute of Child Health and Human Development, 2001).

<sup>7</sup> National Association for the Education of Young Children, Accreditation Criteria: Teacher-Child Ratios Within Group Size (2005), *available at* [http://www.naeyc.org/academy/criteria/teacher\\_child\\_ratios.html](http://www.naeyc.org/academy/criteria/teacher_child_ratios.html) (last visited Apr. 3, 2008).

<sup>8</sup> National Women's Law Center analysis of information from National Association for the Education of Young Children, Accreditation Criteria: Teacher-Child Ratios Within Group Size; and National Child Care Information Center, Child Care Center Licensing Regulations (October 2006): Child:Staff Ratios and Maximum Group Size Requirements (2006), *available at* <http://nccic.org/pubs/cclicensingreq/ratios.html> (last visited Apr. 13, 2008).

<sup>9</sup> National Child Care Information Center, Center Child Care Licensing Requirements (October 2006): Minimum Early Childhood Education (ECE) Preservice Qualifications, Administrative, and Annual Ongoing Training Hours for Directors (2006), *available at* <http://nccic.org/pubs/cclicensingreq/cclr-directors.pdf> (last visited Apr. 3, 2008).

<sup>10</sup> National Child Care Information Center, Center Child Care Licensing Requirements (October 2006): Minimum Early Childhood Education (ECE) Preservice Qualifications and Annual Ongoing Training Hours for Teachers and Master Teachers (2006), *available at* <http://nccic.org/pubs/cclicensingreq/cclr-teachers.pdf> (last visited Apr. 3, 2008).

<sup>11</sup> Helburn, et. al.

<sup>12</sup> Helburn, et. al.

<sup>13</sup> Helburn, et. al.

- 
- <sup>14</sup> The Gallup Organization, *Child Care Quality and Workforce Characteristics in Four Midwestern States* (Omaha, NE: The Gallup Organization, 2003), 67, *available at* [http://ccfl.unl.edu/projects\\_outreach/projects/current/ecp/pdf/final\\_11-25-03.pdf](http://ccfl.unl.edu/projects_outreach/projects/current/ecp/pdf/final_11-25-03.pdf) (last visited Apr. 4, 2008).
- <sup>15</sup> The Gallup Organization, 68.
- <sup>16</sup> U.S. Department of Health and Human Services, Administration for Children and Families, Child Care Bureau, *Child Care and Development Fund Fiscal Year 2005 State Spending from All Appropriation Years: Overview*, *available at* [http://www.acf.hhs.gov/programs/ccb/data/expenditures/05acf696/fy05\\_overview\\_allyears.htm](http://www.acf.hhs.gov/programs/ccb/data/expenditures/05acf696/fy05_overview_allyears.htm) (last visited Apr. 8, 2008).
- <sup>17</sup> National Child Care Information Center, *The Child Care and Development Fund Report of State and Territory Plans FY 2006-2007* (Fairfax, VA: National Child Care Information Center, 2007), 195-217, *available at* <http://nccic.acf.hhs.gov/pubs/stateplan2006-07/part5.pdf> (last visited Apr. 8, 2008).
- <sup>18</sup> Helburn, et al.
- <sup>19</sup> The Gallup Organization, 68.
- <sup>20</sup> Fiene; National Association for the Education of Young Children, *NAEYC Accreditation Criteria for Health Standard (Standard 5)*, *available at* <http://www.naeyc.org/academy/standards/standard5/> (last visited Apr. 7, 2008); U.S. Consumer Product Safety Commission, *Safety Hazards in Child Care Settings* (Washington, DC: U.S. Consumer Product Safety Commission, 1999), *available at* <http://www.cpsc.gov/library/ccstudy.html> (last visited Apr. 7, 2008).
- <sup>21</sup> Barbara T. Bowman, M. Suzanne Donovan, and M. Susan Burns (Eds.), *Eager to Learn: Educating Our Preschoolers* (Washington, DC: National Academy Press, 2000); Marcy Whitebook, *Early Education Quality: Higher Teacher Qualifications for Better Learning Environments – A Review of the Literature* (Berkeley, CA: Institute of Industrial Relations, Center for the Study of Child Care Employment, 2003), *available at* <http://www.iir.berkeley.edu/csce/pdf/teacher.pdf> (last visited Apr. 16, 2008).
- <sup>22</sup> Child Care Services Association, T.E.A.C.H. Early Childhood® Project, *available at* [http://www.childcareservices.org/ps/state\\_contacts.html](http://www.childcareservices.org/ps/state_contacts.html) (last visited Mar. 27, 2008).
- <sup>23</sup> Child Care Services Association, The Child Care WAGES® Project, *available at* <http://www.childcareservices.org/ps/wage.html> (last visited Apr. 23, 2008).
- <sup>24</sup> Donna Bryant, Kelly Maxwell, Karen Taylor, Michele Poe, Ellen Peisner-Feinberg, and Kathleen Bernier, *Smart Start and Preschool Child Care Quality in NC: Change Over Time and Relation to Children’s Readiness* (Chapel Hill, NC: Frank Porter Graham Child Development Institute, 2003), *available at* [http://www.fpg.unc.edu/smartstart/reports/Child\\_Care\\_Quality\\_2003.pdf](http://www.fpg.unc.edu/smartstart/reports/Child_Care_Quality_2003.pdf) (last visited Mar. 28, 2008).
- <sup>25</sup> National Child Care Information Center, *Financial Incentives in Quality Rating Systems* (2006), *available at* <http://www.nccic.org/poptopics/qrs-fi.html?&printfriendly=true> (last visited Apr. 7, 2008).
- <sup>26</sup> National Association for the Education of Young Children, *State Policies on NAEYC Accreditation, Quality Rating and Improvement Systems and Tiered Reimbursement Programs* (2008), *available at* <http://www.naeyc.org/ece/critical/chart1.asp> (last visited Apr. 7, 2008).
- <sup>27</sup> National Association for the Education of Young Children, *Quality Rating and Improvement Systems (QRIS) and National Association for the Education of Young Children (NAEYC) Accreditation* (2008), *available at* <http://www.naeyc.org/policy/state/pdf/FactSheetQRS.pdf> (last visited Apr. 17, 2008); E-mail from Davida McDonald, National Association for the Education of Young Children, to Karen Schulman, National Women’s Law Center, Apr. 17, 2008.
- <sup>28</sup> Nancy Duff Campbell, Judith C. Appelbaum, Karin Martinson, and Emily Martin, *National Women’s Law Center, Be All That We Can Be: Lessons from the Military for Improving Our Nation’s Child Care System* (Washington, DC: National Women’s Law Center, 2000); Gail L. Zellman and Anne S. Johansen, *Examining the Implementation and Outcomes of the Military Child Care Act of 1989* (Santa Monica, CA: National Defense Research Institute, RAND, 1998).
- <sup>29</sup> Kate Pomper, Helen Blank, Nancy Duff Campbell, and Karen Schulman, *Be All That We Can Be: Lessons from the Military for Improving Our Nation’s Child Care System, 2004 Follow-Up* (Washington, DC: National Women’s Law Center, 2004).