



Beyond Child Care Centers: Infant and Toddler Child Care Executive Summary

March 2009

Connecticut's early care and education agenda must reach beyond the reform of child care centers. In 2003, a capacity analysis found that Connecticut could serve only 15% of its infants and toddlers in licensed child care spaces.¹ In addition to the lack of capacity, many parents cannot afford licensed child care or simply prefer alternative forms of care for their infants and toddlers, such as staying home themselves or using home-based, unregulated child care. The use of unregulated care is particularly prevalent among low-income and immigrant families.² Given the number of children who are served outside of child care centers, early care and education reform efforts must address the needs of these children too if the developmental potential of *all* children in Connecticut is to be maximized.

Eighty-five percent of a child's brain structure is formed by age three, but less than 4% of public investment in education and development has occurred by that time.³ Early brain development is rapid and conditions such as poverty, exposure to violence, and abuse or neglect can cause developmental delays.⁴ Research has shown that the return on a dollar of public investment is higher in human capital when that dollar is spent on the young than when it is spent on the old.⁵ And yet, in Connecticut we do exactly the opposite; public investments in children incrementally *increase* with age from birth through high school.⁶

Most mothers of infants and toddlers work. Most mothers return to work, by choice or otherwise, within the first three to five months of their newborns' births.⁷ Welfare reform also requires mothers of very young children to work. According to the 2000 United States Census, 59% of all mothers with children under one year of age were either employed or actively seeking employment in 1998,

almost double the percentage from 31% in 1976.⁸ Consistent with national trends, in 2001, 59% of women in Connecticut with children under the age of three were in the labor force.

Connecticut should follow the lead of California, Washington, and now New Jersey in providing parents with paid leave so they can stay home with their newborns. Approximately 25% of working women and 15% of working men lack any paid leave whatsoever: no paid vacation, no paid sick days, no paid personal days.⁹ Three out of four *low-wage* working parents (in the bottom quartile of the income distribution) have no paid sick leave, 58% have no vacation leave, and 54% lack both vacation and sick leave.¹⁰ In other words, many parents simply cannot stay home with their children, even though research shows that paid family leave is associated with positive infant health and developmental outcomes, and with positive business outcomes.¹¹

High quality child care matters. Without paid leave, many parents are forced to rely on child care. And even with paid leave, some parents may choose to work. Research shows that when the quality of child care is equal, children of non-working mothers fare better on tests of cognitive abilities. It also shows, however, that increasing the quality of non-parental child care can improve the cognitive performance of children of working mothers.¹² In short, the quality of child care has real, measurable effects on child outcomes.

The factors that contribute to high-quality child care remain consistent across settings. Regardless of setting (licensed family day care; unregulated home-based family, friend, and neighbor settings; or child care centers), small group sizes, low child-to-staff ratios, advanced teacher training, high

compensation, and low staff turnover are all predictors of high quality child care. For its licensed centers, Connecticut has high regulatory standards that incorporate these factors but the state's oversight is weak.¹³ Legal but unlicensed providers in Connecticut are not required to meet the standards for licensed centers. Policy must ensure that *all* settings in which young children are growing and learning, including unregulated child care and parental care, are receiving the supports necessary to provide the high quality care that promotes school readiness.

Connecticut does not provide low-income families with sufficient financial assistance to afford high-quality care for their infants and toddlers. There are three main state programs that serve children in their earliest years: Care4Kids, state-funded child development centers, and Early Head Start. The Care4Kids program provides a child care subsidy to low-income working parents, including but not limited to parents receiving cash assistance through Connecticut's Temporary Family Assistance program. However, outdated and low provider reimbursement rates make it difficult for families with very young children to find child care they can afford, and particularly difficult to find child care that is of high quality. State-funded child development centers, which also serve low-income families, are also in financial crisis due to low infant/toddler reimbursement rates. Finally, Early Head Start, which provides comprehensive services for families with infants and toddlers (including health, education and family support services through home-based and child care center-based programs), did not expand at all between 2003 and 2008,¹⁴ despite research identifying positive outcomes associated with participation in this program.¹⁵

Connecticut should support policies that allow parents to stay home and care for their own children, as well as policies that ensure high quality care for infants and toddlers in a variety of settings. Such policies should include:

- Increasing funding to develop curriculum and support implementation of early learning guidelines for infant and toddler care;
- Increasing reimbursement rates for Care4Kids and state-funded development centers;
- Including infant and toddler care in the design and implementation of a quality rating improvement system;

- Creating incentives for providers to advance their care-taking skills and qualifications;
- Coupling high standards for quality with more aggressive state oversight;
- Increasing the number and education of child care licensing staff; and
- Providing paid leave to parents who stay home to take care of newborns through: (1) a family leave insurance program, funded by joint contributions of employees and employers, or by employees alone and/or (2) an at-home infant care program, which could use state dollars currently invested in the existing Care4Kids Child Care Subsidy Program (simply diverting them to the stay-at-home parent, instead of sending them to a child care provider).

¹ Child Health and Development Institute, *Keeping Children on the Path to School Success: How is Connecticut Doing?* (Early Childhood Data CONNections, 2003), available at <http://www.chdi.org>.

² The 2002 Urban Institute's National Survey of America's Families found that 89% of families with incomes below 200% of the federal poverty standard used some form of care other than a licensed child care provider, compared to only 68% of families with higher incomes, and that 39% of immigrant working families were likely to use unregulated family, friend and neighbor care. *National Survey of America's Families*. (Urban Institute, 2002), available at <http://www.urban.org/center/anf/nsaf.cfm>.

³ C. Bruner, V. Elias, D. Stein & S. Schaefer. *Early Learning Left Out: An Examination of Public Investments in Education and Development by Child Age*. (Voices for America's Children and Child and Family Policy Center, 2004), available at http://eric.ed.gov/ERICDocs/data/ericdocs2sql/content_store_01/0000019b/80/29/dd/66.pdf.

⁴ See, e.g., J.P. Shonkoff & D.A. Phillips, eds. *From Neurons to Neighborhoods: The Science of Early Childhood Development* (National Academy Press, 2000), and The Carnegie Task Force on Meeting the Needs of Young Children. *Starting Points: Meeting the Needs of Our Youngest Children* (Carnegie Corporation, 1994), available at http://www.carnegie.org/starting_points/startpt1.html.

⁵ J. J. Heckman. *Invest in the Very Young* (Ounce of Prevention Fund, 2000), available at <http://www.ounceofprevention.org>.

⁶ C. Bruner, V. Elias, D. Stein & S. Schaefer. *Early Learning Left Out: An Examination of Public Investments in Education and Development by Child Age* (Voices for America's Children and Child and Family Policy Center, 2004), p.31. Available at http://eric.ed.gov/ERICDocs/data/ericdocs2sql/content_store_01/0000019b/80/29/dd/66.pdf.

⁷ National Institute of Child Health and Development. *Study of Early Child Care* (NICHD, 1997), available at <http://www.nih.gov/news/pr/apr97/nichd-03.htm>.

⁸ United States Census. (2000), available at: <http://www.uscensus.gov>.

⁹ Kathy Phillips, *Getting Time Off: Access to Leave Among Working Parents* (Washington, D.C.: The Urban Institute, 2004),

http://www.urban.org/UploadedPDF/310977_B-57.pdf

(accessed December 12, 2007).

¹⁰ Jody Heymann, *The Widening Gap: Why America's Working Families are in Jeopardy and What Can Be Done About It* (New York: Basic Books, 2000), 115.

¹¹ See, e.g., Christopher Ruhm, "Parental leave and child health," *Journal of Health Economics* 19 (2000): 947; Sakiko Tanaka, "Parental Leave and Child Health Across OECD Countries," *Economic Journal* 115, no. 501 (February 2005),

<http://64.233.169.104/search?q=cache:--HQsHutDTMJ:paa2004.princeton.edu/download.asp%3FsubmissionId%3D41254+Parental+Leave+and+Child+Health+Across+OECD+Countries&hl=en&ct=clnk&cd=2&gl=us> (accessed December 13, 2007); Lawrence Berger, Jennifer Hill, and Jane Waldfogel, "Maternity Leave, Early Maternal Employment, and Child Health and Development in the U.S.," *The Economic Journal*, 115 (February 2005); Michael Baker and Kevin Milligan, "The Early Development and Health Benefits of Maternity Leave Mandates" (paper presented at annual meeting for the American Economic Association, Chicago, IL, January 7, 2007),

http://www.aeaweb.org/annual_mtg_papers/2007/0107_1015_1702.pdf (accessed December 13, 2007); Jeanne Brooks-Gunn, Wen-Jui Han, and Jane Waldfogel, "Maternal Employment and Child Cognitive Outcomes in the First Three Years of Life: The NICHD Study of Early Child Care," *Child Development* 73, no.4 (July/August 2002): 1067; Christopher Ruhm, "Parental Employment and Child Cognitive Development" (paper presented at the Symposium of Family Policy in the United States and Canada, Seattle, WA, June 22, 2002),

<http://depts.washington.edu/crfam/Symposium1/Ruhm.pdf> (accessed December 13, 2007); *Parental Leave in Minnesota: A Survey of Employers* (St. Paul, MN: Children's Defense Fund of Minnesota, 2000), <http://www.cdf-mn.org/PDF/Publications/ParentalLeave.pdf> (accessed December 13, 2007); Arindrajit Dube and Ethan Kaplan, *Paid Family Leave in California: An Analysis of Costs and Benefits* (The Paid Family Leave Collaborative Outreach and Education Campaign, 2002),

<http://www.paidfamilyleave.org/pdf/dube.pdf> (accessed December 13, 2007); Christine Siegwarth Meyer, Swati Mukerjee, and Ann Sestero, "Work-Family Benefits: Which Ones Maximize Profits?," *Journal of Managerial Issues* XIII, no.1 (spring 2001): 37,

[http://www.nationalpartnership.org/site/DocServer/Work-Family_Benefits -](http://www.nationalpartnership.org/site/DocServer/Work-Family_Benefits_-_Which_One_Maximize_Profits.pdf?docID=370)

[_Which_One_Maximize_Profits.pdf?docID=370](http://www.nationalpartnership.org/site/DocServer/Work-Family_Benefits_-_Which_One_Maximize_Profits.pdf?docID=370) (accessed December 13, 2007); *Families and Work Institute's 1998 Business Work-Life Study* (New York: Families and Work Institute, 1998), <http://www.familiesandwork.org/summary/worklife.pdf> (accessed December 13, 2007).

¹² J. Brooks-Gunn, W. Han & J. Waldfogel. *Maternal Employment and Child Cognitive Outcomes in the First Three Years of Life: The NICHD Study of Early Child Care* (Child Development, 2002), pp. 1052-1072.

¹³ National Association of Child Care Resource and Referral Agencies. *We Can Do Better: NACCRRRA's Ranking of State Child Care Center Standards and Oversight* (NACCRA, 2007), available at <http://www.naccrra.org/policy/scorecard.php>.

¹⁴ Numbers of children served by Early Head Start in SFY 2003 through SFY 2006 obtained from the "Status of Child Care in Connecticut" reports, published annually by DSS and available at

<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305178>, under "Publication Archives." Number for SFY 2007 obtained from "Status of Child Care in Connecticut," not available on-line (as of November 20, 2008) but provided by Amparo Garcia, DSS, via e-mail, on July 8, 2008.

¹⁵ *Making a Difference in the Lives of Infants and Toddlers and Their Families: The Impacts of Early Head Start* (U.S. Department of Health and Human Services, Administration for Children and Families, Office of Planning, Research and Evaluation, Head Start Bureau, 2002), available at http://www.acf.hhs.gov/programs/opre/ehs/ehs_resrch/index.html.