Ratios and Group Sizes in Child Care Matter for Babies

More than 5 million children under age three regularly use child care.ⁱ

Introduction

Every child deserves a strong start in life. Parents and primary caregivers play the most immediate role in shaping their children's early foundation. When parents go to work, they want and need access to safe, affordable child care that supports their infants' and toddlers' healthy development.

Low adult-to-child ratios and small group sizes are essential for supporting children's health, safety and development in child care settings. In recognition of the unique needs of infants and toddlers, **ZERO TO THREE recommends a ratio of 1 adult for every 4 children under the age of three with a maximum group size of 8 children in center-based settings.**^{II} Few states' licensing rules currently align with this recommendation, and some states are exploring increases to ratios and group sizes, putting children's safety and well-being at risk. It is essential that states recognize the important role child care ratios and group sizes play in promoting children's safety and healthy development during the critical first years of life and make decisions that support those outcomes.

Low ratios and small group sizes are critical for babies

Babies' brains grow faster between the ages of 0 and 3 than at any later point in life, forming more than 1 million new neural connections every second.ⁱⁱⁱ Their early experiences – both positive and negative – build the foundation for brain architecture and physical and mental health that will support their ability to learn, grow and thrive. Safe and responsive child care supports brain development.^{iv}

- Health and safety: The developmental needs of infants and toddlers make them particularly vulnerable to health and safety risks. For infants who aren't yet walking, it is essential that there be enough adults present in a child care setting to safely and quickly transport children in the event of an emergency such as a fire. Toddlers routinely engage in a variety of risky behaviors – such as climbing, biting, and jumping – that require close supervision. Choking and potential allergic reactions to new foods are important threats for very young children requiring swift identification and response. Babies are also particularly vulnerable to adverse outcomes from illnesses such as RSV and flu which can spread easily in crowded environments.
- **Relationships:** Young children learn and grow in the context of relationships with responsive, consistent caregivers. Low ratios and small group sizes improve interactions by ensuring that caregivers have adequate
- " It's important to have low staff-child ratios because I want enough hands in the room to handle everyone. Secure attachment is one of the main building blocks in the first years of a child's developing brain. Having a primary caregiver, especially for an infant, is crucial. Without enough staff, children miss out on creating the strong relationships they need to develop.

–Stefany P. Parent and former infanttoddler educator



time and capacity to attend to the individual needs of each child. Lower ratios and smaller group sizes may also contribute to reduced caregiver stress and burnout which contributes to better experiences for children through more responsive interactions and less staff turnover.^v

• **Caring for infants and toddlers is labor intensive:** Caring for infants and toddlers up to age 3 is different from caring for older children who can do basic tasks more independently. Activities such as diapering and feeding require significant attention for very young children and offer opportunities for important interactions, vocabulary building and relationship strengthening.

What we know about child care ratios and group sizes in states

Rules for ratios and group sizes vary significantly from state to state and fall short of national recommendations. The gap between state licensing regulations and best practice recommendations for ratios and group sizes is particularly glaring for toddlers.

States meeting recommend	ded ratio of 1:4	4 with a max group	size of 8 in child care centers.

	Infants		1 Year Olds		2 Year Olds	
	Ratios	Group Size	Ratio	Group Size	Ratio	Group Size
# of states meeting recommendation	37	24	15	8	4	3

Source: ZERO TO THREE, State of Babies Yearbook: 2023

Several states have weakened support for child safety and development by increasing ratios and group sizes, and more states may be considering such changes. In addition to ratios and group sizes, states make determinations regarding age groupings. In some cases, states have lowered the age at which children are considered toddlers, resulting in younger children being placed in classrooms with higher ratios and larger group sizes that aren't appropriate for their age.

Hidden Costs of Increased Ratios

Addressing the need for expanded child care access for families and increased compensation for child care providers is urgent and essential. However, accomplishing these goals by increasing ratios and group sizes puts babies and toddlers at risk, undermines the key relationships that help them feel secure and support their development, burdens an already over-burdened workforce and threatens the development and safety of our youngest children. Increasing ratios and group sizes also harbor hidden costs, such as increased premiums for liability insurance and costs associated with high levels of staff turnover such as training and administrative expenses for child care providers.^{vi}

Increasing ratios and group sizes in child care settings puts additional pressure on a child care workforce that is already stretched to the breaking point, with half of early educators already reporting symptoms of burnout.^{vii} These hidden costs can undermine the perceived fiscal benefits of increasing ratios and group sizes.

Conclusion

Child care is in crisis. Many states and communities are joining families in finding solutions that protect our youngest children. Every child deserves the opportunity to reach their full potential. As leaders do the important work of expanding access to child care and increasing compensation for the child care workforce, policy solutions must also ensure child health, safety and development.

Low ratios and small group sizes are an essential support for infants and toddlers in child care that recognizes the unique needs of our youngest children. Child care that is safe and grounded in responsive adult-child interactions supports babies' healthy development and can help set children on the path to lifelong success. Improving policies related to ratios and group sizes is an important tool available to state leaders.

Additional Resources

To learn more about state opportunities to increase access to safe, affordable child care that supports infants' and toddlers' health development, visit out <u>Building for Babies: State Policy Self-Assessment Suite</u>. The **Self-Assessment Tool** includes recommentations related to early care and education access and family choice, funding, supply and workforce. The **Baby Book** holds resources and state examples that can help guide your thinking. We are always happy to be a thought partner as well, feel free to contact us at <u>policycenter@zerotothree.org</u>.

A R Datta, Z Gebhardt, K Piazza, C Zapata-Gietl (2023). Children's Participation in Child Care and Early Education in 2012 and 2019: Counts and Characteristics. OPRE Report No. 2023-118, Washington DC: Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Available at: https://www.acf.hhs.gov/opre/project/national-survey-early-care-and-education-2019-2017-2022.

"This recommendation is based on best practice from evidence-based programs such as Early Head Start. While this brief does not focus on homebased child care settings, the Early Head Start-Child Care Partnership guidance re group size and ratios may be helpful for states to consider.

"Harvard Center for the Developing Child, Retrieved from https://developingchild.harvard.edu/key-concept/brain-architecture/.

¹ Phillips, D. A., & Shonkoff, J. P. (2000). From Neurons to Neighborhoods: The Science of Early Childhood Development. Washington, DC: National Academy Press. Retrieved from <u>https://www.nap.edu/catalog/9824/from-neurons-to-neighborhoods-the-science-of-early-childhood-development</u>.

^vNAEYC (2024). The Costs of Deregulating Child Care: Decreased Supply, Increased Turnover, and Compromised Safety. Retrieved from <u>https://www.naeyc.org/sites/default/files/wysiwyg/user-73607/2024naeycderegulationresource_final.pdf</u>.

^{vi}NAEYC (2024). The Costs of Deregulating Child Care: Decreased Supply, Increased Turnover, and Compromised Safety. Retrieved from <u>https://www.naeyc.org/sites/default/files/wysiwyg/user-73607/2024naeycderegulationresource_final.pdf</u>.

^{vii}ZERO TO THREE, State of Babies Yearbook: 2023, retrieved from <u>https://zerotothree.wpenginepowered.com/wp-content/uploads/2023/09/</u> SOBY2023_Yearbook_Full_v4.pdf



ZERO TO THREE works to ensure all babies and toddlers benefit from the family and community connections critical to their well-being and development. Since 1977, the organization has advanced the proven power of nurturing relationships by transforming the science of early childhood into helpful resources, practical tools and responsive policies for millions of parents, professionals and policymakers.

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