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Quality: What it Is and Why it Matters in Early Childhood Education

qual-i-ty

Merriam Webster's Definition:

2a : degree of excellence

2b : superiority in kind

Synonyms: CALIBER, CLASS, GRADE, RATE

Executive Summary

What does the term “quality” mean to you? Is it the difference between a one-star and a five-star hotel? A positive product review in Consumer Reports? Or durability that will last a lifetime? Experts in the field of early care and education¹ talk about program quality—but what does that look like? And why does it matter?

This policy brief explains why quality matters, demonstrates what quality looks like, and details how it should be measured. Finally, it posits this recommendation:

New York State should invest in increased access to high-quality early care and education programs.

Targeted investment in high-quality early care and education will improve school success in New York's most at-risk communities. Seventy-five percent of brain growth and 85% of intellect, personality and social skills develop before age five—in the first 2,000 days of life—so it is imperative that we invest in our youngest children long before they enter school.^{2, 3} Yet we know that one out of three children in New York State start Kindergarten already behind in basic skills.⁴

Early care and education programs serve children from infancy to age five in a variety of settings—child care centers; family child care homes; Prekindergarten (Pre-K) and Head Start classes. In New York State, these programs serve more than 300,000 children every year. Thousands more are served in legally-exempt (non-regulated family, friend and neighbor) home-based child care and private nursery schools. All care, regardless of setting, should be affordable, accessible, and most importantly—high-quality.

The Quality Issue

The National Institute of Child Health and Development (NICHD) conducted a review from 1991–2007 that followed more than a thousand children from infancy through ninth grade, evaluating the impact that child care had on their development.⁵ The study also looked at family features, such as income and education level, with the understanding that all of these aspects affect a child's development.

According to the study, about half of U.S. children were found to receive moderate or highly positive care, while the other half did not. Children from poor families (who often had the highest need) tended to receive lower-quality care, except when they attended subsidized centers with better educated and trained staff.

When research tells us that quality early care and education can help close the achievement gap, why are we continuing to provide substandard child care and early education to young children as they prepare for school and for life?

Why Quality Matters

Perhaps we think that if an early care and education program isn't of the highest quality, it isn't the worst thing in the world. At least it isn't detrimental to a child's development—right? Wrong!

A child's readiness for school depends on meeting his/her comprehensive needs, which includes: physical and motor development; language and literacy; social and emotional development; approaches to learning; and cognitive development. If a child enters school with deficits in these areas, it will be difficult to catch up. In fact, as much as half of school failure may be

attributable to gaps in early care and development that existed before school entry.⁶ A child who starts behind is likely to stay behind.

Research shows that high-quality, intensive early care and education programs for low-income children can have lasting positive effects such as greater school success, higher graduation rates, lower juvenile crime, decreased need for special education services later, and lower adolescent pregnancy rates. At the same time, low-quality care can have harmful effects on language, social development, and school performance that are more difficult to ameliorate, especially for children in schools with fewer resources. The positive effects from high-quality programs and the negative effects from poor-quality programs are magnified for children from disadvantaged situations or with special needs, and yet these children are least likely to have access to quality early care and education. Many families have no quality early care and education options in their immediate communities.⁷

Research shows that:

- ★ Children who received higher-quality child care had better math skills prior to school entry and during kindergarten and second grade.⁸
- ★ Toddlers who received higher-quality child care had fewer behavior problems than those who received lower-quality care.⁹
- ★ Children who received lower-quality child care during the first three years were rated “more difficult” by their preschool teachers and “more hostile” by their Kindergarten teachers.¹⁰

The NICHD study proved that the impact of quality (whether high or low) was long-lasting, with obedience and academic problems persisting until age 15.¹¹ This study also showed that:

- ★ Those who received higher-quality child care scored higher on tests gauging cognitive and academic achievement.
- ★ Teenagers who received higher-quality child care were less likely to engage in problem behaviors (fighting, arguing, being mean to others) than those who received lower-quality care.



What Quality Looks Like

So what does quality look like? Parents, providers, and policymakers want to be able to visualize a quality program. While they know that quality certainly doesn't entail a child sitting in front of a television set all day, they are often hard-pressed to define what it does look like.

The National Association for the Education of Young Children (NAEYC) describes a high-quality program as providing “a safe, nurturing environment that promotes the physical, social, emotional and cognitive development of young children while responding to the needs of families.”

Such a program depends greatly on the quality of the interactions between the child and the teacher. The First Five Years Fund's national Invest in US campaign, notes that you want to see teachers with four-year degrees and specific training in early childhood education; teachers who crouch to eye level to speak to children; teachers who hold, cuddle, show affection and speak directly to infants and toddlers; and families and teachers exchanging information about the child's development and learning progress.¹² The interactive Invest in US exhibit provides an example of what a high-quality classroom looks like: <http://www.investinus.org/tour-high-quality-classroom>.

Components of a high-quality program include:

- ★ A developmentally appropriate curriculum;
- ★ Adequate teacher training;
- ★ A safe environment;
- ★ Small group size and low adult to child ratios; and
- ★ Parent-teacher communication (family engagement).¹³

How does this translate into practice?

According to the National Association of Child Care Resource and Referral Agencies (NACCRRA), “High-quality child care is a safe, clean and engaging place where parents can partner with trained professionals in order to help nurture and develop their children intellectually, emotionally and physically.”

How Quality is Measured

Measuring quality can be challenging, but it is possible. Quality indicators include process and structural measures.

Process measures use standardized tools to measure quality. The measure for classrooms serving infants and toddlers is called the Infant/Toddler Environment Rating Scale (ITERS); the measure for children ages three to five is the Early Childhood Environment Rating Scale (ECERS). The measure for child care provided in homes is the Family Day Care Rating Scale (FDCRS).

Each of the above scales has six subscales describing specific features of a program:

1. Space and furnishing
2. Basic care routines
3. Language development
4. Social development
5. Learning activities
6. Provisions for adult needs

Possible ratings range from 1 to 7, with ratings from 1 to 2.9 indicating poor care (do not meet basic custodial care needs), 3 to 4.9 being minimal (meet basic care and safety needs), and 5 to 7 indicating good-to-excellent care (provides developmentally appropriate, personalized care, and has good materials for children’s use).¹⁴

Structural measures examine caregiver characteristics (such as education and training), adult to child ratios, and class size. Another important measure of a high-quality learning environment is positive teacher-child interactions. The Classroom Assessment Scoring System (C.L.A.S.S.) is an observational

assessment that evaluates three domains of teacher-child interactions: emotional support, classroom organization, and instructional support.

The Workforce is the Key to Quality

A program cannot provide quality care if its staff does not know how to provide it. It takes a special person to work with children every day. While that person should like children, that is not the only requirement.

New York State’s Core Body of Knowledge outlines the six core competencies, or recommended practices, for early childhood educators.¹⁵ The competencies are designed to help program leaders “avoid a one-size-fits-all approach to professional development,” concentrating instead on developmentally appropriate and individualized learning. The competencies are:

1. Child Growth and Development
2. Family and Community Relationships
3. Observation and Assessment
4. Environment and Curriculum
5. Health, Safety, and Nutrition
6. Professionalism and Leadership
7. Administration and Management

Studies show that infants have better expressive language skills when their caregivers are better educated and that preschoolers’ language comprehension skills are higher when their caregivers have at least an Associate of Arts degree in a child-related field.¹⁶

Unfortunately, although a career ladder is currently under development, there is not yet one in place for the early care and education workforce, and no incentive to pursue higher education. The median salary for a child care worker with more than 20 years experience is \$35,000—only slightly higher than a pizza delivery person (\$30,000, 5–9 years experience) and significantly less than a dog walker (\$60,000, 5–9 years experience).¹⁷ Until the State makes an investment, we will continue to see an undereducated, or an overeducated and underpaid, workforce. And our children will suffer for it.



A Three-Pronged Approach: Access, Affordability and Quality

Unfortunately, access and affordability are issues for families. For example, while New York State's Universal Pre-K program is free to families, it still only serves less than half of all eligible four-year-olds. This is because funding is not available to serve all eligible children. In addition, the State only funds part-day programs and does not provide transportation to and from those programs, making it difficult for working parents to utilize them. Regarding child care, the average annual cost for an infant in center-based care is double the cost of a year's tuition and fees at a four-year public college, making it prohibitive for

"I have two (children) here: A one-year-old and a four-year-old. I looked at education of the teachers, the classroom supplies; the friendliness and it seemed like everyone's always happy here, so that's important. A center with stars compared to a center without stars would make a big difference in my mind as a parent."

Tara R., parent

many families.¹⁸ However, while subsidies are meant to assist 128,000 low-income working families, others remain on waiting lists or are forced to place their children in unregulated (and possibly low-quality) care because there is such a shortage.

Family characteristics play a part when it comes to choosing a program. Parents often choose a program that's convenient—close to work or home. However, research tells us that parents with higher levels of education are more apt to place their children in centers with higher ECERS scores, lower child to adult ratios, and better-trained teachers.¹⁹

The quality of early care and education affects parents, too. It stands to reason that parents rest more comfortably when they know that their child is being properly cared for in a safe environment. When parents miss work because of problems with child care, the instability affects both parent and child. According to the Urban Institute, mothers reported in several studies that a lack of reliable and dependable child care arrangements affected their ability to remain employed.²⁰ Evidence even suggests that, among low-income women, higher-quality care may increase employment, stability of employment, and hours of work.

Implementing a Quality Rating and Improvement System will Ensure that Parents and Taxpayers are Making the Best Investments

A means to measure and improve quality does exist, and has been field tested and evaluated across the State. In fact, following the field test, the State Education Department invested \$4 million of federal Race-to-the-Top funds into expanding the initiative into programs in Persistently Low-Achieving (PLA) school districts. It is called QUALITYstarsNY.

A voluntary quality rating and improvement system like those in more than 30 states, QUALITYstarsNY is designed to not only better inform families about program quality but to improve that program quality, thereby promoting better outcomes for children. The initiative examines how well an individual program or provider implements the program standards, which include an appraisal of the interactions between the children and teachers, the teaching environment and curriculum, professional development for staff, family engagement, and on-going efforts to demonstrate best practices to support children's learning and development.²¹ QUALITYstarsNY provides professional development opportunities and technical assistance to increase quality. Finally, it affords New York State the opportunity to ensure accountability for public investments.

Most of the investment in QUALITYstarsNY goes to improving programs based on a clearly defined plan that includes professional development and other investments and maintaining that quality going forward. A modest amount goes to coordination; assessment of programs and recording of data; and communication with families.

Although QUALITYstarsNY comes with a price tag, an investment in this initiative makes much greater fiscal sense than continuing to put money into programs that may be detrimental to children's development.

Recommendation

New York State must focus on laying the foundation for a comprehensive early education system that provides access and quality. That foundation is QUALITYstarsNY. New York State should invest in the implementation of QUALITYstarsNY to ensure that parents and taxpayers are making the smartest investments with the highest returns for all of the State's children.

Appendix A:

Behaviors and Skills from the Core Body of Knowledge's Core Competencies

COMPETENCY ONE: CHILD GROWTH AND DEVELOPMENT

The professional working with young children:

- 1.1: Applies the cycle of assessment, planning, implementation, and evaluation to support children's healthy development.
- 1.2: Encourages children's social and emotional development.
- 1.3: Helps children achieve self-regulation and acquire coping skills.
- 1.4: Supports children's gross, fine, and graphomotor development.
- 1.5: Supports children's cognitive development.
- 1.6: Supports children's language and literacy development.
- 1.7: Encourages and supports English Language Learners.
- 1.8: Facilitates children's play to encourage motor, cognitive, language, social, and emotional development.
- 1.9: Supports children with special needs and their families.

COMPETENCY TWO: FAMILY AND COMMUNITY RELATIONSHIPS

The professional working with young children:

- 2.1: Respects families and is responsive to language, culture, family characteristics, needs, concerns, and priorities.
- 2.2: Communicates regularly, respectfully, and effectively with families.
- 2.3: Provides families with opportunities to learn and develop skills to help their children achieve desired outcomes at the program, at home, and in the community.
- 2.4: Shares power with families and involves them in decision-making.
- 2.5: Helps connect families with needed resources and services.
- 2.6: Supports families through transitions within and between programs.

COMPETENCY THREE: OBSERVATION AND ASSESSMENT

The professional working with young children:

- 3.1: Uses observation and assessment tools to support children's development and learning.
- 3.2: Practices responsible assessment.
- 3.3: Builds positive, productive assessment partnerships with families and colleagues.
- 3.4: Practices responsible reporting of assessment results.
- 3.5: Uses observation and assessment to plan and modify environments, curriculum, and teaching.
- 3.6: Practices responsible formal evaluation and reporting procedures.

COMPETENCY FOUR: ENVIRONMENT AND CURRICULUM

The professional working with young children:

- 4.1: Creates genuine, supportive relationships with children.
- 4.2: Creates an environment that is predictable, promotes interaction and learning, and is responsive to children's needs.
- 4.3: Works to effectively and calmly address challenging behavior.
- 4.4: Creates an environment that values the inclusion of all children.
- 4.5: Fosters a sense of community by encouraging interaction, empathy, connectedness, responsibility, and independence.
- 4.6: Arranges a learning environment that is well organized, aesthetically pleasing, promotes reflection, and extends learning.
- 4.7: Arranges and facilitates the use of the physical space and materials in ways that support healthy development, self-management, and cooperation.
- 4.8: Uses approaches to learning that build on children's natural curiosity, deepen children's knowledge and awareness, and sustain active engagement with ideas and materials.
- 4.9: Adopts or designs meaningful curriculum for young children.

- 4.10: Makes sound decisions for selecting and using technology and media to enhance teaching and learning.
- 4.11: Plans and implements interventions to help children meet developmental and learning goals.

COMPETENCY FIVE: HEALTH, SAFETY, AND NUTRITION

The professional working with young children:

- 5.1: Has current, valid documentation of training in topics essential to children's health, safety, and nutrition.
- 5.2: Maintains organized, accessible, and up-to-date records related to the health, safety, and nutrition of the children in their care.
- 5.3: Knows and follows proper procedures as outlined by the applicable regulatory agencies.
- 5.4: Takes precautions that protect children's health and maintains a healthy learning environment.
- 5.5: Applies practices that encourage positive health behaviors and support the physical and mental well-being of children and families.

COMPETENCY SIX: PROFESSIONALISM AND LEADERSHIP

The professional working with young children:

- 6.1: Uses and follows all relevant ethical standards and professional guidelines.
- 6.2: Develops the dispositions necessary to effectively support young children and their families.
- 6.3: Displays professionalism in practice.
- 6.4: Exhibits commitment to ongoing growth and learning.
- 6.5: Exhibits classroom and program leadership skills.
- 6.6: Advocates for appropriate practices within the early childhood field.

COMPETENCY SEVEN: ADMINISTRATION AND MANAGEMENT

The professional working with young children:

- 7.1: Creates, implements, and revises management policies and procedures.
- 7.2: Maintains systems that adhere to all New York State and local regulatory requirements, as well as best practices related to health, safety, and nutrition.
- 7.3: Maintains effective personnel policies and procedures and effective systems for staff recruitment, development, management, and evaluation.

- 7.4: Applies sound financial planning and management to the program's operation.
- 7.5: Implements policies that promote partnerships with families and allows the program to be responsive to families' preferences and styles.

Endnotes

- ¹ Also referred to as "early care and development" and "early care and learning."
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- ⁴ UNC Chapel Hill – early childhood institute, http://www.fpg.unc.edu/~ncedl/PDFs/ed_early_years.pdf
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- ⁶ *Early Learning Left Out*, <http://www.voices.org/wp-content/uploads/2010/11/ELLO.pdf>.
- ⁷ Quality Early Childhood Education and Child Care from Birth to Kindergarten, Pediatrics Vol. 115 No. 1 January 1, 2005, pp. 187 -191 (<http://pediatrics.aappublications.org/content/115/1/187.full>)
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- ¹⁵ *Core Body of Knowledge: New York State's Core Competencies for Early Childhood Educators*, New York Works for Children; 2012.
- ¹⁶ Burchinal et al; 1996 and Howes; 1997.
- ¹⁷ Data on salary disparities from Payscale.com.
- ¹⁸ *Parents and the High Cost of Child Care: 2010 Update*, National Association of Child Care Resource and Referral Agencies (NACCRRA); August 2010.
- ¹⁹ Blau; 1999c; Peisner-Feinberg and Burchinal; 1997.
- ²⁰ Bowen & Neenan; 1993; Mason & Kuhlthau; 1992; Presser & Baldwin; 1980.
- ²¹ *QUALITYstarsNY FAQ Sheet, Winning Beginning NY*, Citizen Action of New York and the Alliance for Quality Education; 2012.

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