



## Small Groups

Use this resource to help communicate the importance of small groups for infants and toddlers. It will help promote essential program practices to ensure quality within family child care and center-based programs that serve infants and toddlers.

### Rationale

High-quality relationship-based care is central to children's early brain development, emotional regulation, and learning (Center on the Developing Child, 2012). One of the Program for Infant/Toddler Care (PITC) essential program practices for promoting this type of care is the use of **small groups** (PITC, n.d.).

Small groups with low adult-child ratios support quality early care environments and positive caregiver-child interactions (Schmit & Matthews, 2013). Small group size also fosters secure attachments between infants and their caregivers, which are essential to healthy social and emotional development (Ahnert, Pinquart, & Lamb, 2006).

Small group size, as defined for center-based programs, may include up to six infants (under 12 months of age) with an adult-child ratio of 1:3. For toddlers (ages 13 to 36 months) groups of no more than eight children are recommended, with an adult-child ratio of 1:4. The recommended group size in family child care or home-based care is one caregiver for no more than six children, of which no more than two are under age 2 (American Academy of Pediatrics et al., 2011). Groups may be made up of same-age or mixed-age children.

### Why Are Small Groups Important for Infants and Toddlers?

- ◆ Small groups increase opportunities for one-on-one interactions and individualized care (Raikes & Edwards, 2009).
- ◆ The intimacy of small groups allows infants and toddlers to learn about, understand, and form caring relationships with adults and other children (Lally, Torres, & Phelps, 2010).
- ◆ Infants and toddlers need adult support in regulating environmental stimuli and benefit from separate spaces that limit contact with other groups. Small groups help with the regulation of environmental stimuli (Tarullo, Obradovic, & Gunnar, 2009).
- ◆ Small groups help with providing personalized care, support during social interactions, and modeling peaceful exchanges that promote the development of intimate relationships (Lally, 2013).
- ◆ Low adult-child ratios and small group sizes are strong predictors of an increase in positive staff interactions (Kreader, Ferguson, & Lawrence, 2005).
- ◆ Smaller group size allows for fewer distractions and overstimulation for infants and toddlers and their caregivers, supporting a quality environment (Lally, Torres, & Phelps, 2010).



## How Do Small Groups Promote Positive Child Outcomes?

- ◆ Caregivers who work with small groups of infants and toddlers are more likely to provide developmentally appropriate activities and facilitate cognitive and language development (Lally, Torres, & Phelps, 2010; McMullen & Dixon, 2009).
- ◆ Responsive interactions that are respectful to the individual needs and interests of each child supports healthy emotional development and self-regulation, providing an environment that allows infants and toddlers to focus (Lally, Torres, & Phelps, 2010; Tarullo, Obradovic, & Gunnar, 2009).
- ◆ Small groups help facilitate meaningful peer relationships for infants and toddlers and promote opportunities for problem solving and discovering their world (Lally, Torres, & Phelps, 2010).

## Planning to Implement Small Groups in Diverse Child Care Settings

**Goal:** High-quality infant and toddler programs care for children in small groups with low adult-child ratios.

- ◆ Implement written guidance to support small group size throughout the program. This guidance includes staff and family handbooks that share the importance of, as well as practices for, small groups as defined by the American Academy of Pediatrics.
  - Use criteria for center-based programs and family child care in Rationale section, above.
  - Policies and facility planning allow adults to consistently maintain recommended group sizes throughout the day, whether indoors or outdoors.
- ◆ Develop written policies that describe a system of small groups with low ratios that keep children with the same primary caregiver for the entire time that the child is enrolled, up to age 3. For more information, see the rationale paper for Primary Care at <https://childcareta.acf.hhs.gov/resource/six-essential-program-practices-program-infanttoddler-care-primary-care>.
- ◆ Create job descriptions for infant and toddler teachers that include expectations for developing primary care relationships with a small group of children.
- ◆ Attend, create, or advocate for professional development on the concepts and implementation of small groups with low adult-child ratios. Support ongoing conversations with center-based or family child care administration to sustain small group size and low adult-child ratios.
- ◆ Use an intentional review process to continually strengthen the system of small group practices across the center or family child care program.



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