RUTGERS CHILDCARE RESEARCH COLLABORATIVE

Licensed Center-Based Child Care Providers in New Jersey:

Characteristics and Enrollment

AUTHORED BY
Christina Stephens, Allison Friedman-Krauss, Milagros Nores, Andrea Kent and Karin Garver
National Institute for Early Education Research

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RUTGERS–NEW BRUNSWICK Center for Women and Work School of Management and Labor Relations
RUTGERS–NEW BRUNSWICK Edward J. Bloustein School of Planning and Public Policy John J. Heldrich Center for Workforce Development
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NEW JERSEY DEPARTMENT OF CHILDREN AND FAMILIES

ABOUT THE RUTGERS CHILD CARE RESEARCH COLLABORATIVE

With funding and support from the New Jersey Department of Children and Families, the Center for Women and Work, the Heldrich Center for Workforce Development and the National Institute for Early Education Research have joined together to form the Rutgers Child Care Research Collaborative for the purpose of conducting research and facilitating community conversations that develop a broad and comprehensive understanding of New Jersey's child care landscape. Our research aims to increase understanding about the needs and interests of parents in New Jersey, the supply and motivations of the child care workforce, and the capacity of the child care sector to meet demand for child care today and into to future within our diverse state.

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INTRODUCTION

Center-based child care providers in New Jersey (NJ) deliver critical early care and education (ECE) services to families that support the development of children ages 0 to 5, as well as their caregivers' ability to work; and they are an integral piece of the state's ECE ecosystem. However, it is often challenging for families to access providers that meet their multitude of needs, as the supply of center-based providers is limited in many places and varies in terms of the features they offer (Sandstrom et al., 2024; Stephens et al., 2024). To identify policies and resources that may address supply gaps in the child care system in NJ, more knowledge is needed about the services and characteristics of center-based providers in the state.

This report focuses on the characteristics, enrollment, and capacity of licensed center-based providers. This research is part of a larger series of reports aimed at providing a descriptive portrait of licensed center-based child care providers in NJ using data from a state-wide survey of 1,300 child care center directors. This survey was conducted between October 2023 and September 2024 by the National Institute for Early Education Research (NIEER). Topics covered on this survey included provider characteristics (i.e., children served, auspice, classrooms, enrollment), non-teaching and teaching staff, and revenue and expenses. This effort is part of a multi-center collaborative project with the Center for Women and Work and the John J. Heldrich Center for Workforce Development at Rutgers, The State University of New Jersey, with support and collaboration from the New Jersey Department of Children and Families (NJ DCF).

In this report, we present results of survey questions focusing on the ages of children served, operating schedules, enrollment, and capacity of licensed center-based providers.[1] Additional reports cover centers' staffing, and revenue and expenses. The findings in this report offer insights into the center-based provider supply in NJ that can be used to identify areas where families may encounter more constrained access and inform mechanisms to strengthen the ECE system in the state.

[1] This report presents results from descriptive analyses, including averages and proportions. We also assessed the precision of these estimates with 95% confidence intervals. Although the intervals are not shown in this report, all proportion estimates fell within a 10-percentage point margin, and estimates of averages fell within a reasonable range.

Key Findings

Center Characteristics

- Licensed center-based child care providers in New Jersey primarily served preschool-age children, with 2 out of 3 providers also serving infant- and toddler-age children (those under 3 years old).
- More than half of centers were for-profit, and/or independently owned and operated.
- Three out of 4 centers were open year-round (43 or more weeks per year). Most centers were open 5 days per week, and 81% of providers were open 9 or more hours per day.
- Nine out of 10 centers were open from 8 AM through 3 PM, less than a quarter were open before 7 AM, and only 17% were open through 6 PM.
- Two out of 10 centers indicated they had classrooms contracted for state pre-k, and on average had 5 contracted classrooms.
- On average centers enrolled a total of 62 children ages 0 to 5 years. Depending on ages served, they enrolled an average of 26 infant- and toddler-age children, 46 preschool- age children, and/or 25 school-age children.
- About 32% of centers' enrollment was dual language learner children, and 4% were children with identified special education needs.
- On average, centers were enrolled at 73% of their total reported capacity, with nearly half (45%) reporting enrollment under 75% of their total capacity.
- Within the year prior, nearly half of centers reported they had placed children on a waitlist because there were no available slots (46%), and another 14% reported they turned away children.

BACKGROUND

The ECE services offered by center-based child care are critical for promoting children's early development from ages 0 to 5 and supporting caregivers' ability to work (Barnett & Jung, 2021; Chaudry et al., 2021; Malik et al., 2018). However, finding and accessing providers that fully meet the multitude of needs families have can be challenging, resulting in ECE selections being made as a result of a series of trade-offs and constrained choices (Banghart et al., 2024; Chaudry et al., 2010; Stephens et al., 2025). The federal Office of Planning, Research, and Evaluation (OPRE) has defined ECE access as care that is (1) available and found with reasonable effort, (2) affordable, (3) supportive of children's development, and (4) aligned with parent needs (Friese et al., 2017). Equity, or the extent to which differential access may occur in any of the above dimensions, is also an important component (Joshi et al., 2025; Thomson et al., 2020). This family-centered way of thinking about access is helpful for identifying the various features and services offered by center-based providers that families consider during their ECE search and as they choose child care arrangements for their children.

In recent years there have been increased efforts, policies, and funding aimed at expanding children's and families' access to ECE opportunities, including increases in state-funded preschool and child care subsidy programs, more robust licensing requirements and quality rating system expectations, and efforts to strengthen the teacher workforce in terms of training, education, and compensation. There is increasing evidence that these efforts have been effective in terms of improving child enrollment, provider quality, and

early learning outcomes (e.g., Barnett et al., 2018; Farr et al., 2024; Phillips et al., 2017). Public ECE funds have also helped providers, who otherwise operate under thin profit margins to, offer more affordable prices to families (U.S. Department of the Treasury, 2021). However, these shifts have also led to changes in how center-based providers offer services, with new challenges emerging in how centers respond to families' child care needs. These challenges include centers' ability to operate on extended schedules that can accommodate parents' work schedules, serve various age groups from birth through age five, and navigate enrollment and capacity constraints. The COVID-19 pandemic also worsened existing issues within the ECE landscape, resulting in center closures, staffing challenges, and other supply constraints that limited the availability of child care options for families (Khattar & Coffey, 2023; Malik et al., 2020; Zhang et al., 2023).

To gain a better understanding of the services offered by child care providers and identify areas where there are supply gaps, it is important to closely examine the landscape of center-based providers in NJ, a state with historically high-quality pre-K (Friedman-Krauss et al., 2025; Hodges, 2021). NJ is home to approximately 630,000 children under the age of 5, 68% of whom have all available parents/caregivers in the workforce–emphasizing a large demand for ECE services (First Five Years Fund, 2025). Rates of use of center-based child care are higher in NJ (49%; Barnett et al., 2025) than national estimates (36%; Hanson & Bobrowski, 2024). State records from NJ DCF indicate there were over 3,200 licensed center-based providers in 2024 serving children ages 0 to 5, with an authorized enrollment capacity of nearly 320,000.[2] This suggests that the demand for child care likely outweighs the supply of center-based providers in the state, and there is evidence that publicly funded programs only serve a small share of children who are eligible (First Five Years Fund, 2025). Furthermore, national and NJ state estimates suggest that the supply of providers that serve infant- and toddler-age children, as well as those offering supports for serving dual language learner (DLL) children and children with identified special education needs is particularly limited (Banghart et al., 2020; Mader, 2023; Office of English Language Acquisition, 2022).

As scholarly work continues to highlight significant variation and constraints among the center-based child care supply (e.g., Banghart et al., 2024; Malik et al., 2020; Stephens et al., 2024), it is important to more closely examine the services and features that licensed child care centers in NJ offer to families with young children. Such work can help identify provider resources, policies, and targeted funding efforts to address supply gaps and help families access high-quality ECE providers that meet their multifaceted child care needs and preferences (Banghart et al., 2024; Friese et al., 2017). This report is a step in this direction, focusing on centers that serve children ages 0 to 5 years in NJ. Information in this report can inform initiatives to improve access among the sector of licensed center-based providers.

CENTER-BASED CHILD CARE PROVIDER SURVEY

▲ Study Methods

Measures and Procedures

The survey results reported here come from a larger study investigating the child care landscape in NJ. This report focuses on a survey that was distributed to all licensed center-based child care providers in the state via email by NJ DCF. The survey was fielded via Qualtrics' platform from October 2023 to September 2024, and asked for active consent before directors could access the survey. NJ DCF also sent reminders to centers

[2] In addition to licensed child care centers, state records indicate there are over 1,300 licensed family child care home providers, with an estimated capacity of about 6,800 enrollment slots (NJ DCF state records, 2024; First Five Years Fund, 2025).

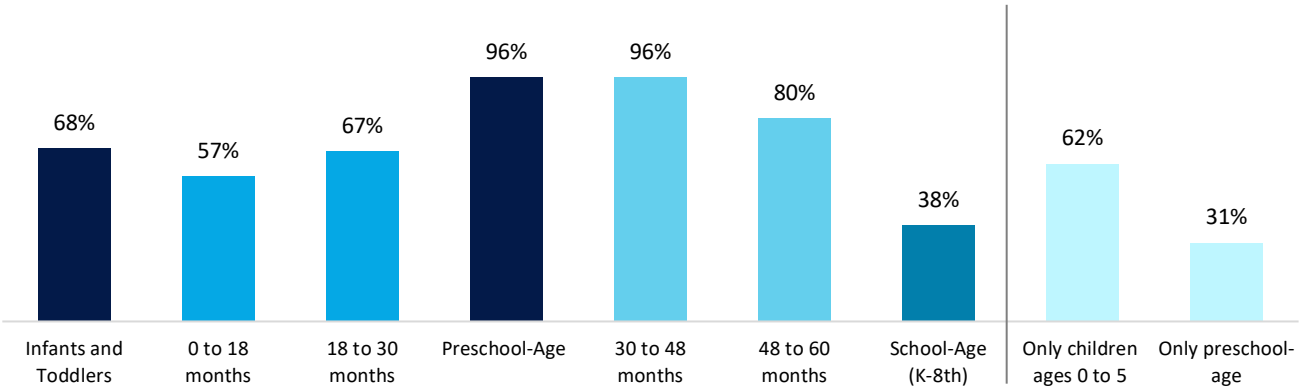
to complete the survey, and a link to the survey was posted on the New Jersey Child Care Information System (NJCCIS) website. NIEER also asked Child Care Resource and Referral agencies to share information about the survey, and called and emailed centers that started but did not complete the survey to encourage them to complete it. The survey asked child care directors to provide detailed information about themselves, their center (including enrollment and capacity), and their administrative and teaching staff. All participating directors who submitted complete surveys received a $50 electronic gift card in appreciation for their time. The research was approved by the Rutgers, The State University of New Jersey's IRB and NJ DCF's Research Review Committee.

Sample

There were 1,300 unique records of licensed center-based child care providers who had a complete, or mostly complete survey and reported that children ages 0 to 5 years old were enrolled (Table A.1). While respondents could select more than one role they held at their center on the survey,[3] most indicated they were a director of their center or school (79%). Additionally, 6% of respondents indicated they were an assistant director, 4% were an administrative assistant, 8% were another administrator, and 9% were a teacher. Most respondents identified as female (94%). More than half of respondents identified as White, non-Hispanic (59%), 18% identified as Hispanic, 13% identified as Black, non-Hispanic, 8% identified as Asian, non-Hispanic, and 3% identified as multiracial or another race, non-Hispanic. On average, respondents had 10 years of experience in their current role, and 19 years of experience in child care overall.

Figure 1 shows the ages of children enrolled at the child care centers that responded to the survey. Nearly all providers (96%) reported enrolling preschool-age children (3 to 5 years old), 68% indicated enrolling infant- and toddler-age children (0 to 3 years old), and 38% indicated enrolling school-age children (Kindergarten to 8th grade). Notably, two in three providers *only* served children ages 0 to 5 (i.e., served no school-age children), and one in three served *only* preschool-age children.

Figure 1. Ages of children served by NJ center-based providers



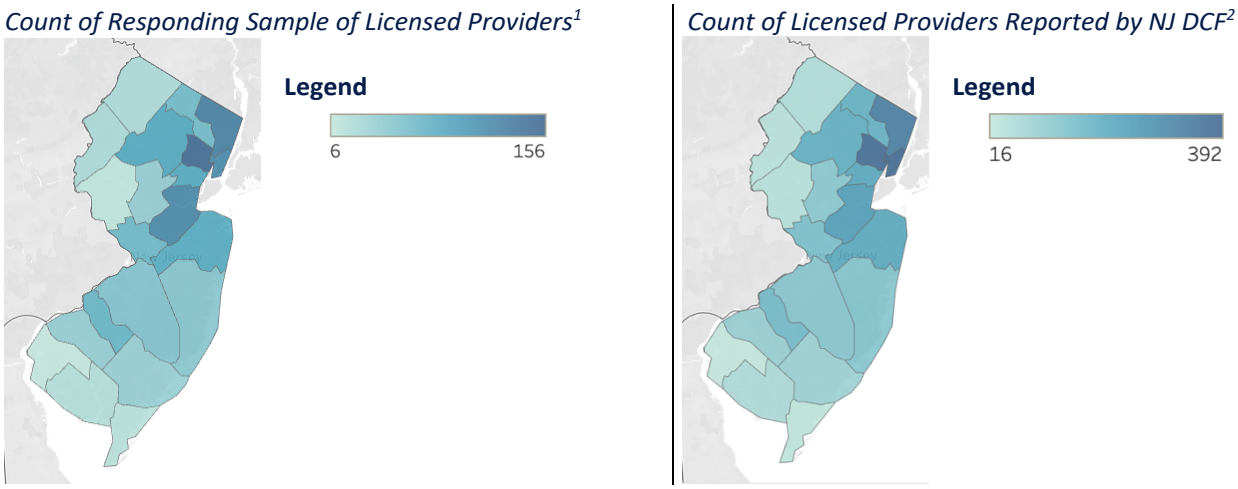
Note. Categories are not mutually exclusive, with the exception of indicators for providers that only serve children ages 0-5 and only preschool-age children. Providers often serve multiple age groups of children and thus, percentages are not intended to add up to 100%.

Child care centers across the state of NJ responded to this survey, with 33% from the Northern region, 28% from the Central region, 21% from the Northeast region, and 18% in the Southern region. These proportions were similar to the distribution of all licensed child care centers serving children ages 0 to 5 years old in NJ (N

[3] 11% of respondents indicated they had more than one role at their center or school.

= 3,269) as of November 2024 (See Table A.2). We received responses from 1,251 centers included in NJ DCF's licensed provider records, suggesting a response rate of 38%.[4] Figure 2 shows the distribution of center-based providers in this sample across counties in NJ compared to the distribution of all child care centers in the state licensed to serve children ages 0 to 5. This distribution of responding licensed center-based providers across counties in NJ also largely overlapped with Census estimates of the child population ages 0 to 5 years by county (See Figure A.1; U.S. Census Bureau, 2025). Additionally, the distribution of total enrollment capacity reported by the centers largely overlapped with the enrollment capacity of all licensed centers in NJ across counties (See Figure A.2). In sum, while there is variation across counties in the distribution of survey responses, this lines up well with variation in where the centers and the children are located across NJ counties.

Figure 2. Distribution of NJ DCF list of all licensed center-based providers vs. provider survey responses, by county



Notes. [1]Estimates are reported on responding providers serving children ages 0 to 5 years old. [2]NJ DCF estimates come from their list of all licensed center-based providers serving children ages 0 to 5 years old as of November, 2024.

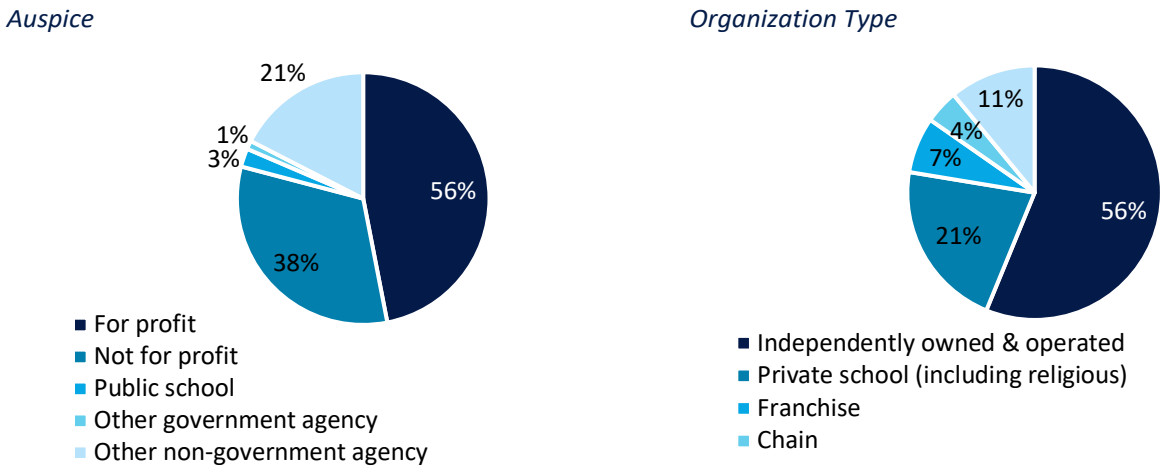
RESULTS – PROVIDER CHARACTERISTICS

Center-Based Child Care Provider Characteristics

Respondents were asked several questions about the characteristics of the child care center they worked at, including auspice, organization type, and their facilities (See Table A.3). As shown in Figure 3, over half of responding centers indicated they were a for-profit provider, and 1 in 3 were not-for-profit providers. In terms of the type of organization, over half were independently owned and operated (56%) and nearly 1 in 4 were private school settings. Fifty-five percent of centers rented or leased their space or building while 35% owned their space or building.

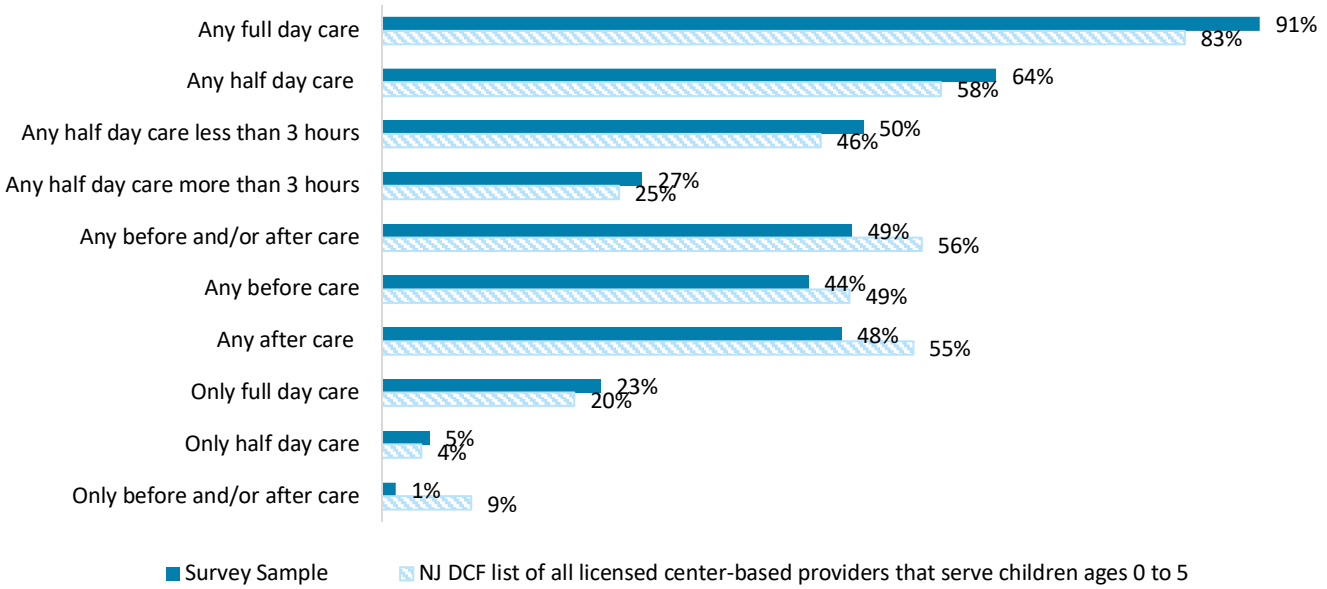
[4] There were an additional 49 providers who participated in the survey which could not be matched with their state license identification number from NJ DCF.

Figure 3. Center-based provider auspice and organization type



The majority of child care centers in the sample offered full day care services (91%), 2 out of 3 centers offered half day care (64%; with overlap of providers offering both options), and half offered before and/or after care services. Additionally, nearly 1 in 4 centers offered *only* full day care (23%), and very few (5%) *only* offered half day care and no other types of sessions (See Table A.4). Since NJ DCF's list of licensed child care centers provided information about the types of sessions offered for all center-based providers in NJ, we are able compare the survey sample to it. As shown in Figure 4, the types of sessions offered by centers in this sample closely align with those in all licensed child care centers in NJ serving children ages 0 to 5.

Figure 4. Sessions offered at center-based providers from survey samples and NJ DCF list of providers



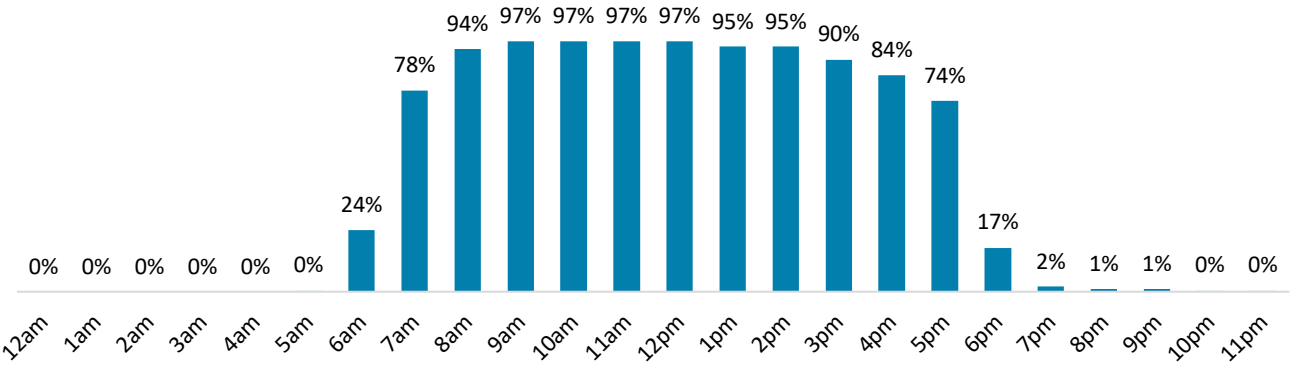
Note. Categories are not mutually exclusive, with the exception of indicators for providers that *only* offer full day, half day, or before/after care and therefore, percentages are not intended to add up to 100%. Information comes from NJ DCF list of licensed center-based providers as of November 2024. This list indicated there were a total of 3,269 centers licensed to serve children ages 0 to 5 in NJ.

Respondents were also asked several questions about their operating schedule. On average, centers were open 47 weeks per year, with 78% open year-round (43 or more weeks/year), 19% were open during the academic year only (35-42 weeks/year), and the remaining centers reported operating for fewer than 35 weeks. Most centers were open 5 days per week (97%), and the average length of an operating session was 10 hours per day with 81% of centers reporting they were open 9 or more hours per day.

Descriptive analyses also considered whether there were differences in center-based provider characteristics across centers that (1) serve *only* children ages 0 to 5 years, (2) serve children ages 0 to 5 years *and* school age children, and (3) serve *only* preschool-age children (Table A.3). For example, while 78% of centers were open year-round, only 53% of centers that serve exclusively preschool-age children were open year-round, and 40% were open during the academic year only. Additionally, a similar trend was observed for hours of operation, with 81% of centers open 9 or more hours per day, but only 59% of centers that serve exclusively preschool-age children reporting being open 9 or more hours. It is possible that these differences may occur because settings which exclusively serve preschool-age children may have a greater emphasis on the delivery of pre-k and education programming and have more limited capacity to offer wrap-around care services. Additionally, providers may face constraints offering wraparound services due to challenges with staffing and operating costs that come with offering extended schedules (Brisport, 2021). Thus, these differences may be primarily driven by supply constraints rather than by parents' care needs (Smith, 2026).

Information on the time of the day centers reported they started serving children and the time they reported they closed each day was used to identify the hours during the day center-based providers were open (Table A.5). As shown in Figure 5, 90% or more of centers were open daily between 8 AM and 3 PM (inclusive). In the early morning, less than a quarter of the centers were open at 6 AM, and 78% were open at 7 AM. In terms of late afternoon/evening times, 84% of centers were open at 4 PM, 74% at 5 PM, and 17% at 6 PM. No centers reported being open prior to 6 AM, and most were closed by 7 PM.

Figure 5. Percentage of center-based providers that are open by hour of the day



Note. Percentages indicate the share of responding providers that reported operating during a given hour.

Provider Information on Classrooms

Respondents at center-based providers answered several questions about the number of classrooms overall and for specific age groups, whether any were contracted for state-funded pre-k, and the size of classroom spaces (Table A.6). On average, centers had a total of 7 classrooms overall (median = 5.5). On average, centers had 5 classrooms for children ages 0 to 3 years, 6 classrooms for children ages 3 to 5 years, and 4 classrooms for school-age children. The total number of classrooms reported by centers in the sample is

9,272 overall, 6,477 with infant/toddler children, 7,276 with preschool-age children, and 1,416 with school-age children (not mutually exclusive categories).

Next, 19% of centers indicated they had classrooms contracted for state pre-k, with an average of 5 contracted classrooms, and 2 non-contracted classrooms. Classrooms contracted for state pre-k on average made up 78% of these centers' total classrooms, for a total of 1,071 state pre-k classrooms.

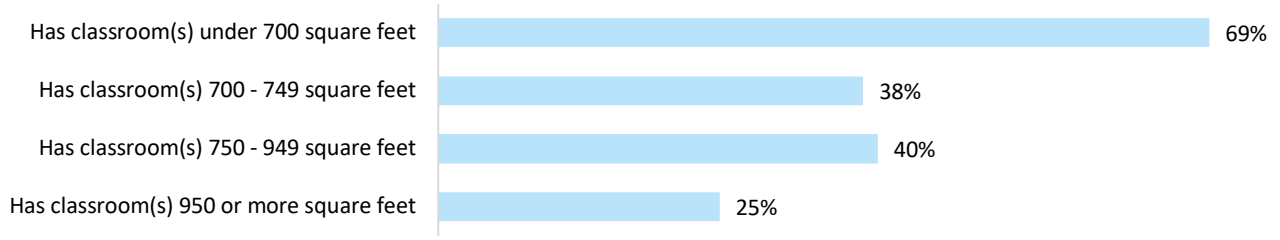
Centers were also asked about the square footage of their classroom spaces (Table A.6). These questions were asked to ascertain the extent to which licensed center-based providers had classroom spaces that would meet minimum square footage requirements for state-funded preschool. However, since the survey was fielded, the state announced a plan to modify the regulations that dictate minimum room sizes for both licensed child care centers and state-funded preschool. Child care regulations fall under the purview of NJ DCF, and state-funded preschool regulations fall under the purview of the NJ Department of Education (NJ DOE). The proposed change aligns regulations between NJ DOE and NJ DCF by *increasing* the minimum square footage requirement for licensed child care centers from 35 to 42 square feet per child, and by *decreasing* the state preschool square footage requirement for instructional space from 50 to 42 square feet per child. The change in NJ DOE's regulations was approved in Fall 2025; however the change in NJ DCF's regulations is still pending. If adopted by both agencies, the new regulations will apply to all child care providers, Head Start grantees, and school districts that received state funding for preschool (Preschool Education Aid) in 2017 or later; as well as to all newly licensed or relocating licensed providers going forward (NJ DOE & NJ DCF, 2025).

As shown in Figure 7, more than 2 out of 3 centers had at least one classroom under 700 square feet (69%). For centers that joined the state preschool program in 2017 or later (assuming the proposed new regulations are adopted), these spaces would not be approved as state preschool classrooms unless providers agreed to serve fewer than the maximum number of state-funded preschool children permitted per room (15). Notably, more than 1 in 3 centers had at least one classroom between 700-749 square feet (38%), just above the new minimum space size requirement for providers joining the state preschool program in 2017 or later. Additionally, 40% of centers had classroom spaces between 750-949 square feet, and 1 in 4 providers had classrooms with 950 or more square feet (25%).

The prevalence of providers with at least one classroom less than 700 square feet did not vary between for-profit and not-for profit centers, but varied slightly by organization type. Specifically, a larger share of franchise centers had at least one classroom less than 700 square feet (76%) relative to independently owned and operated settings (69%) or Chains (69%). The prevalence of centers with at least one classroom under 700 square feet was also greater among those in the Northern region of the state (74%), relative to the Central (69%), South (67%) and Northeast regions (65%).

We also assessed the percentage of all centers' classrooms that were under 700 square feet and/or between 700-749 square feet. A third of centers indicated that all (100%) of their classrooms were under 700 square feet; and nearly half (49%) indicated that all (100%) of their classrooms were under 750 square feet.

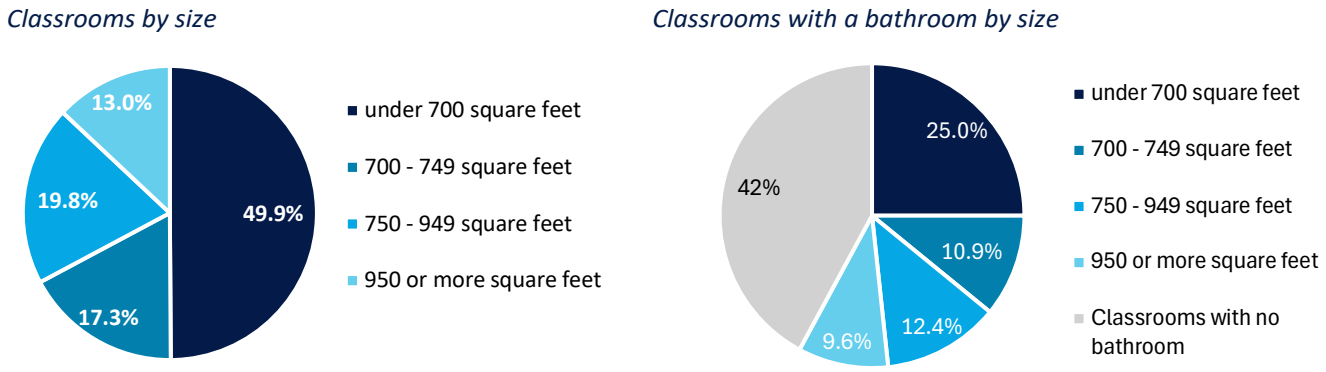
Figure 7. Share (%) of center-based providers with classroom(s) of a given square foot size



Note. Percentages do not add up to 100% because providers could have classrooms of different sizes.

Additionally, information on the number of classrooms by square foot size was aggregated across all providers in the sample to provide a statewide picture of the prevalence of classrooms of various sizes. As shown in Figure 8, half of the classrooms reported were under 700 square feet and 17% were 700-749 square feet. Only 1 in 3 classrooms among the centers in our sample were 750 square feet or larger. Figure 8 also reports the prevalence of classrooms of various sizes with a bathroom. Notably, 42% of the classrooms had no bathroom. Among those classrooms reported with bathrooms, 1 in 4 were less than 700 square feet. This is significant because NJ DOE's regulations for state preschool classrooms require child care providers to obtain a waiver if all classrooms do not have a bathroom.

Figure 8. Share (%) of sample's total classrooms overall, and those with a bathroom of a given square foot size



Note. Estimates reported are based on the estimated 7,235 classrooms reported by providers responding to these questions on the survey (86% of surveys).

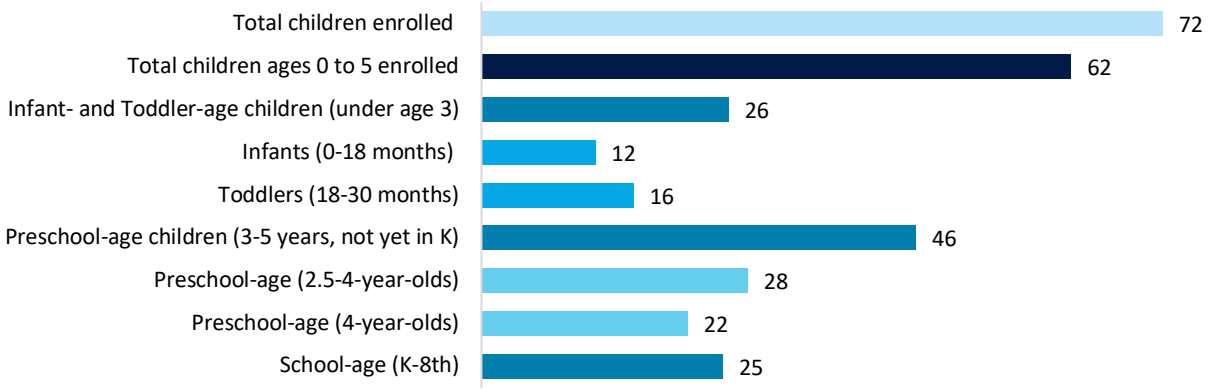
Provider Enrollment and Capacity

Enrollment

Center-based providers also reported on the overall number of children enrolled, across specific age groups, and the prevalence of DLL children and children in special education (Table A.7). As shown in Figure 9, on average, centers enrolled a total of 72 children, with an average enrollment of 62 children ages 0 to 5 years (range = 1 to 428; median = 50). Respondents indicated that on average, children ages 0 to 5 years made up a majority of centers' total enrollment (90%). Centers enrolled more preschool-age children (46 children ages 3 to 5 years, on average) relative to infant- and toddler-age children (26 children ages 0 to 3 years). This was similarly reflected in centers' enrollment rates by age. Among centers that served preschool-age children,

this age group made up on average 64% of centers' total enrollment; while among those that served infants and toddlers, this age group accounted for an average of 40% of centers' total enrollment. Among centers that also served school age children, an average of 25 school age children were enrolled; approximately a quarter of total enrollment in these providers.

Figure 9. Average number of children enrolled at center-based provider, by age group



Note. Estimates reported are among providers that reported enrollment for at least one child from each specific age group.

We also examined whether average total enrollment varied by center auspice, organization type, and NJ region. Average enrollment size was similar between for-profit (71 children) and not-for-profit centers (73 children). However, enrollment size among independently owned and operated centers (63 children) was smaller than that of franchise centers (121 children), chains (92 children) and private schools (72). Average enrollment size also appeared to vary across NJ regions, with the Northern region (78 children) and Central region (71 children) reporting slightly higher enrollment than the Northeast (65 children) and the South (69) regions.

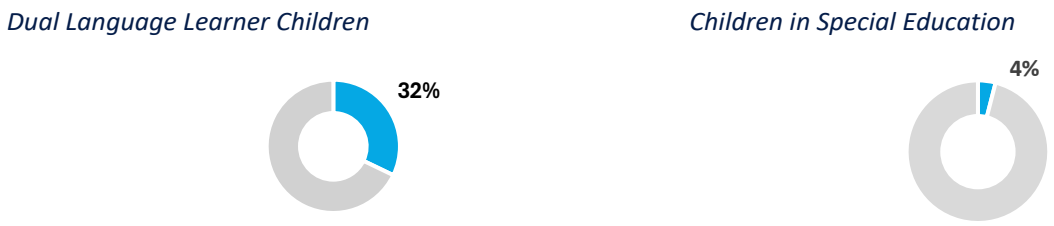
Centers were also asked to indicate the number of DLL children, and children with special education needs. As shown in Figure 10, on average, 32% of centers' total enrollment was made up of DLL children. This is consistent with national population estimates, where 1 in 3 children under age 5 are DLLs (Habben & Kim, 2025a), but lower than NJ estimates, where nearly half of children under age 5 are DLLs (47%; Habben & Kim, 2025b). However, this is consistent with related work that reports Hispanic children are less likely to use center-based care than non-Hispanic children (Barnett et al., 2025). The percent of centers' enrollment comprised of DLL children did not appear to vary between for-profit and not-for-profit centers. However, centers that were independently owned and operated, on average, enrolled a higher percentage of DLLs (35%) relative to Chains (27%), Franchise centers (24%), and Private schools (21%). Additionally, the average percent of centers' enrollment comprised of DLLs was greater in the Northeast (38%) and Central (33%) regions, relative to the North (30%) and Southern (25%) regions.

Additionally, on average, only 4% of centers' total enrollment was comprised of children with special education needs.[5] In NJ, 6% of children under age 3 received early intervention services in 2023-2024 and 8% of 3- and 4-year-olds received special education in 2023-2024, with only about half of those 3- and 4-year-olds receiving services in inclusive settings such as a regular education program in child care center or public

[5] On the survey, centers were asked to report the "*Total number of children who have identified special education needs - i.e., the number of students that have an individualized family service plan (IFSP) or individualized education plan (IEP).*"

school (Friedman-Krauss et al., 2023). Thus, while these estimates of centers' enrollment of children with special education needs are lower than NJ state population estimates, it is explained, in part, by related work suggesting children with disabilities are under-enrolling in center-based care. Notably, the average percent of centers' enrollment comprised of children with special education needs was similar across center auspice, organization type, or NJ region.

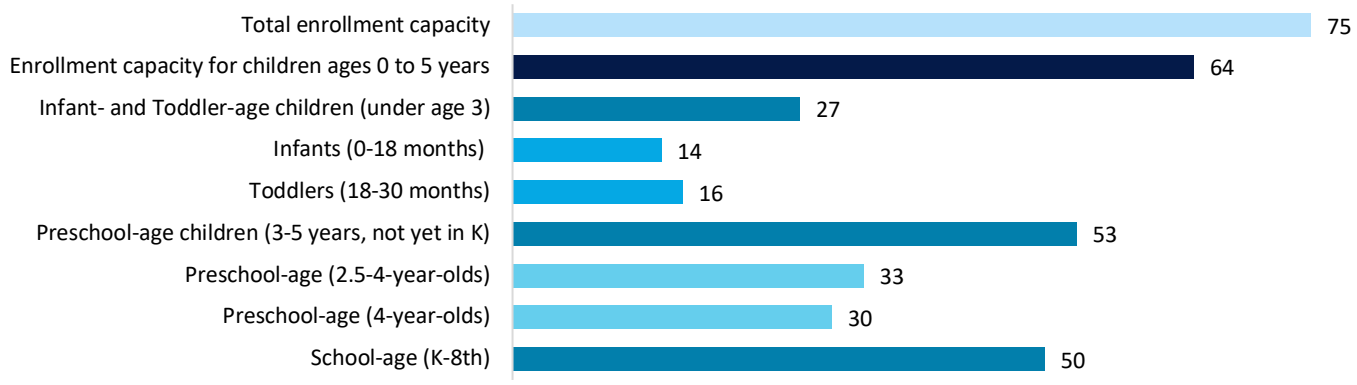
Figure 10. Average percent of centers' enrollment of dual language learners and children in special education



Capacity

The survey also asked centers about their enrollment capacity (i.e., the number of children they have space to serve at any one time) for children of various age groups (Table A.7). As shown in Figure 11, centers reported an overall average total capacity of 75 children (range = 1-640; median = 57) and 64 children for ages 0 to 5 years old (range = 1-428; median = 49). Preschool-age children made up the largest share of centers' enrollment capacity, with 2 out of 3 of providers' total enrollment capacity being reported for that age group (53 children on average). Centers' enrollment capacity was smaller for infant- and toddler-age children, with an average capacity of 27 children (and an average of 40% of providers' total capacity). Among centers that served any school-age children, the average enrollment capacity was 50 children; a quarter of their total capacity. These estimates are consistent with NJ child care licensing standards that limits group sizes for younger children and allows larger group sizes for older children (NJ DCF, 2025).

Figure 11. Average child enrollment capacity at center-based providers, by age group



Note. Estimates reported are among providers that reported capacity for at least one child from each specific age group.

We also considered whether centers' average capacity varied across provider auspice, organization type, and NJ region. Average capacity was similar between for-profit and not-for-profit centers. However, independently owned and operated providers on average reported smaller capacity (90 children), relative to Franchises (152 children), Chains (124 children), and Private schools (96 children). Similar to enrollment,

reported capacity also appeared to vary by NJ region, with the Northern region reporting the largest capacity on average (110 children), followed by the Central (95 children), South (94 children) and Northeast (91 children) regions.

Capacity Constraints

Using the information above, we calculated a ratio of enrollment to reported capacity. On average, centers were enrolled at 73% of their total capacity, with close to half (45%) reporting enrollments under 75% of their total reported capacity. Enrollment relative to capacity varied slightly across several center characteristics. First, centers that served any infants/toddlers had a larger average enrollment to capacity ratio (74.0%) compared to centers that did not serve this age group (70.9%). Second, centers that served *exclusively* preschool-age children had a smaller average enrollment to capacity ratio (70.7%) compared to centers that also served infants/toddlers and/or school-age children (74.0%). Additionally, centers that had classrooms contracted for state pre-K had a higher average enrollment to capacity ratio (76.1%), compared to centers without any contracted classrooms (73.0%). Notably, the average enrollment to capacity ratio was similar across center auspice, organization type, and NJ region.

In other research drawing from this survey of licensed child care centers (see Stephens et al., 2026) we found that nearly half of centers reported at least one teaching vacancy, and those centers had a lower average enrollment to capacity ratio (71%), compared to centers with zero teaching vacancies (75%). Similarly, 1 in 3 centers reported at least one classroom was closed due to teaching staffing shortages, and those centers with closures had a lower average enrollment to capacity ratio (65%) compared to centers without classroom closures (78%). Instances of teaching vacancies or classrooms being closed due to staff shortages were also more prevalent in centers that served infants/toddlers versus centers that exclusively served preschool-age children.

Lastly, the survey asked whether centers had turned away children or families who wanted to enroll because they did not have an available slot. Nearly half (46%) of centers indicated they had placed children on a waiting list, another 14% indicated they turned away children for enrollment, and 40% had not turned away children. Notably, about 1 out of 3 centers (31%; n = 139) with enrollments under 75% of their capacity reported having to turn away children or placing them on a waiting list. Instances of centers denying children enrollment or placing them on a waitlist due to a lack of available space also varied according to the ages they served. A larger share of centers that served infants/toddlers reported having to place children on a waitlist (48%) or deny enrollment (17%) compared to those centers that did not serve this age group (42% waitlisted, 10% denied enrollment). Additionally, a smaller share of centers that served *exclusively* preschool-age children reported having to place children on a waitlist (42%) or deny enrollment (11%); compared to those that also served infants, toddlers and/or school-age children (47% waitlisted; 17% denied enrollment). Notably, fewer centers with classrooms contracted for state pre-k reported denying enrollment (9%) compared to those that did not have state contracted classrooms (15% denied enrollment).

Related research indicates that possible reasons for this include issues around staff turnover, workforce shortages, and challenges filling open enrollment slots (Miller-Baines et al., 2025). Results from other work as part of this research series on centers' teaching and non-teaching staff workforce provide some insight into how staffing issues may contribute to why some centers are under-enrolled (Stephens et al., 2026). As mentioned above, there was some variation in the prevalence of centers reporting teaching vacancies and classroom closures due to staff shortages by providers' enrollment to capacity ratio, and the ages of children served. Centers on average reported a lower enrollment to capacity ratio if they had at least one classroom

closed due to staff shortages, and if they had at least one teaching vacancy–relative to those centers that reported no closures or vacancies.

DISCUSSION

Findings reported here inform several areas for future policy and child care efforts. First, while essentially all responding providers served preschool-age children, only 2 out of 3 served infants and toddlers (i.e., those children under age 3). Though rates of infant/toddler center-based care use in NJ (38%; Barnett et al., 2025) are higher than national estimates (25%; Zero to Three, 2025), issues around capacity of the existing supply for this age group, as well as provider staffing, and affordability for all age groups remain as areas of concern (Advocates for Children of New Jersey, 2024; ChildCare Aware of America, 2023).

Results also provide insights into the operating schedules of center-based providers. Most were open year-round, with only a quarter of centers being open fewer than 43 weeks per year. For children in families where both parents are employed (which in NJ is 68%; First Five Years Fund, 2025), it is a good sign that most centers operated throughout the entire year. However, there is need to also consider centers' operating hours. Most providers reported being open from 8 AM through 3 PM, but fewer providers were open outside of those times, especially before 7 AM and through 6 PM. This suggests a need to invest and strengthen center-based provider capacity to operate throughout the day to better accommodate families with traditional work schedules (i.e., 9am-5pm) especially when a commute is necessary, and also nonstandard and extended hours including early morning and evening times. Notably, 1 in 3 parents in NJ work some nonstandard hours (i.e., outside of 7 AM and 6 PM; Small et al., 2023), emphasizing a significant need for providers that offer these services. The mismatch between work-schedules and operating schedules may be exacerbating affordability issues (with some families enrolling children in additional wraparound care) or pushing families towards options that are not their preferred choice. This concern is also especially prevalent among low-income households who are most likely to work nonstandard schedules and receive child care subsidies – as very few providers that enroll children with subsidies also operate during extended hours (Small et al., 2023).

Additionally, this report provides a summary of center-based provider enrollment and capacity by age group. The majority of centers' total enrollment was made up of children ages 0-5, with preschool-age children making up an average of two-thirds of providers' enrollment. Centers also reported enrolling a share of DLL children that is on par with national estimates of DLL children, but below estimates for NJ (Habben & Kim, 2025a; 2025b). This may be at least in part because Hispanic families are less likely than non-Hispanic families to use center-based child care (Barnett et al., 2025). Nonetheless, this highlights the need for centers and their workforce to be prepared to meet the needs of diverse learners, including DLLs who represent a growing population in NJ. Centers also reported enrolling a much smaller share of children with identified special education needs relative to national and NJ estimates (Friedman-Krauss & Barnett, 2023; Rutgers University New Jersey State Policy Lab, 2024). In NJ, only about half of preschool-age children with a disability are in inclusive school or center-based settings and nearly all infants and toddlers with a disability received services at home (Friedman-Krauss et al., 2025). This raises the need to support centers to be better prepared to serve children with disabilities in inclusive classrooms and for coordinated supports that facilitate enrollment of children with special needs across different types of settings. Additionally, teachers need to be supported to teach both DLLs and children with special needs through improved pre-service preparation, professional development, and technical assistance. Guidance for increasing inclusion in ECE providers has been discussed by Connor-Tadros and Weisenfeld (2024; see reference).

Lastly, center-based providers' responses on the survey revealed several insights about enrollment capacity. On average, centers were enrolled at only 75% of their total reported capacity, and nearly half of centers reported enrollment under 75% of their capacity. This suggests a need to identify reasons why centers are under enrolled, such as staff turnover, challenges hiring staff, or challenges filling open enrollment slots (Miller-Baines et al., 2025). Results suggested that centers were slightly less likely to be under-enrolled if they served any infants and toddlers, multiple age groups (i.e., not exclusively pre-k), classrooms contracted for state pre-k, and had no teaching vacancies and/or classrooms closed due to staff shortages. Given the high rates of under enrollment, it was somewhat surprising that more than half of centers reported turning away children because of lack of slots and/or placed them on a waitlist. The prevalence of centers that reported having to turn children away or placing them on a waitlist was greater among those that served infants and toddlers. Centers without classrooms contracted for state pre-k were also more likely to report turning away children. Efforts are needed to better understand and support centers' ability to ensure enrollment levels are closer to capacity, especially when there is demand for slots. In addition, and for smaller centers in particular, sustained under-enrollment could impact providers' viability given how many providers operate under small profit margins. Therefore, understanding under-enrollment may be critical to sustain long-term supply (Coffey & Khattar, 2022; Miller-Baines et al., 2025).

If adopted, pending regulatory changes will align standards for the minimum classroom square footage per child between NJ DOE's state preschool program and NJ DCF's child care licensing requirements. This change increases square footage requirements for new child care centers, including those moving from one location to another and those simply changing ownership within the same building. A location that meets current child care licensing standards would be reassessed under the new requirement if the center relocates or changes ownership. This could negatively impact the supply of child care if existing spaces are no longer deemed viable. However, the regulatory change also lowers NJ DOE's minimum per child square footage requirements for public preschool from 50 to 42 square feet of instructional space, which has the potential to allow more licensed child care centers, and more classrooms within licensed child care centers, to participate in the state-funded preschool program and maintain enrollment of 3- and 4-year-olds. Still at issue, however, is the extent to which school districts will agree to partner with child care centers to serve state-funded preschoolers. This survey did not ask providers' perceptions about the change in square foot requirements, so an important direction for future research is to investigate possible licensing implications and supply challenges that may occur from this policy.

This report is first of a three-part series that summarizes findings from a state-wide survey of licensed center-based child care providers in NJ that serve children 0 to 5 years old. While this first report focuses on center-based provider characteristics and enrollment, two additional reports summarize findings on centers' workforce of teaching and other non-teaching staff, and centers' revenue sources and operating expenses.

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Appendices

Appendix A. Descriptive Statistics of Licensed Center-Based Child Care

Table A.1. Respondent characteristics

Demographics	Sample		
	%	n	Valid N
TOTAL	**100%**	**1,300**	**1,300**
Gender is female	93.4	807	864
Race/Ethnicity			859
White, non-Hispanic	58.9	506	
Black, non-Hispanic	13.2	113	
Asian, non-Hispanic	7.6	65	
Other race, non-Hispanic	1.9	16	
Multiracial, non-Hispanic	0.7	6	
Hispanic	17.8	153	
Role at center/school[1]			1,300
Director	78.9	1,025	
Assistant Director	6.4	83	
Administrative Assistant	3.6	47	
Other Administrator	7.8	101	
Teacher	8.5	110	
Other role	8.8	114	
Indicated more than 1 role	11.2	146	
Average years of experience in current role at center (mean, sd; range 0-47)	8.9	9.9	849
Avg. years of experience among directors/assistant directors	9.0	10.1	729
Average years of experience in child care (mean, sd; range 0-55)	10.8	18.6	850
Avg. years of experience among directors/assistant directors	10.7	19.3	728
Ages of children enrolled at provider[1]			
Infant- and Toddler-age children (under age 3)	68.1	836	1,228
Infants (0-18 months)	57.2	702	1,228
Toddlers (18-30 months)	66.9	821	1,228
Preschool-Age Children (3-5 years, not yet in K)	95.6	1,176	1,228
Preschool-age (2.5-4-year-olds)	95.6	1,174	1,228
Preschool-age (4-year-olds)	79.7	980	1,228
School-age (K-8th)	37.9	466	1,228
Provider *only* serves children ages 0-5 (i.e., no school-age)	61.6	748	1,213
Provider *only* serves preschool-age children (3-5 years)	31.0	378	1,218

Note. [1]Not mutually exclusive categories.

Table A.2. Regions

Region	Counties	NJ DCF list of licensed providers that serve children ages 0-5 years (N = 3,269)	Survey sample (N = 1,300)
Central	Mercer, Middlesex, Monmouth, Ocean, Somerset	27%	28%
North	Bergen, Hunterdon, Morris, Passaic, Sussex, Union, Warren	32%	32%
Northeast	Essex, Hudson	24%	21%
South	Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Salem	18%	18%

Table A.3. Provider Characteristics

		All providers (N = 1,300)			Provider serves **only** children ages 0-5 years (n = 748)		Provider serves children 0-5 years **and** school age (n = 466)		Provider serves **only** preschool-age children (n = 378)	
		Valid N	*%*	*n*	*%*	*n*	*%*	*n*	*%*	*n*
Auspice	For profit	1,295	55.9	711	51.1	381	60.5	282	30.4	115
	No for profit		38.3	496	42.6	317	32.8	153	57.7	218
	Public school		2.8	36	1.7	14	3.7	17	6.9	26
	Other government agency		1.3	17	1.7	13	-	-	-	-
	Other non-government agency		2.8	36	2.7	20	2.4	11	3.4	13
Organization type	Independently owned & operated	1,294	56.2	728	54.2	404	61.1	284	48.1	183
	Private school (including religious)		21.4	277	21.9	163	21.1	98	33.3	126
	Franchise		7.1	92	5.8	43	6.9	32	0.0	0
	Chain		4.3	56	5.5	41	2.9	13	-	-
	None of the above		11.0	142	12.6	94	8.2	38	17.5	66
Facility type	Owns space/building	1,296	34.6	449	34.1	255	33.8	157	31.6	119
	Rents or leases space/building		54.5	707	54.5	407	56.5	262	49.9	188
	Uses space/building owned by another organization		10.9	141	11.4	85	9.7	45	18.6	70
Operating schedule	# weeks per year open *(mean, sd)*	1,267	47.2	7.8	46.8	8.2	47.8	7.2	43.1	8.7
	Open for academic year (35-42 weeks/year) [1]	1,267	18.5	224	20.1	147	15.9	72	40.4	150
	Open year-round (>43 weeks/year) [1]	1,267	77.9	988	75.6	553	81.3	369	53.1	197
	# days per week open *(mean, sd)*	1,278	5.0	0.3	5.0	0.3	5.1	0.3	5.0	0.3
	Open 5 days per week	1,278	96.8	1,239	97.2	717	96.5	440	96.5	363
	Open 7 days per week	1,278	1.8	23	1.4	10	-	-	-	-
	Session 1 # hours of operation *(mean, sd)*	1,162	9.7	2.5	9.4	2.4	10.1	2.5	8.0	2.9
	Runs a second session	221	17.1	222	9.0	117	7.0	91	6.3	82
	Session 2 # hours of operation *(mean, sd)*	221	6.6	3.6	6.9	3.6	6.3	3.6	5.0	3.1
	Is open 9 or more hours per day	1,167	80.7	943	77.6	527	86.1	360	58.6	204
	Is open during early morning (before 7:00am)	1,167	23.9	279	18.3	124	32.1	134	6.6	23
	Is open during evenings (after 6:00pm)	1,167	17.3	202	14.1	96	21.5	90	8.3	29
	Is open during any non-standard hours	1,167	32.3	377	26.1	177	41.2	172	12.1	42

Notes. Cells with a dash symbol (-) indicate values suppressed due to estimates relying on a very low number of cases (n<10). [1]There was also a small share (<5%) of centers that were open fewer than 35 weeks per year.

Table A.4. Percent of Operating Sessions Offered Among Licensed Center-Based Providers in NJ

		NJ DCF list of all licensed providers that serve children ages 0-5 years – Sessions offered (N = 3,269)		Survey sample (N = 1,155)	
		%	n	%	n
Operating sessions offered	Any full day care[1]	83.4	2,714	91.2	1,125
	Any half day care[1]	58.1	1,891	63.8	787
	Any half day care less than 3 hours[1]	45.6	1,484	50.0	617
	Any half day care more than 3 hours[1]	24.6	802	27.0	333
	Any before any/or after care[1]	56.1	1,827	48.8	602
	Any before care[1]	48.6	1,583	44.3	546
	Any after care[1]	55.2	1,795	47.7	589
	Only full day care	20.0	650	22.7	280
	Only half day care	4.1	132	4.9	61
	Only before and/or after care	9.3	302	1.4	17

Notes. Information on sessions that centers offer comes from NJ DCF list of licensed center-based providers as of November, 2024. [1] Not mutually exclusive.

Table A.5. Percent of Providers Open by Hours of the Day (N = 1,167)

	12	1	2	3	4	5	6	7	8	9	10	11
AM	0%	0%	0%	0%	0%	<1%	24%	78%	94%	97%	97%	97%
PM	97%	95%	95%	90%	84%	74%	17%	2%	1%	1%	<1%	<1%

Table A.6. Provider Classrooms and Enrollment

		All providers		
		Valid N	*Mean / %*	*Sd*
Number of classrooms at center	Average Total # of classrooms [Range 1-49]	1,288	7.2	6.7
	Median		5.5	
	Average # classrooms for children ages 0-3 years [Range 0-49]	1,286	5.0	6.7
	Median		3.0	
	Average # classrooms for children ages 3-5 years [Range 0-49]	1,287	5.7	8.5
	Median		3.0	
	Average # classrooms for school-age children (K-8th) [Range 0-42]	1,280	1.1	3.7
	Median		0.0	
State pre-k[1]	Center had classrooms contracted for state pre-k (n = 248)	1,300	19.1%	
	# classrooms contracted for state pre-k [Range 1-31]	236	4.5	4.0
	# classrooms not contracted for state pre-k [Range 0-20]	205	2.1	3.3
	% of total classrooms at center used for state pre-k	236	77.5%	27.9
Square foot size of providers' classrooms	Center had classrooms under 700 square feet (n = 776)	1,119	69.3%	
	Center had classrooms 700-749 square feet (n = 428)	1,119	38.2%	
	Center had classrooms 750-949 square feet (n = 442)	1,119	39.5%	
	Center had classrooms 950 or more square feet (n = 283)	1,119	25.3%	
Share of sample's total classrooms by size[2]	% of sample's total classrooms under 700 square feet (n = 3,607)	7,233	49.9%	
	% of sample's total classrooms 700-749 square feet (n = 1,256)	7,233	17.3%	
	% total sample's classrooms 750-949 square feet (n = 1,430)	7,233	19.8%	
	% total sample's classrooms 950 or more square feet (n = 940)	7,233	13.0%	
Share of sample's total classrooms with bathroom by size[3,4]	**% of sample's total classrooms that have a bathroom (n = 4,192)**	7,233	58.0%	
	% of total classrooms < 700 square feet w/ bathroom (n = 1,811)	7,233	25.0%	
	% of total classrooms 700-749 square feet w/ bathroom (n = 792)	7,233	10.9%	
	% of total classrooms 750-949 square feet w/ bathroom (n = 895)	7,233	12.4%	
	% of total classrooms 950 or > square feet w/ bathroom (n = 694)	7,233	9.6%	

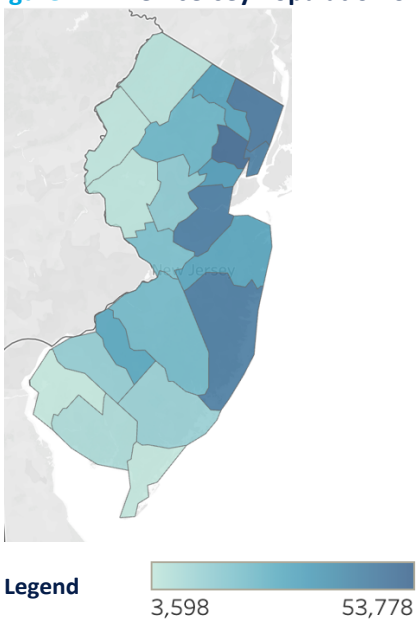
Notes. [1]Estimates reported among providers who indicated they had classrooms contracted for state pre-k. [2]Percentages do not add up to 100% because classrooms could have more than one classroom of different sizes. [3]Estimates reported are based off of the estimated 7,233 total classrooms reported in this section of the survey. [4]Percentages do not add up to 100% because 42% of the sample's total classrooms do not have a bathroom.

Table A.7. Provider Enrollment and Capacity

		All providers		
		Valid N	*Mean / %*	*sd*
Average enrollment of children at center[1]	**# children enrolled at center [Range 1-575]**	1,237	71.6	56.2
	# children ages 0 to 5 enrolled at center [Range 1-428]	1,216	62.1	48.2
	% children ages 0 to 5 enrolled at center	1,179	89.9%	18.7
	# infant- and toddler-age children (under age 3) [Range 1-128]	833	26.0	19.5
	% infant- and toddler-age children (under age 3)	810	40.0%	20.0
	# infants (0-18 months) [Range 1-79]	699	12.2	8.8
	% infants (0-18 months)	683	19.5%	13.4
	# toddlers (18-30 months) [Range 1-80]	818	16.0	12.4
	% toddlers (18-30 months)	795	24.0%	12.8
	# preschool-age children (3-5 years, not yet in K) [Range 1-386]	1,181	45.7	39.4
	% preschool-age children (3-5 years, not yet in K)	1,146	64.3%	25.1
	# preschool-age (2.5-4-year-olds) [Range 1-241]	1,170	28.0	24.8
	% preschool-age (2.5-4-year-olds)	1,136	40.8%	20.6
	# preschool-age (4-year-olds) [Range 1-354]	976	21.7	23.8
	% preschool-age (4-year-olds)	950	28.8%	16.6
	# school-age children (K-8th) [Range 1-475]	465	21.5	40.0
	% school-age (K-8th)	453	25.4	21.4
Additional enrollment information	Avg. # English Language Learner children enrolled	1,188	21.6	36.2
	Avg. % ELL children enrolled at center	1,159	31.9%	37.0
	Avg. # children with special education needs enrolled	1,163	3.1	9.1
	Avg. % children in special education enrolled at center	1,133	4.5%	0.8
Average provider capacity[1]	**Total Capacity**	1,127	98.8	75.3
	# children ages 0 to 5	1,127	86.8	63.9
	% children ages 0 to 5	1,127	90.5%	5.7
	# infant- and toddler-age children (under age 3)	792	36.7	26.8
	% infant- and toddler-age children (under age 3)	792	40.5%	19.8
	# infants (0-18 months)	668	18.2	13.9
	% infants (0-18 months)	668	20.3%	13.8
	# toddlers (18-30 months)	770	22.0	15.8
	% toddlers (18-30 months)	770	24.0%	13.3
	# preschool-age children (3-5 years, not yet in K)	1,086	63.3	52.5
	% preschool-age children (3-5 years, not yet in K)	1,086	64.4%	23.6
	# preschool-age (2.5-4-year-olds)	1,072	38.2	32.6
	% preschool-age (2.5-4-year-olds)	1,072	40.0%	20.0
	# preschool-age (4-year-olds)	905	30.7	30.1
	% preschool-age (4-year-olds)	905	29.9%	15.2
	# school-age (K-8th)	433	31.4	50.4
	% school-age (K-8th)	433	24.8%	17.1
Enrollment relative to capacity[1]	Average overall % of enrollment relative to capacity	1,094	73.4%	24.1
	Enrolled <75% of capacity (n = 497)	1,094	45.4%	
	Avg. % of enrollment/capacity for center that serve only 0 to 5	661	73.3%	24.3
	Enrolled <75% of capacity (n = 300)	661	45.4%	
	Avg. enrollment/capacity for center that serve school-age	400	72.6%	23.9
	Enrolled <75% of capacity (n = 190)	400	47.5%	
Capacity constraints	**Center turned away children b/c no available slot (N =855)**			
	Yes (n = 394)	855	14.2%	
	No (n = 340)		39.8%	
	Waiting list (n = 121)		46.1%	

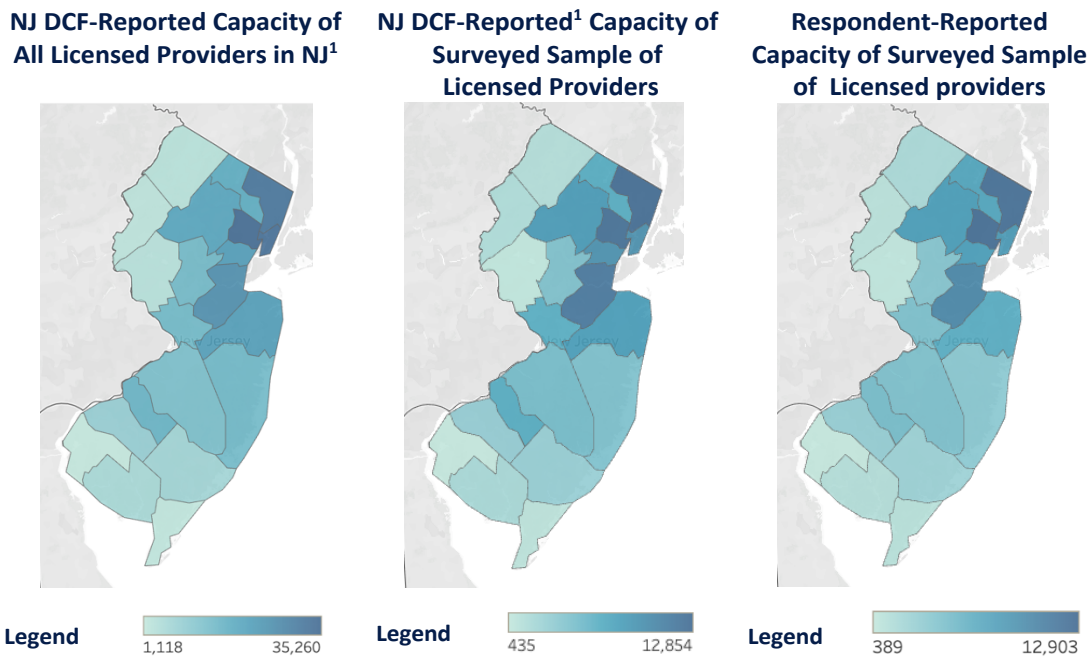
Note. [1]Estimates reported are among providers that reported enrollment and/or had capacity for at least one child from a given group.

Figure A.1. New Jersey Population of Children Ages 0 to 5 Years old, by County



Notes. Estimates come from 2019-2023 pooled Census estimates (U.S. Census Bureau, 2025).

Figure A.2. New Jersey Capacity of All Licensed Center-Based Providers vs. Capacity of Survey Responses, by County



Notes. Estimates focus on providers that serve children ages 0 to 5 years old. [1]NJ DCF estimates come from list of all licensed center-based providers as of November, 2024.