

MICHIGAN'S INFANTS *and* TODDLERS

FUTURE PROMISE, OR MISSED OPPORTUNITIES?



In 2050, today's infants and toddlers will lead us.

That's simple math. What's smart now is supporting the families who are nurturing this generation, so they have the best possible start. In large part, this means helping families lay the groundwork for these children to achieve in school.

One of the strongest predictors of later school success is children's reading ability by the end of third grade. As of 2013, according to a national benchmark assessment, just 31 percent of Michigan's fourth-graders were reading at or above a proficient level. Among those students with a disability, only seven percent were proficient in reading.¹

Literacy begins long before elementary school—in infancy. It starts with addressing any health problems that may interfere with learning, and with nurturing relationships between infants and their caregivers. It includes strong preventive care, and addressing some important challenges in the early years—a time that only comes around once.

HEALTH IS BASIC

Starting with infants, our understanding of what makes for good health, as well as the threats to health, has changed dramatically with recent scientific findings regarding the complex contributions of genetics, the physical environment, and social experience.

340,000

INFANTS AND TODDLERS IN MICHIGAN

28% Live in families with incomes below the poverty level

49% Live in low-income families

58% Live with two parents

39% Live with one parent

66% White, non-Hispanic

17% Black, non-Hispanic

9% Hispanic

9% "Other" race

Infants and toddlers are ages birth through 2 years, 2013

Source: U.S. Census Bureau, American Community Survey, and Intercensal Population



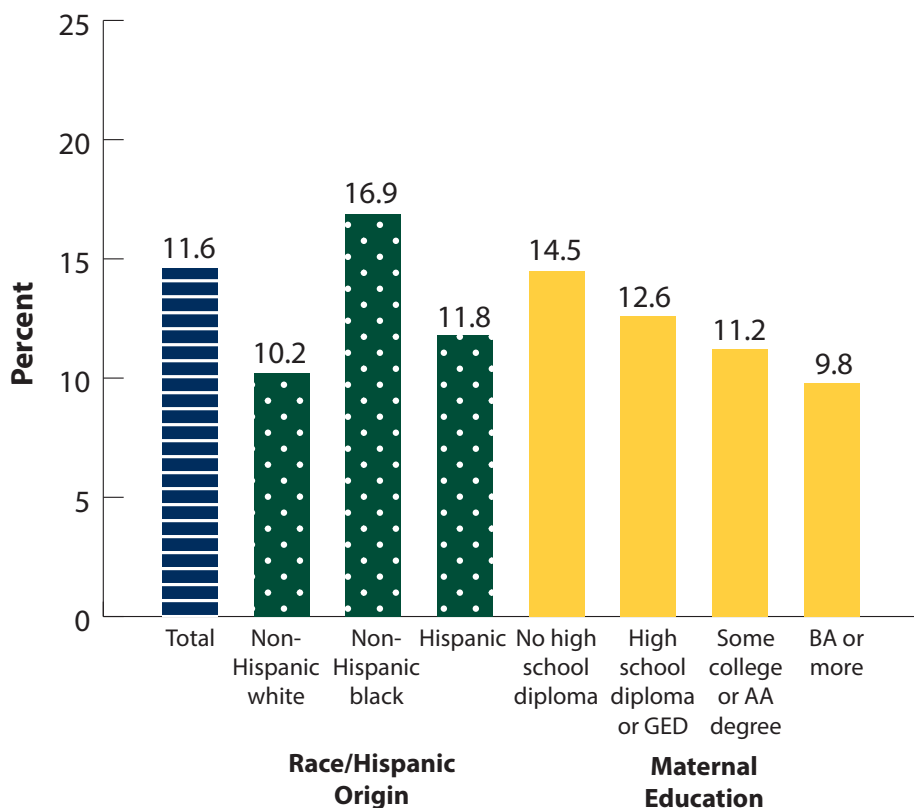
As of 2013...just 31 percent of Michigan's fourth-graders were reading at or above a proficient level.

While there are many measures of the well-being of young children, two—preterm births and child maltreatment—illustrate critical opportunities to improve the health of Michigan's infants and toddlers so they can thrive in these and other areas.

Preterm births

Health begins in pregnancy, where prematurity—one of the leading causes of infant death and disability—may be prevented. Babies born before the 34th week of pregnancy are most at risk, but even late preterm infants (at 34 to 36 weeks of pregnancy) face greater health threats than full-term babies.²

Proportion of Michigan births that were preterm (<37 weeks), by race/Hispanic origin and maternal education: 2013



Source: Centers for Disease Prevention and Control. CDC WONDER online database. Accessible at <http://wonder.cdc.gov/natality.html>

Currently, about one in eight Michigan babies is born preterm, comparable to the U.S. average. However, closer to one in six black infants in the state is preterm. Preterm births are also elevated among women with less than a high school education.³

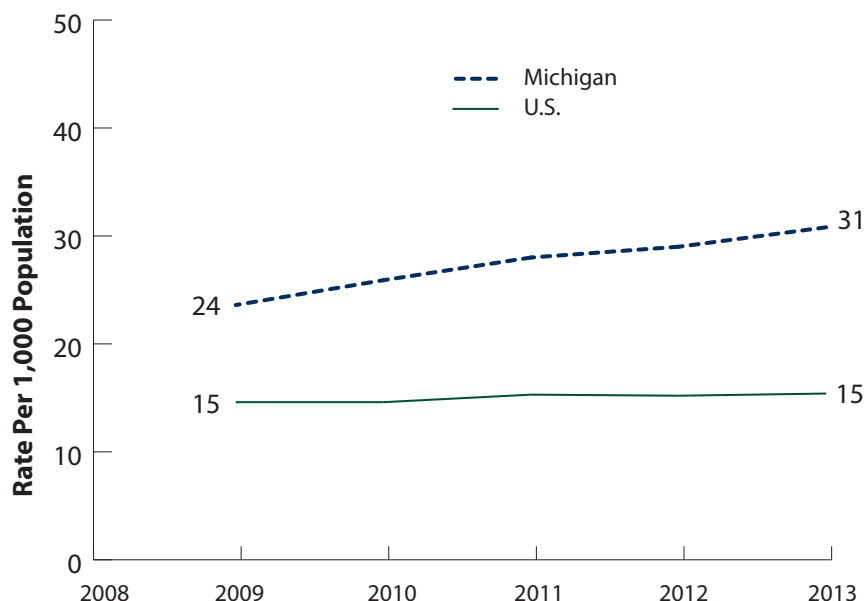
Child maltreatment

Abuse and neglect can have wide-reaching effects on children. For one, children who have been subjected to trauma, such as abuse or neglect, are more likely to have difficulty learning basic academic skills such as reading.

Infants and toddlers are the age group most likely to suffer abuse and neglect. In Michigan, each year more than 10,000 infants and toddlers are substantiated victims. Michigan's rate of maltreatment among this group is twice the national average, and has been rising for each of the past five years.⁴ What's more, official abuse-and-neglect statistics are widely considered to underestimate the true magnitude of occurrence.⁵

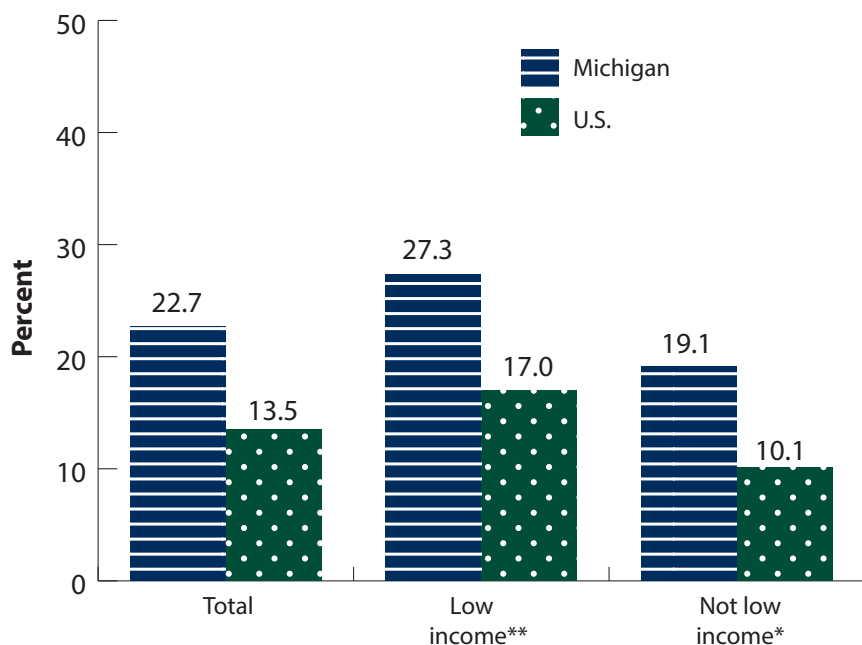
The most prevalent form of maltreatment, by far, is neglect—"the absence of sufficient attention, responsiveness, and protection that are appropriate to the ages and needs of a child." Science tells us that maltreatment directly affects the developing brain, and can have consequences that last a lifetime.⁶

Child maltreatment (victims of substantiated abuse or neglect), ages birth through two, Michigan and U.S.: 2009-2013



Sources: Department of Health and Human Services, Administration on Children, Youth and Families. Child maltreatment (various years). Washington, DC: US Government Printing Office. Available at: www.acf.hhs.gov/programs/cb/stats_research/index.htm#can.

Proportion of infants and toddlers who have received a home visit,* Michigan and U.S.: 2011-12



*As reported by parent; includes visits from any type of program.

**Low income is defined as a family income of less than twice the federal poverty level. In 2014, for a family of two adults and one child, the poverty level was \$19,055.

Source: Child Trends' analysis of the National Survey of Children's Health.

POLICY OPPORTUNITIES: ADDRESSING HEALTH EARLY THROUGH PREVENTIVE CARE

We know the steps to take to ensure better health and safety for all Michigan children. The first few years of life are critical for starting kids out right, on a path of well-being that will make the most of their potential, academically and otherwise. When we miss that opportunity, we let what might otherwise be little problems become big ones. We run up much higher costs (for parents and taxpayers), and—most importantly—we needlessly detract from the quality of life they could enjoy.

Home visiting

Home visiting programs are part of many communities' efforts to improve outcomes for the most disadvantaged families.⁷ Effective home visiting programs have been shown to improve the health of young children, increase positive parenting practices, and reduce child maltreatment. Many home visiting programs include coaching parents on how to promote early literacy.

In Michigan, more than one in five mothers of an infant or toddler (and, in low-income families, more than one in four) received a home visit sometime between pregnancy and the child's third birthday. This is a considerably better record than the national average, where the corresponding data are one in seven, and one in six, respectively.⁸

Immunizations

When young children are sick, their learning is compromised. Studies show that chronic absence as early as kindergarten is associated with poorer school outcomes.

Immunization of infants and toddlers is a highly cost-effective preventive strategy to protect against many illnesses.⁹ Michigan's immunization record has room for improvement. Whether referring to individual vaccines or to the recommended series, data show Michigan infants and toddlers trail national norms (which themselves fall short of recommended levels) by one or more percentage points.¹⁰

POLICY OPPORTUNITIES: SUPPORTING NURTURING FAMILIES

Many experts point out that, to be most effective, supporting the development of young children must include supporting the well-being of their parents—children's first teachers.¹¹

In many cases, Michigan's parents of infants and toddlers are themselves in a vulnerable stage of life, juggling job and/or educational commitments, and establishing financial self-sufficiency in a challenging economic climate. However, there are evidence-based strategies that parents—once they learn they're important—can readily adopt, including some that are low- or no-cost.

Building the foundation for literacy

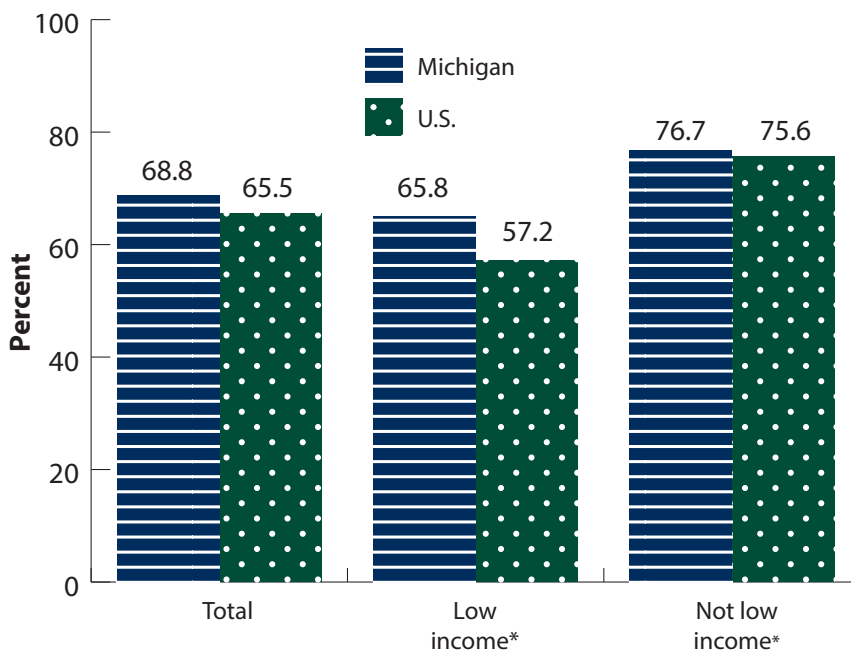
Children develop literacy skills and an awareness of language long before they are able to read. Since language development is fundamental to many areas of learning, skills developed early in life help set the stage for later school success. One of the most important things parents can do to help their young children acquire the skills they will need to be ready for school is reading aloud to them.¹²

Young children who are regularly read to have a larger vocabulary; higher levels of phonological, letter name, and sound awareness; and better success at decoding words. The number of words in a child's vocabulary can be an important indicator of later academic success. Children's vocabulary use at age three is a strong predictor of language skill and reading comprehension at ages nine and ten.¹³

According to the 2011/12 National Survey of Children's Health, just under half of Michigan infants and toddlers (49 percent) were read to by a family member every day during the past week. Children in families with higher levels of income are more likely to be read to regularly: about 45 percent of young children living in low-income families are read to every day, compared with 60 percent of those in families with the higher incomes (two or more times greater than the poverty level).¹⁴

Another shared activity that promotes early literacy skills and provides opportunities for closeness between young children and other family members is singing songs or telling stories together. About two-thirds of Michigan infants and toddlers (69 percent) experience these activities every day, according to their parents. Again, those in low-income families are less likely than their peers in wealthier families to be sung to or told stories every day.¹⁵

Proportion of infants and toddlers who were sung to or told stories every day in the past week, Michigan and U.S.: 2011-12



*Low income is defined as a family income of less than twice the federal poverty level. In 2014, for a family of two adults and one child, the poverty level was \$19,055.

Source: Child Trends' analysis of the National Survey of Children's Health.

Child care

The evidence is in: infants and toddlers need high-quality learning settings, if they are to benefit fully from school.¹⁶ In addition, research shows that parents are more productive at work when they have child care that is safe, affordable, and developmentally appropriate.¹⁷ Yet finding and paying for care that meets these standards can be difficult.

The average cost of center-based infant care in Michigan is nearly \$9,900 per year—or 48 percent of state median income for single mothers, and 12 percent of the median for two-parent families.¹⁸ The child care subsidy program exists to help parents with child care expenses. However, to be eligible for a subsidy, a Michigan family of three can have income no greater than 121 percent of the federal poverty threshold (\$23,880, in 2014).¹⁹

When it comes to supporting the youngest Michiganders (and their parents)—the generation that must power Michigan at mid-century—policymakers have available a number of options. Whether it's improving preventive health care (starting prenatally), promoting the skills parents need to be their children's first teachers, or expanding access to high-quality care that benefits families in multiple ways, the path forward is clear.

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