The facts about infants and toddlers in the United States tell us an important story of what it’s like to be a very young child in this country and how we can change the future life course for the many children who aren’t getting off to the best start. Our nation’s prosperity is jeopardized when the future of young children is compromised. Families in the United States benefit from important federal programs that help them secure resources needed to nurture their children’s healthy development. Combinations of important federal programs—such as nutrition assistance, housing, and early care and education—help buffer young children against the effects of multiple hardships and improve the plight of at-risk children in our country. Yet, federal funding for children’s programs declined overall from 2010 to 2011 and is expected to continue on a downward trajectory over the next 10 years.

The science of early childhood development tells us that during the first 3 years of life, the brain undergoes dramatic development as the child acquires the ability to think, speak, learn, and reason. A baby’s early experiences shape the brain’s architecture into a foundation for learning, health, and eventual success in the workplace. Adverse early experiences—such as poverty or maltreatment—can weaken babies’ brain development and follow them their entire lives, placing them at greater risk for later school failure and health problems as adults.

Babies at Risk: Infants and Toddlers by Family Income Level

Nationally, almost half (48%) of children under age 3 live in low-income families (with an income less than 200% of the Federal Poverty Level (FPL)), including 25% that live in families in poverty (with an income less than 100% of the FPL).

Source: National Center for Children in Poverty (www.nccp.org)
Our babies reflect the growing diversity of our nation. In 2011, for the first time, more than half (50.4%) of our nation’s population under age 1 were minorities, up from 49.5% the previous year. Black and Hispanic infants and toddlers are much more likely than White infants and toddlers to live in poverty, placing them at greater developmental risk.

### Infants and Toddlers by Race and Ethnicity

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>63.0%</td>
</tr>
<tr>
<td>Black</td>
<td>14.4%</td>
</tr>
<tr>
<td>Asian, Pacific Islander</td>
<td>4.7%</td>
</tr>
<tr>
<td>American Indian, Alaska Native</td>
<td>1.2%</td>
</tr>
<tr>
<td>Hispanic (persons of Hispanic origin can be of any race)</td>
<td>25.5%</td>
</tr>
</tbody>
</table>

Within the United States, Mississippi has the highest percentage of infants and toddlers living with families in poverty, at 35%. New Hampshire has the lowest percentage of infants and toddlers living with families in poverty, at 13%.

### Young Children in the United States Lag Behind Those in Other Developed Nations

The condition of children in the United States is reflected in our standing among other nations. Our country ranks last for relative child poverty among 20 economically advanced countries with annual per capita income of more than $31,000. 38 countries performed better than the United States on their under age 5 mortality rate, a critical indicator of the well-being of children.

Among 34 countries, the United States ranks 31st for infant mortality rate (infant deaths/1,000 live births).

In addition to the health and development issues these conditions create for children in our country, our ability to compete in a global economy is undermined when our children fare so poorly.
Good health is the foundation from which young children grow and develop physically, cognitively, emotionally, and socially. Quality medical care and adequate nutrition are key building blocks for this healthy development. The Healthy People 2020 initiative sets national 10-year goals to improve health indicators and measure progress. While we have made progress on many indicators over the last few decades, in some instances this progress has stalled. We must continue to make headway on reaching this goal, through efforts to ensure access to core health services.

We know that good health starts before birth. For example, low birthweight increases the risk of infant mortality as well as long-term disability and developmental problems. Factors contributing to a baby having low birthweight can include lack of early prenatal care and potentially a lack of access to health insurance. In the majority of states in the United States, between 8% and 9% of babies are born with low birthweight. The highest percentage of low-birthweight babies (10-11%) occurs in three states in the south: Alabama, Louisiana, and Mississippi. Health disparities are apparent in the variation of rates of low birthweight and preterm birth by racial and ethnic background. Black infants are more likely to have these characteristics than infants of other backgrounds.

Federal Programs Support Health and Nutrition

Medicaid and Children’s Health Insurance Program (CHIP)
Medicaid covers over one-third of all births in the United States each year. Giving children access to health care coverage is one of the nation’s great policy successes. Due in large part to Medicaid and CHIP, the national rate of uninsured low-income children of all ages fell from 28% in 1998 to 10.4% in 2010. Insured children are three times more likely to have seen a doctor compared to uninsured children, and the need for health care during a child’s earliest years is more crucial than at most other times in life, as preventive care and screening can catch problems early.

Supplemental Nutrition Assistance Program (SNAP)
Young children whose families receive SNAP are less likely to be underweight or at risk for developmental delays.

16% of SNAP recipients are under age 5.

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
Nationwide, mothers who participate in WIC are 44% less likely to have low-birthweight babies and also experience fewer preterm births.

More than 10 million mothers, infants, and children receive WIC, of which 60.9% are White, 19.3% are Black/African American, and 42% are Hispanic/Latino.

24% of WIC recipients are infants.
STRENGTH FAMILIES

Young children develop in the context of their families, where supportive relationships nurture their growth. During these early years, factors like family stress, multiple moves, fluctuating family structure, and difficult economic situations can impair the development of infants and toddlers.

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>30%</td>
<td>of infants and toddlers in low-income families moved in the previous year, while only 17% of infants and toddlers in families above low income moved in the previous year.</td>
</tr>
<tr>
<td>44%</td>
<td>of children living with a grandparent who is primarily responsible for their care are under age 6.</td>
</tr>
<tr>
<td>27%</td>
<td>of maltreated children are under age 3.</td>
</tr>
</tbody>
</table>

**Federal Programs Support Strong Families**

Programs like Temporary Assistance for Needy Families (TANF), Low Income Home Energy Assistance Program (LIHEAP), and Child Welfare play an important role in helping families support the healthy growth and development of their children.

**Temporary Assistance for Needy Families**

TANF is a key federal program that helps states provide resources such as income support, transportation, and child care to families while they undergo job training or look for work. It can be a resource for economically struggling families with young children: in almost every state in the nation, more than 30% of families receiving TANF benefits have children under the age of 3. Yet, only 27 of every 100 families with children in poverty receive TANF benefits.

**Low Income Home Energy Assistance Program**

About 22% of households receiving heating assistance through LIHEAP include at least one child 5 years old or younger. Young children in low-income households receiving LIHEAP are less likely than their counterparts to be undernourished, require emergency hospitalization, or incur developmental problems.

**Child Welfare**

Young children are the most vulnerable to abuse and neglect, especially as the stressors of poverty, substance abuse, and parents’ own traumatic histories mount. As the economic safety net is strained, too few families receive support to prevent the circumstances leading to maltreatment, the most frequent being neglect.

31% of children entering foster care are under age 3. Infants who are under 3 months old upon entering foster care remain in care 50% longer than older children and are much more likely to be adopted than reunified with their family. Once in care, infants are particularly vulnerable to delays in emotional, social, and cognitive development. In all but 1 of the 50 states, at least 20% of the children entering foster care are under age 3. In Illinois, Florida, Rhode Island, Texas, Nevada, Alabama, Arizona, and Oklahoma, over 30% of children entering foster care are under the age of 3.

These children need state child welfare systems—which receive considerable federal support—to make good decisions on their behalf, including; supporting families in caring for their young children, placing children in a nurturing foster home when necessary, ensuring frequent visits with parents, and working toward permanency using a process that focuses on developmental needs.
POSITIVE EARLY LEARNING EXPERIENCES

Learning in very young children takes place through play, the active exploration of their environment, and, most importantly, through positive interactions with the significant adults in their lives.

In every state in the U.S., at least half of all mothers with infants are in the labor force.

South Dakota has the highest percentage of mothers who have an infant and are in the labor force, at 78%. In five other states, over 70% of mothers with infants are in the workforce: North Dakota, Rhode Island, Nebraska, Wisconsin, and Minnesota. Arkansas has the lowest percentage at 51%, still accounting for over half of all mothers with infants.

Second only to the immediate family, child care is the setting in which early childhood development unfolds for many of these young children. Research indicates that the strongest effects of quality care are found with at-risk children—children from families with few resources and under great stress. Nationally, the cost of an infant’s child care for single mothers varies anywhere from 25% to 69% of the mother’s median income, and the cost for married couples ranges from 7% to 16%. In some states, there is a vast difference in the cost of child care as a percentage of a single mother’s median income in comparison to that of a married couple’s median income.

Parents and early childhood professionals both play a critical role in the development of a child’s early literacy skills—the skills a child develops through experiences with conversation, stories (oral and written), books, and print. The interactive nature of the relationship between a child and his caregivers is essential to the developing brain. These relationships are critical as the brain forms the complex web of visual, language, motor, and social-emotional connections essential for later literacy learning.

63% of mothers with infants are in the labor force.

31% of children age 0–5 have parents who had to make emergency child care arrangements or change jobs for child care reasons.

48% of parents read to their 0–5 year-old each day.

More than half of White (57.4%), multiracial (54%), and children of other races (50.8%) have parents who read to them every day. This is compared to the much lower percentages for Black children (38.6%) and Hispanic children (28.2%).

59% of parents tell stories and sing to their 0–5 year-old each day.

Federal Programs Support Positive Early Learning Experiences

The high proportion of working mothers with young children increases the need for key federal programs that provide families with resources necessary to lay the foundation for children’s success.

Early Head Start (EHS)

Less than 4% of eligible infants and toddlers participate in EHS, leaving the majority of eligible infants and toddlers without access to this proven program. EHS plays an important role in children’s success in school, family self-sufficiency, and parental support of their child’s development.

Child Care and Development Block Grant (CCDBG)

30% of children receiving child care subsidies funded by CCDBG are infants and toddlers. CCDBG, however, is able to serve only one in six eligible children.

Early Intervention Part C

2.82% of infants and toddlers receive early intervention services under Part C of the Individuals with Disabilities Education Act. For infants and toddlers with a disability or developmental delay, intervening early can make all the difference in the world and can serve as a protective buffer against multiple adverse influences that may hinder their development.
Across the country, too many babies are growing up in families under great economic stress without the resources to provide ingredients necessary for healthy development. Each of these supports—whether it’s adequate health care, ample food, housing security, or positive early learning opportunities—plays a crucial role in nurturing a young child’s development and helping all children realize their potential. When essential programs that buffer young children against multiple hardships fail to reach all of those in need, not only are their individual opportunities to reach their full potential jeopardized, so is our nation’s ability to build the strong, competitive workforce it will need in the future.