

STATE BABY FACTS: WEST VIRGINIA

A Look at Infants, Toddlers, and Their Families



The facts about the **61,983 infants and toddlers in West Virginia** tell us an important story of what it is like to be a very young child in this state and the important resources that can change the future life course for the many children who are not getting off to the best start.

The science of early childhood development tells us that, during the first three 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 strong—or fragile—foundation for learning, health, and success in the workplace.

Adverse early experiences, such as poverty, can weaken babies' brain development and follow them their entire lives. A state's ability to build a strong, competitive economy in an increasingly global marketplace is jeopardized when the future of so many young children is compromised.

All babies need good health, strong families, and positive early learning experiences to foster healthy brain development and realize their full potential

THE BASICS ABOUT INFANTS AND TODDLERS IN WEST VIRGINIA

WEST VIRGINIA RANKS 39th
AMONG ALL STATES
FOR CHILD WELL-BEING

39TH

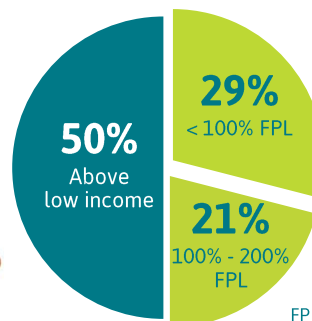
Although West Virginia's infants and toddlers represent 16% of its child population under age 18, they disproportionately live in low-income families, leaving them particularly vulnerable.

- 14% live in families with parents who are unemployed. (U.S. is 13%).
- 36% live with a single parent. (U.S. is 35%).
- 58% have at least one risk factor known to increase the chance of poor health and developmental outcomes. (U.S. is 62%).

BABIES AT RISK: WEST VIRGINIA INFANTS AND TODDLERS BY FAMILY INCOME LEVEL

Half (50%) of children under age 3 in West Virginia live in low-income families (with an income less than 200% of the Federal Poverty Level (FPL)), and 29% live in families in poverty (with an income less than 100% of the FPL). (In the U.S., 48% live in low-income families, including 25% that live in families in poverty).

SOURCE:
NATIONAL CENTER FOR
CHILDREN IN POVERTY
(www.nccp.org)



FPL = Federal Poverty Level

Families in West Virginia benefit from important federal programs that help them secure the resources needed to nurture their children's healthy development. Combinations of 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.

WEST VIRGINIA'S GOOD HEALTH AND NUTRITION

Good health is the foundation from which young children grow and develop physically, cognitively, emotionally, and socially. We know that good health begins before birth. Lack of nutritious food during pregnancy increases the risk of infant mortality and poor long-term health outcomes. Preterm babies may endure lifelong consequences like blindness, chronic lung disease, and other conditions. In young children, untreated health conditions or the absence of preventive care can interfere with normal development.

Compared to the U.S. average of 8.3%, approximately **3.8% of West Virginia's young children under age 6 do not have health insurance**. Insured children are three times more likely to have seen a doctor compared to uninsured children. The need for high-quality medical care and adequate nutrition before birth and during a child's earliest years is more crucial than at most other times in life. Preventive care and screening can catch problems early and are key building blocks for healthy early development.

■ Federal Programs Support Health and Nutrition in West Virginia

Federal programs can help ensure that West Virginia's babies get a healthy start in life, as health and nutrition programs play a key role in protecting the health of the most vulnerable infants and toddlers. These programs include Medicaid, the Supplemental Nutrition Assistance Program (SNAP), and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

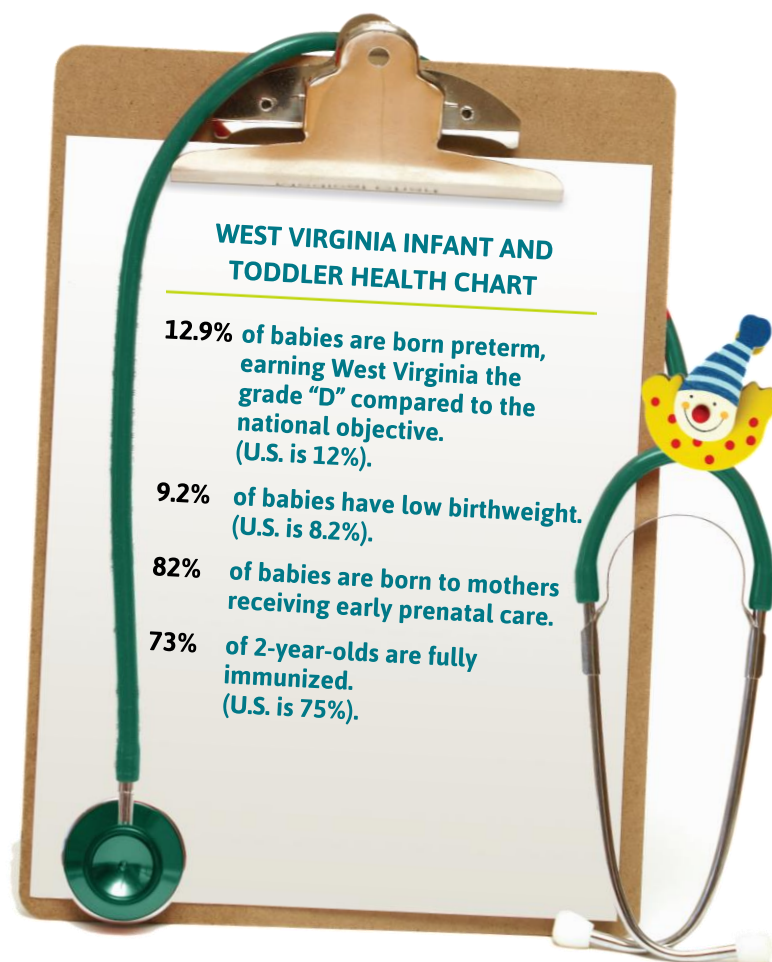
Medicaid and Children's Health Insurance Program in West Virginia

Medicaid is critical to ensuring that young children have access to high-quality, affordable, and consistent health care. Research shows Medicaid's impact on the health outcomes of very young children is especially pronounced.

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT)—a benefit for children enrolled in Medicaid—is key to ensuring children receive preventive, dental, mental health, and developmental services.

58% of births in West Virginia are covered by Medicaid.

96% of infants and 68% of 1–2-year-olds on Medicaid in West Virginia receive at least one EPSDT screening.



Supplemental Nutrition Assistance Program in West Virginia

Children who receive SNAP benefits experience lower levels of food insecurity. Food insecurity has been shown to increase risk for developmental delays in children.

13% of SNAP recipients in West Virginia are under age 5.

Special Supplemental Nutrition Program for Women, Infants, and Children in West Virginia

Nationwide, mothers who participate in WIC are 44% less likely to have low-birthweight babies and also experience fewer preterm births.

55,461 mothers, infants, and children in West Virginia receive WIC.

23% of WIC recipients in West Virginia are infants.

WEST VIRGINIA'S STRONG FAMILIES

Young children develop in the context of their families, where supportive relationships nurture their growth. Especially during an economic downturn, it can be challenging for parents to provide their children the necessities of life. During these early years, factors like family stress, multiple moves, fluctuating family structure, difficult economic situations, negative environmental effects, and abuse and neglect can impair the development of infants and toddlers.

Chronic, unrelenting stress, particularly stress that results from abuse and neglect or deep poverty, can be toxic to the developing brain. Toxic stress can alter brain architecture and leave lasting negative effects in childhood and later in life. Other factors that can cause toxic stress and impact a family's physical and mental health include insecure and inadequate housing and heating. Family residential stability, on the other hand, is highly associated with educational success.



■ Federal Programs Support Strong Families in West Virginia

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

TANF in West Virginia

36% of families on TANF in West Virginia have at least one child under age 3. TANF helps states provide resources such as income support, transportation, and child care to families while the adults train or look for work.

LIHEAP in West Virginia

21% of households in West Virginia receiving heating assistance through LIHEAP have a child under age 6. Young children in households receiving LIHEAP are less likely than their counterparts to be undernourished or incur developmental problems.

Home Visiting in West Virginia

13.5% of West Virginia families participate in a home visitation program. Home visiting is effective in improving child development, reducing abuse and neglect, and enhancing parents' ability to meet their child's needs.

Child Welfare in West Virginia

23% of children entering foster care in West Virginia 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.

Federal funding through Title IV-B and IV-E of the Social Security Act, along with other programs, provides 60% of West Virginia's child welfare funds. Young 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, placement into a nurturing foster home when necessary, frequent visitation with parents, and movement toward permanency while focusing on developmental needs.

WEST VIRGINIA'S 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. Positive early learning experiences can ensure each child is able to seize his or her potential for future success. By the time a child reaches 16–18 months, word learning is significantly affected by economic background. Gaps between children of different income levels in the amount of talk, vocabulary growth, and style of interaction appear early and widen long before a child's scholastic career begins. Relationships with parents, early childhood professionals, and caregivers are critical as the brain forms the complex web of visual, language, motor, and social-emotional connections essential for later learning.

■ Federal Programs Support Positive Early Learning Experiences in West Virginia

For infants and toddlers, learning unfolds in many settings, including the home, child care centers, and Early Head Start. High-quality care that promotes positive early learning can have lasting effects into adulthood, particularly for children who are at risk for starting school behind their peers. The high proportion of working mothers with young children in West Virginia increases the need for key federal programs that provide families with resources necessary to lay the foundation for children's success.

Early Head Start in West Virginia

1,086 infants and toddlers and 166 pregnant women in West Virginia participate in Early Head Start (EHS). EHS plays an important role in children's success in school, family self-sufficiency, and parents' support of their child's development. Currently, only a small portion of low-income children in the U.S.—less than 4%—are served by EHS initiatives, leaving the majority of eligible infants and toddlers without access to this proven program.

Child Care and Development Block Grant (CCDBG) in West Virginia

30% of children in West Virginia receiving CCDBG support each month are under age 3. The cost of child care in West Virginia for an infant is 43% of a single

WEST VIRGINIA INFANT AND TODDLER EARLY LEARNING PROGRESS REPORT

- 56%** of mothers with infants are in the labor force. (U.S. is 63%).
- 54%** of parents or family members read to their 0–5-year-old each day. (U.S. is 48%).
- 62%** of parents or family members tell stories and sing to their 0–5-year-old each day. (U.S. is 57%).
- 23%** of children age 4 months–5 years are determined to be at moderate or high risk for developmental or behavioral problems. (U.S. is 26%).



mother's median income and 12% of a two-parent family's median income. With tough economic times and a growing number of mothers entering the labor force, child care is more important than ever for the overall health and well-being of families.

Early Intervention Part C in West Virginia

4.09% of infants and toddlers in West Virginia receive Part C services. For infants and toddlers with a disability or developmental delay, addressing these issues early can make all the difference in the world and can serve as a protective buffer against multiple adverse influences that hinder their developmental progress.

In West Virginia and across the United States, 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 in West Virginia to realize their potential. When essential programs that buffer young children against multiple hardships fail to reach all of those in need across the states, 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.

FOR STATE BABY FACTS SOURCES, PLEASE VISIT:

www.zerotothree.org/policy/statebabyfacts

TO DOWNLOAD NATIONAL BABY FACTS, PLEASE VISIT:

www.zerotothree.org/nationalbabyfacts



About Us

The ZERO TO THREE Policy Center is a nonpartisan, research-based, nonprofit organization committed to promoting the healthy development of our nation's infants and toddlers. To learn more about this topic or about the ZERO TO THREE Policy Center, please visit our website at www.zerotothree.org/public-policy.