



Michigan's Infant and Toddler Action Agenda

CLASP

Policy solutions that work for low-income people

A Policy and Opportunity Profile
for Michigan's Infants and Toddlers
and Their Families

Michigan has over 330,000 infants and toddlers. Current policies aren't meeting their needs. Children's growth and development are shaped by early life experiences. Good health, secure and stable families, and positive early learning environments foster children's physical, intellectual, and social-emotional development. This profile provides demographic information about Michigan's infants and toddlers and their families. It also explains the current policy landscape, including threats and opportunities at the state level, as well as proposed policy actions to improve wellbeing.

The Building Strong Foundations Project promotes federal and state policies that address the wellbeing of infants, toddlers, and families. It's guided by a policy framework that outlines infants' and toddlers' needs, recognizing all children benefit from healthy bodies, healthy minds, and healthy parents; economically stable families; strong parents; and high-quality child care and early education opportunities.

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strong parents. Infants and toddlers need strong parents who are adequately supported and have effective parenting skills.

high-quality child care and early education. Families with infants and toddlers need high-quality, affordable early care and education programs that support child development and allow parents to work or attend school.

economically stable families. Infants' and toddlers' parents need good jobs in responsive workplaces and access to assistance when they're unable to make ends meet.

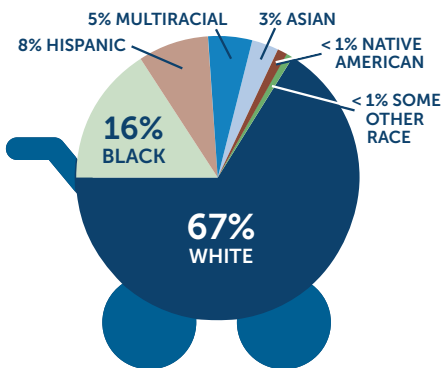
healthy bodies, healthy minds, healthy parents. Infants and toddlers and their parents need affordable public health insurance, quality health care services that meet their physical and mental health needs, and nutritious foods.

Infants and Toddlers and their Families in Michigan

There are 330,698 children under age 3 in the state.¹

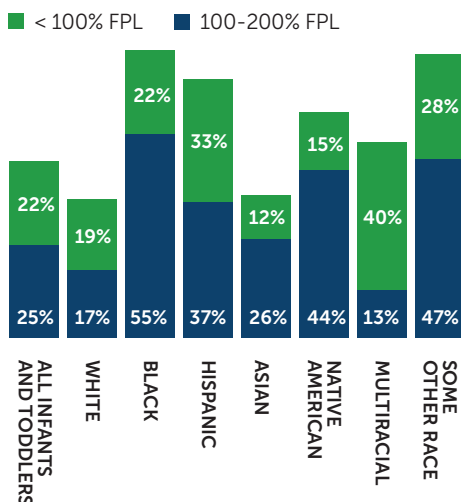
One-third of Michigan's infants
and toddlers are children of color.

Children ages 0-2 by race and
ethnicity, 2016



Source: CLASP analysis of 2016 American
Community Survey data.

Michigan's infants and toddlers of
color are more likely to have
low incomes.



Source: CLASP analysis of 2016 American
Community Survey data.

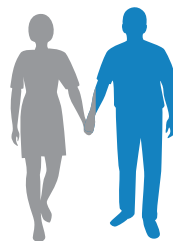
1 in 6 working
mothers in Michigan with
an infant or toddler work
in low-wage occupations.



Source: NWLC, "Mothers of Very Young
Children in Low-Wage Occupations," 2017.²

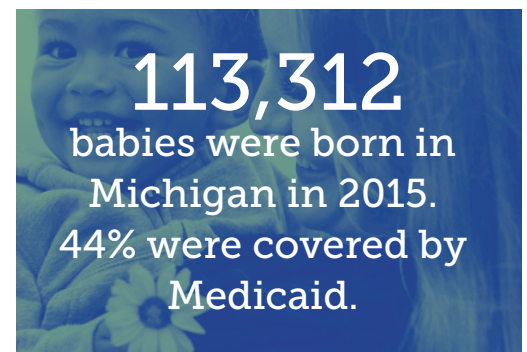
88% of all infants
& toddlers in Michigan
have at least one
working parent.

Source: CLASP analysis of 2016
American Community Survey data.



Nearly 1/2 of all
parents with an
infant or toddler
in Michigan do
not have a college
degree.

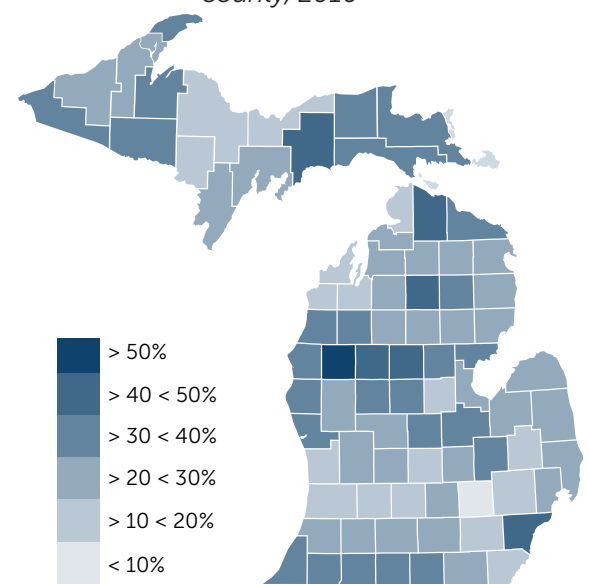
Source: CLASP analysis of Current
Population Survey, 2016



Source: CDC, *Births: Final Data for 2015, 2016*; KidsCount
Data Center, "Medicaid Paid Births—Single Year."³

Economic hardship is widespread among
young children in Michigan.

Poverty rates for children ages 0-5, by
county, 2016



Ages 0-5 Population under the FPL

Source: Michigan League of Public Policy analysis of
American Community Survey, 2012-2016

Action Agenda for Infants and Toddlers in Michigan

- ✓ Keep parents covered by fighting attacks against Healthy Michigan
- ✓ Invest in prevention-focused initiatives to reduce abuse and neglect
- ✓ Support paid sick leave legislation as recently adopted
- ✓ Target adult education resources and support services to parents with infants and toddlers
- ✓ Leverage the historic increase in federal child care funding to improve the child care subsidy system
- ✓ Build from Michigan's first-ever investment in early intervention to advocate for continued state funding

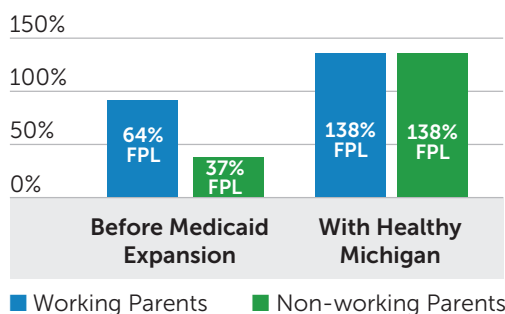


Michigan's infants and toddlers need...

...healthy bodies, healthy minds, healthy parents

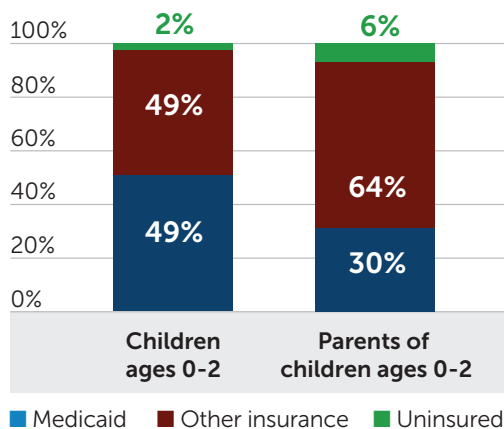
Health insurance. Michigan was one of the first states to expand Medicaid to low-income adults through its Healthy Michigan program. This has significantly improved Michigan parents' insurance rate.⁴ When parents can access health insurance, they're more stable financially. And their children are more likely to be insured and receive preventive care.⁵

**Medicaid expansion
supports parents'
access to health care**
*Parents' eligibility for
Medicaid, before and
after expansion*



Source: Kaiser Family Foundation, *Medicaid Expansion in Michigan*.⁶

**A large share of infants
and toddlers and their
parents are covered
by Medicaid**
*Insurance coverage
by type, 2016*



Source: Haley et al., *Health Insurance Coverage among Children Ages 3 and Younger and Their Parents in 2016*.⁷

Note: For infants and toddlers, the Medicaid coverage rate includes children covered by CHIP.



Access to Medicaid is associated with:

- ✓ Greater access to health care
- ✓ Lower mortality rates
- ✓ Healthier births
- ✓ Better health, educational, and employment outcomes in adulthood



Preserve the integrity of Healthy Michigan by fighting back against legislative and administrative actions that would restrict low-income parents' access to health insurance, including work requirements and other proposals that would limit eligibility or decrease affordability.

...strong parents

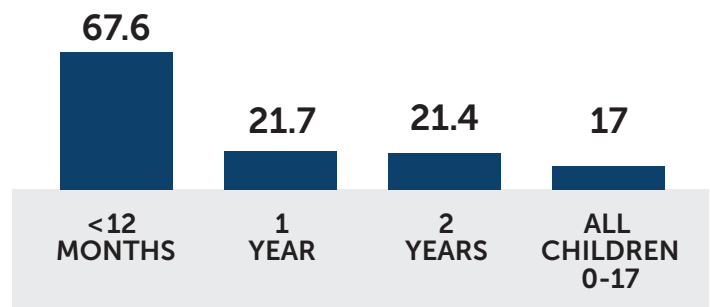
Child welfare. Michigan's child welfare system has faced significant challenges for more than a decade.⁸ A series of settlements legally required the state to make significant changes to its child welfare and foster care system.⁹ But so far, Michigan hasn't met requirements. Child abuse and neglect remain major problems—particularly for infants and toddlers, who comprise one-third of the state's abuse and neglect victims.¹⁰

Michigan must continue to reform its child welfare and foster care system. At the same time, the state has a chance to focus on preventing child abuse and neglect with recent federal legislation.

! Use the *Family First Prevention Services Act*¹² to increase funding for prevention-focused initiatives such as mental health services, substance abuse treatment, and home visiting.¹³



Infants are at greatest risk for abuse and neglect
Victim rate per 1,000 children, fiscal year 2016



Source: Children's Bureau, Child Maltreatment 2016¹¹

Michigan has the highest rate of infant maltreatment in the country.

7,702 infants younger than 12 months old were abused or neglected in FY 16



That's nearly 68 out of every 1,000 babies

Source: Children's Bureau, Child Maltreatment 2016¹¹



...economically stable families

Paid sick leave. In Michigan, 45 percent of all workers (1.7 million) lack access to paid sick leave.¹⁴ Workers with low wages and people of color are more likely to work in jobs that don't offer paid leave. Local governments in Michigan are currently prohibited from requiring businesses to provide certain benefits, including earned paid sick leave. As a result, paid sick leave must be passed at the state level.

The Michigan legislature recently passed the Earned Sick Time Act, which allows workers to accrue sick time to care for themselves or an ill family member, as well as access preventive health care services.

! Lawmakers and advocates should support this legislation as adopted and block any effort to weaken it.

Paid sick leave allows parents to care for themselves and their babies without jeopardizing their families' health and economic security.

1/3 of parents with young children say taking time off with a sick child could cause them to lose pay or their jobs.



Source: C.S. Mott Children's Hospital, *Sick Kids, Struggling Parents*.¹⁵

Parents lose out on wages when they have to stay home without pay...

3.1 unpaid sick days	=	1 month worth of utilities	
2.7 unpaid sick days	=	1 month worth of groceries	
2.3 unpaid sick days	=	1 month worth of health care	

Source: Elise Gould and Jessica Schieder, *Work Sick or Lose Pay?*¹⁶

Affordable education and training.

Michigan workers need affordable education and training to expand their skills, access better jobs, and support their families. Unfortunately, the state drastically cut adult education funding in 2004. As a result, student enrollment and completion plummeted, then flatlined.¹⁷ Parents, in particular, have lower rates of program completion.

Recently, Michigan strongly invested in affordable education and training, including a multi-million-dollar workforce development initiative.¹⁹ These dollars should be targeted to students who most need support, including parents of infants and toddlers.

Spending and enrollment in adult education, 2002-2016

	Total funding (in millions)	State funding (in millions)	Students enrolled (in thousands)
2002-2003	\$92.1	\$74.6	70.8
2015-2016	\$37.4	\$23.8	27.5

Source: Peter Ruark, *Increase Adult Education Funding to Prepare More Workers for Job Training and Skilled Work*.¹⁸



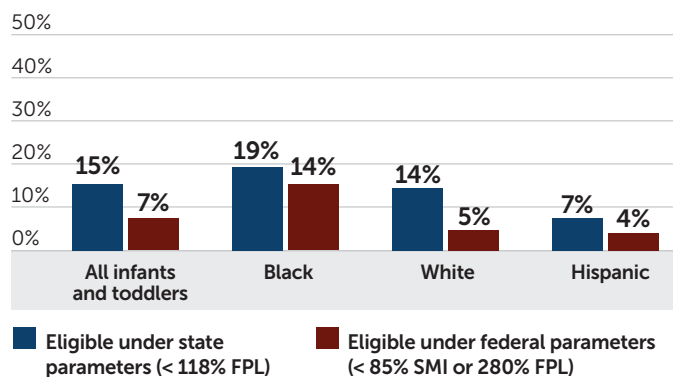
Expand access to adult education and training programs for parents with young children. Dedicate resources to connect parents of infants and toddlers to comprehensive supportive services, including nutrition and child care assistance.

...high-quality child care and early education opportunities

Child care assistance. More than half of Michigan's infants and toddlers live in households where all parents work.²⁰ That makes high-quality, affordable child care critical. However, state child care spending has been declining for years, preventing much-needed reforms. Michigan's eligibility threshold is among the lowest in the country. It restricts child care assistance to families earning less than 130 percent of the federal poverty guideline (\$27,014 for a family of three).²¹ Just 15 percent of eligible infants and toddlers received subsidies in 2016.²²

Infants' and toddlers' access to child care assistance is low and varies by race and ethnicity

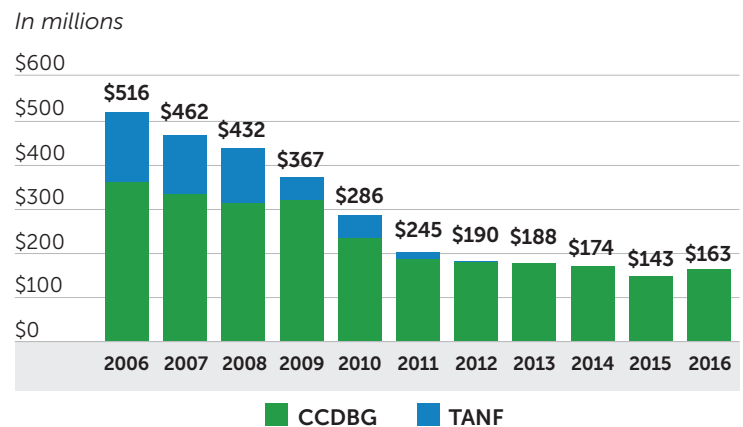
Share of eligible infants and toddlers served in CCDBG in 2016



Source: CLASP analysis of American Community Survey and administrative data from the Office of Child Care.

State spending on child care has steadily declined over time

Spending from Temporary Assistance for Needy Families and Child Care and Development Block Grant Funds, FY 2006-FY 2016



Source: CCDBG and TANF administrative data.



Michigan can change course by leveraging the historic increase in federal child care funding. Michigan should invest in higher payment rates for providers, increase eligibility limits to ensure more families can access subsidies, and grow the supply of quality care for infants and toddlers.

Early intervention services. Historically, Michigan hasn't invested state dollars in its early intervention program through Part C of the Individuals with Disabilities Education Act.²³ Instead, it's heavily relied on federal Part C dollars.²⁴ That's forced counties and school districts to draw on other limited funding sources—if alternative sources are even available. As a result, many infants and toddlers receive insufficient services to support their development.²⁵

The state's FY 2019 budget included a first-time investment for early intervention, totaling \$5 million.²⁶

More resources are needed to fully fund *Early On*



Source: *Early On* Michigan Foundation, "Early On Michigan: Imperative to Fund the First 1000 Days."²⁷

With this historic investment, advocates should push for increased resources for children with disabilities.

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²⁵ A 2013 audit of the *Early On* program concluded that infants and toddlers enrolled in the program were not necessarily receiving appropriate services in the least restrictive environment with enough frequency. Additionally, the audit identified that many school districts were discontinuing or significantly reducing services during summer months. For more information, see https://audgen.michigan.gov/finalpdfs/13_14/r313200012.pdf.

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