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A Pandemic within a Pandemic: How Coronavirus and Systemic Racism Are Harming Infants and Toddlers of Color

CLASP

Policy solutions that work for low-income people

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Overview

Even before the pandemic, far too many infants, toddlers, and their families faced significant adversity during the early critical years. These challenges stem from centuries of policies that excluded and disregarded people of color, many of which still exist today.¹ The alarming disparities in health outcomes and economic stability, which have been exacerbated by the pandemic, are a direct result of systemic racism in policies—a public health crisis in its own right.

Consider this: one-year-old children today in this country have been experiencing the shockwaves of the coronavirus pandemic for nearly half of their young lives. At the very least, many of their families were already facing existing challenges in these last five months that have been exacerbated by additional stressors. This might be because their parents or caregivers are juggling working from home and child care duties, or because they are essential workers who had to figure out an alternate care plan when their provider had to suddenly close. If they're like millions of American children, their families have also lost one or more sources of income and are having difficulty putting food on the table and paying the bills. Possibly someone in their family has become ill with the virus or their family is even dealing with the grief of a loved one who passed away.

Infants and toddlers are experiencing both the COVID pandemic and a critical period of their lives. Although current information indicates infants and toddlers are no more likely to contract the virus than adults and adults make up a majority of the known cases,² the pandemic's impacts on their development still are tremendous. Yet their needs have been virtually absent from policy conversations around the virus.

This brief unpacks the impacts of systemic racism on children's development and describes how the coronavirus pandemic has magnified pervasive inequities in health, education, employment, and other factors across race and ethnicity. Programs that help families meet their basic needs urgently need immediate shoring up. And policymakers must prioritize families of color who are most harmed by the coronavirus. We make the case for focusing on the needs of families of color with infants and toddlers in coronavirus relief and systemic policy reform efforts to ensure that policies do not continue or add to inequities.

Early Inequities and Infants and Toddlers' Development

From the very beginning, racism plays a formative role in infants and toddlers' health and development. Children of color and their families experience racism both interpersonally—through direct, discriminatory interactions with individual people—and systemically—via laws, institutions, and social norms that influence our behaviors. All too often, people of color experience racism in their interpersonal interactions with health care providers, colleagues, teachers, peers, and others in the context of social institutions.³ These interactions compound the harmful consequences of the structural barriers to participating in these institutions in the first place. Our society is plagued by decades of displacement and segregation in housing, education, employment, and beyond that have created sharp racial and ethnic divisions across nearly every measure of wellbeing.⁴ Racism, discrimination, and white supremacy have led to policies and practices that harm infants and toddlers of color and their families, despite having resilient communities and strong, loving families.

Young children are far from race blind. They recognize social divisions within their environments and only become more aware of these disparities as they learn and develop.

Research suggests that three-month-old babies can distinguish between people of different races—and by six months, show a preference for faces of their own race.⁵ At the ages of three and four, children attempt to make sense of the world by grouping people and things into observable features, including skin color⁶—a learning strategy that makes them especially vulnerable to developing and internalizing racial biases. The inferences children make about their own and others' intrinsic worth are either reinforced or challenged by their social environments and the attitudes and beliefs of their close caregivers.

Given the white supremacy that pervades society, infants and toddlers of color and their families are all too often devalued and disregarded. The intergenerational consequences of discrimination are especially evident during pregnancy. Black moms have the highest maternal mortality rates of any racial or ethnic group in the country, a devastating trend that can be attributed in part to the chronic stress associated with experiencing recurrent discrimination over a lifetime—including from their maternity care providers during pregnancy.⁷ Chronic stress during pregnancy also makes Black women more likely to deliver early or deliver babies with low birth weights.⁸ Latina mothers in communities with heightened immigration enforcement policies experience somewhat similar patterns of stress resulting from discrimination and harmful, racist policies evident in birth outcomes.⁹ One study found that higher rates of everyday discrimination during pregnancy in Black and Latina women were associated with greater separation problems and negative emotionality when their babies were six months and one year old.¹⁰

The precariousness of babies' existence continues after pregnancy: Black and Native American babies' infant mortality rates are two to three times higher than those of white babies.¹¹ As they grow, Black, Latinx, and Native American infants and toddlers are two to three times more likely to live in poverty than their white peers. Their families face challenges even meeting their most basic needs—a significant share of children of color don't have enough food to eat.¹² And their caregivers are also discriminated against, with Black, Latinx, and immigrant working mothers overrepresented in jobs that pay low wages¹³ and overwhelmingly lack employer-sponsored health insurance and paid time off of work.¹⁴

Black and Latinx children of all ages, including infants and toddlers, are more likely to live in neighborhoods that are overpoliced, where they are at increased risk of witnessing a loved one be arrested or brutalized by law enforcement officers. Over-policing—where police actively patrol a given community and stop, ticket, and charge residents at unusually high rates—is both especially prevalent and especially harmful in communities with low incomes. Residents in these communities have less financial means to pay tickets, fines, and attorney fees, as well as less flexibility to take time off work to appear in court. Further, the frequent, highly intense interactions that over-policing generates between officers and communities of color¹⁵ can have fatal consequences. Black men are 2.5 times more likely than white men to die at the hands of police,¹⁶ with police use of force being the sixth-leading cause of death among young men of color.¹⁷ Given the importance of parent-child bonds as a predictor of children's outcomes,¹⁸ the family separation that results from these interactions—through incarceration or even death—can result in long-term harm for infant and toddlers.

Recent efforts to ramp up immigration enforcement in the interior of the United States and drastic changes in policies—such as prioritizing parents of U.S. citizen children for deportation—have also separated many American families. Recent CLASP research on the impact of worksite raids on families, communities, and children—many of whom are U.S. citizens—showed the severe devastation on family economic security and mental and physical wellbeing. Specifically, our interviews identified several disturbing consequences for children and families already affected by the stresses of poverty, increased anti-immigrant discrimination, and constantly changing immigration policies.¹⁹

The persistent fear of experiencing police force falls disproportionately on Black people—and, to a lesser extent, Latinx people—who are more fearful of police violence than of being a victim of a violent crime, a home break-in, a mass shooting, or a terrorist attack.²⁰ The threat of police violence isn't lost on young children of color, who—if they haven't witnessed it themselves—are certainly seeing it on TV or hearing their parents talk about it. Even secondary exposure to police violence is enough to make young children internalize the threat to their own safety,²¹ potentially leading to heightened stress, anxiety, and hypervigilance.²² Young children with immigrant parents—who associate the police with their parents being taken away—experience similar patterns of increased stress responses associated with police.²³

Other policies inequitably impact neighborhoods where many infants and toddlers of color live. Neighborhoods that are primarily low income are more likely to be located near polluting industries and toxic waste sites²⁴ at the same time that they lack access to sufficient community resources, like grocery stores, child care centers, and public green space.²⁵ This is the result of “redlining” policies and other discriminatory policies in lending practice, lack of affordable housing, and systemic barriers to the acquisition of wealth that continue to this day.

People living in “redlined” neighborhoods—where residents were mostly Black, Jewish, or immigrant—couldn’t get affordable mortgages where they lived. Because of these racist housing practices, they were limited in their options for housing due to federal regulations and practices that effectively mandated segregation, with some less overt practices still existing today.²⁶ Redlining and other policies restricted families’ access to safe housing, good-paying jobs, quality schools, and affordable health care for decades, preventing parents of color from achieving the “American Dream” and economic security for future generations. Because of these practices, Black and Hispanic families at every income level today have higher rates of debt, lower rates of home ownership, and less wealth compared to white families.²⁷ This makes these communities less economically secure, even when they have greater earnings. Compounding this instability, racist policymaking also has persistent consequences for the availability of and families’ access to quality child care, culturally competent health care providers, and other community resources that support infants’ and toddlers’ healthy development.²⁸

These systemic issues and practices have led to some Black and Latinx children, including infants and toddlers, internalizing negative beliefs about their racial or ethnic identity by the time they enter kindergarten.²⁹ This, in turn, negatively impacts children’s mental health and academic achievement over time.³⁰ However, proactive coping skills and a strong racial identity fostered by parents and other caring adults can buffer against these negative effects.³¹

Still, centuries of disenfranchisement and dehumanization take a toll on the minds and bodies of people of color, starting in early childhood.

Experiencing discrimination—both systemic and interpersonal, overt and covert—activates the body’s stress response systems. Recurrent adversity, particularly in early childhood, is associated with maladaptive development of the brain, immune system, and cardiometabolic system over time.³² Several common conditions—including asthma, depression, diabetes, and cardiovascular issues, all of which are more common among certain communities of color because of discrimination, including inequitable access to health care³³—are associated with childhood adversity. Notably, racism doesn’t even have to be experienced directly for it to harm children’s development: evidence suggests that parents’ experiences of discrimination is associated with anxiety and depression in preschoolers and adolescents.³⁴

A Pandemic within a Pandemic

The coronavirus pandemic is shining a bright light on the systemic inequities that have plagued American society for centuries. Due to discriminatory hiring and educational practices, Black and Latinx workers are historically overrepresented in industries considered “essential,”³⁵ yet they often lack access to paid leave and employer-sponsored health insurance.³⁶ This means that at the same time they are at increased risk for exposure, Black and Latinx parents are generally unlikely to be able to take time off to care for themselves and get adequate medical care for their symptoms.³⁷ Asian Americans are also contending with the health and economic impacts of the coronavirus, as well as the surge of racist anti-Asian rhetoric and hate crimes targeting their communities.³⁸ As a result, people of color—particularly Black, Latinx, Asian American, and Native adults—are testing positive for, being hospitalized due to, and dying from coronavirus at alarming rates.³⁹

The so-called “second wave” of the coronavirus pandemic—the economic fallout—also disproportionately burdens Black, Latinx, and Native American families. As of mid-July, 64 percent of Latinx adults and 57 percent of Black adults reported that they or someone in their household lost income from employment due to the coronavirus.⁴⁰ A significant share—53 percent and 42 percent of Latinx and Black adults, respectively—reported in July that they or someone in their household expects to lose income from employment in the next four weeks.

As a result of this economic crisis, child food insecurity has risen sharply: in the same survey, 20 percent of Latinx households and 24 percent of Black households with children reported sometimes or often not having enough food in the previous 7 days.⁴¹ During the COVID crisis, rates of food insecurity among Black households with children are nearly twice as high and 60 percent higher for Hispanic households with children as they are among white households.⁴² Less than half of all Black and Latinx homeowners and less than 30 percent of renters reported being confident they could make their mortgage or rent payment in June.⁴³ Loss of income may also mean that Black and Latinx families are less likely to be able to afford diapers, formula, clothing, or other basic essentials during this time.

The coronavirus pandemic has made clear the extent of our nation’s failure to meet people’s most basic needs. More families are in need of nutrition assistance and unemployment insurance as job losses skyrocket, straining systems that were already outdated and difficult to access in many states due to decades of neglect, disinvestment, and in some cases outright sabotage.⁴⁴ Meanwhile, many home visitors, early interventionists, and mental health providers are relying on telehealth or teletherapy appointments to accommodate social distancing, which can create new barriers for families who don’t have consistent access to computers, smart phones, or the internet.⁴⁵ This is further complicated by privacy concerns during virtual medical or mental health appointments when parents are not able to find private space.⁴⁶ Additionally, telehealth and teletherapy were not frequently used with young children prior to the pandemic for a variety of very valid reasons, so these virtual visits are being implemented without training or testing, which

is leading to unknown outcomes.

Child care programs are struggling to stay afloat under stricter public health guidance and periods of temporary closure, threatening the already-limited supply of care for infants and toddlers.⁴⁷ Lack of funding and the difficulty of adjusting service models to meet increased needs and public health guidelines undermine these programs' ability to support families through the pandemic, along with their future viability.

In other words, while infants and toddlers may be less vulnerable to contracting or being sickened by coronavirus themselves, Black, Latinx, Asian American, and Native American children are especially hard-hit by its economic fallout. They are also more likely than their white peers to lose a parent, grandparent, or other loved one during this crisis.

Infants and toddlers are deeply attuned to their parents' emotional states. For many parents of color, the threat of the coronavirus is a heavy burden on their family's health and economic security on top of the daily fight for their existence. And all this can have significant impacts on their mental health. Left untreated, parental depression, anxiety, and other mental health challenges can affect babies' and toddlers' social-emotional development.⁴⁸ The Rapid Assessment of Pandemic Impact on Development Early Childhood (RAPID-EC) Household Survey Project found recently that caregiver wellbeing has worsened for those with lower incomes, three or more children, and African American households, despite having improved overall since the beginning of the pandemic.⁴⁹ To the extent that families are also experiencing coronavirus-related material hardship concerns, compounding stressors could have profound impacts on children's development for years to come.⁵⁰

Children thrive in stable environments where they know what to expect. Compounding stressors disrupt stability and can harm children's development. This is especially true if other buffers (like supportive parental relationships) are not able to mitigate stressors that are out of the hands of both parents and children. That is why this moment is so significant for infants and toddlers, particularly Black infants and toddlers who are facing heightened pandemic-related stress and instability that's causing a massive traumatic catalyst for their parents. Ignoring the needs of infants, toddlers, and their families in recovery packages will only exacerbate that harm.

We Must Address the Crisis Now with Enduring Solutions for the Future

We need urgent and immediate relief to shore up programs that help families meet their basic needs. This will ensure that families of color who are most harmed by the coronavirus are prioritized in relief. While COVID has made the need particularly acute, the solutions must be transformative and long term. And looking ahead, we need to protect their immediate health and safety by divesting from the systems, including law enforcement and mass incarceration, that undermine and oppress Black, Latinx, Native American, and other communities of color.

Alternatively, we must invest in these very same communities of color to overcome centuries of economic and physical violence directed at these communities. These investments should ensure community members, including those impacted by the justice system, have access to universal child care, quality career and education pathways, and robust health and mental health supports.

We must also think radically about large-scale investments such as a jobs and/or basic income guarantees targeted at historically oppressed communities. Decisionmakers must put racial equity at the forefront to ensure that policies do not continue or add to inequities. This means that people who are directly impacted by the policies need to be driving the conversation and have their concerns and preferences centered.⁵¹ Without this intentional approach we run the risk of devastated communities being unable to rebound from the economic impacts of the pandemic. However, if we center the voices of people with lived experience to address historically racist and discriminatory policies, along with the dual crises this country is currently experiencing, we can look back years from now appreciating that the babies and toddlers of today grew up knowing how much this country valued their lives.

Recommendations to Significantly Increase Equity for Infants, Toddlers, and Their Families

Policymakers need to make immediate and long-term policy changes to meet the needs of the families of infants and toddlers. Specifically, lawmakers must ensure that infants, toddlers, and their families are supported through coronavirus relief and that new policies address the unique circumstances of Black, Latinx, Native, and Asian American/Pacific Islander families who have been disproportionately impacted by the crisis due to historic and systemic inequities.

Because policy failures have been extensive, so are families' needs. We focus below on immediate and long-term policy changes that would provide significant relief for infants, toddlers, and their families, acknowledging that the list is not exhaustive. Across all of these policy areas, policymakers must:

- Consider the potential effects on families and communities of color, immigrant families and communities, and people impacted by the justice system as they grapple with how

policy decisions have contributed to existing inequities;

- Work to ensure that additional resources and new or reformed policies address—rather than create or exacerbate—inequities;
- Examine how different policies and programs interact with one another, acknowledging that children’s and families’ needs are multifaceted and often cut across multiple policy and program areas; and
- Consider how decisions in one area may have implications for families’ ability to use programs or services in another (for example, if gaining access to program that addresses one of their needs makes them ineligible for access to an additional program that would address another) and use these learnings to strengthen cross-system coordination so that policies and programs work together to support families.

The pandemic has highlighted and exacerbated long-standing problems with policies that span the range of need for infants, toddlers, and their families. To address these shortfalls, we recommend a combination of immediate, COVID-specific actions and longer-term policy reform. These federal and state recommendations recognize that much of what needs to happen requires action at both levels and that the federal government needs to invest significant funding to effect meaningful change.

Immediate actions⁵² to address the crisis and meet families’ needs during the pandemic include, but are not limited to:

- Expanding Medicaid in the 12 states that have not done so yet and making other needed improvements to cover parents and caregivers of infant and toddlers.⁵³
- Ensuring that mental health and wellness services for parents, caregivers, infants, and toddlers are available and accessible.⁵⁴
- Expanding nutrition assistance by extending pandemic-EBT (P-EBT) eligibility to children under age 6.
- Increasing minimum and maximum benefit levels for the Supplemental Nutritional Assistance Program (SNAP).
- Extending legislatively authorized SNAP flexibility (including P-EBT) beyond the public health crisis.
- Including immigrants and mixed-status families in COVID relief by including them in future economic stimulus payments and providing them access to all health-related supports.
- Improving and extending unemployment insurance.
- Providing rent and mortgage relief.
- Supporting virtual home visiting.
- Funding child care to sustain existing providers through the duration of the crisis, eliminate cost burdens for families, and provide safe care for the children of essential workers.⁵⁵

- Funding to support teletherapy visits in early intervention and increased referral and identification needs of families.
- Increasing funding and availability of Early Head Start.
- Expanding eligibility and extending the sunset date for paid sick leave and paid family and medical leave in the Families First Coronavirus Response Act.
- Increasing investments in child welfare support services including prevention services and emergency relief funds.
- Decarcerating correctional facilities by ending pretrial detention and releasing the most vulnerable people and caregivers from prison, including those with pre-existing conditions, parents with young children, and pregnant women.⁵⁶

These improvements, while incredibly valuable and essential in this moment, are not enough to dismantle long-standing racism and improve the lives of infant, toddlers, and families of color that have been harmed by historically racist policies and exacerbated by the crisis. Long-term, structural changes are also imperative.

Federal and state policymakers should:

- Ensure all children and parents have access to comprehensive, affordable, and equitable health care in a system that explicitly addresses health disparities.⁵⁷
- Enact a national paid family and medical leave program and paid sick leave for all workers. Congress should pass comprehensive legislation providing paid sick days and paid family and medical leave that covers the full range of personal medical and family caregiving needs. In the interim, states and localities should continue implementing paid family and medical leave and paid sick leave laws to cover their geographic area.⁵⁸
- Promote access to high-quality jobs for everyone, including parents and caregivers of infants and toddlers. Federal and state policymakers should support subsidized and transitional employment programs that promote access to jobs with living wages, fair and predictable schedules, paid sick days, and career ladders—particularly for people with low incomes, including communities of color, youth and young adults, and individuals impacted by the criminal justice system.⁵⁹
- Ensure all families can access affordable high-quality early care and education. Federal and state policymakers should expand child care assistance to low- and middle-income families who work or go to school and prioritize infants and toddlers in access and quality-improvement initiatives. Policymakers should expand programs offering comprehensive early childhood services to infants and toddlers and pregnant people living in or near poverty, including Early Head Start.⁶⁰
- Make sure the child welfare system promotes the healthy development of infants and toddlers experiencing, or at risk of experiencing, maltreatment. State and federal policymakers should expand access to comprehensive family support and child maltreatment prevention services and revise child welfare policies to better support the

unique developmental needs of infants and toddlers.

- Ensure the mental health system adequately addresses the unique needs of infants, toddlers, and their families. Policymakers at all levels should ensure infants, toddlers, and their parents have access to quality mental health services spanning from promotion to prevention, assessment, diagnosis, and treatment.
- Increase the minimum wage and eliminate subminimum wages so that parents of infants and toddlers can meet their basic needs. State and federal policymakers should raise the minimum wage so all parents of infant and toddlers are able to have good-paying jobs that provide enough money to meet their children’s basic needs.
- Increase SNAP benefits to meet the nutritional needs and actual cost of living for families with young children during this critical period of development. This should include an exemption for non-custodial parents from the SNAP time-limit for job search so that children continue to have access to food while they are with any of their caregivers.
- Ensure that infants and toddlers in immigrant families have all that they need to thrive through improved access to public programs and services. Immigration enforcement should minimize the harm to children, offer protections to parents and caregivers, and not separate families.

Meeting the needs of Black, Latinx, Native, and Asian American, Native Hawaiian, and Pacific Islander infants, toddlers, and their families is essential. While early data indicate that infants and toddlers may be less likely to be directly harmed by the virus itself, that does not mean they are unaffected. To the contrary, COVID has extraordinary implications for their development—yet conversations about COVID relief have essentially overlooked infants, toddlers, and their families. The harm of systemic racism to children’s development, coupled with the impact of the coronavirus pandemic, has caused tremendous inequities for infants and toddlers. Policymakers must include families of color with infants and toddlers in their efforts, now and in the future.

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