

# Candidate Guide to *Think Babies*



**Want to build a better future? It begins with babies.**

The science is clear. Our brains grow faster between the ages of 0-3 than any later point in life. When babies have nurturing relationships with parents and caregivers, enriching early learning experiences, and strong physical health and nutrition, they have a crucial foundation for healthy development. But when babies don't get what their growing brains need to thrive, they face life-long developmental, educational, social, and health challenges.

Public policy has not kept up with the reality of parenting today and the challenges that families with young children face. And for the nearly 1 in 5 children who are born into poverty, we must do more to ensure our policies build a stronger future for them and our country.

[ZERO TO THREE](#) created *Think Babies* to make the potential of every baby our national priority. When we *Think Babies*, we create stronger families, vibrant communities, and a prosperous country. *Think Babies* is a call to action for policymakers to prioritize the needs of infants, toddlers, and their families and invest in our future.

In this candidate guide you will find the research, statistics, and policy solutions you need to *Think Babies* – and most importantly, stories of how these issues impact families across the country.

Three key areas that are critical to families with infants and toddlers are:

- Affordable, quality child care
- Paid family and medical leave
- Access to health coverage

The greatest opportunity to influence a child's life outcomes—academic, social and emotional, and physical—is during their first three years. Invest in giving all babies the best chance to succeed in life and build a better future for all of us.

Meet some of our *Think Babies* advocates and read their stories below.



## Babies Need Comprehensive Paid Family and Medical Leave

The time after the birth or adoption of a baby is an essential time of development for babies and families.

Because early relationships nurture early brain connections that form the foundation for all learning and relationships that follow, parents and caregivers are on the front line of preparing our future workers, parents, and leaders.

Only 17 percent of all working people in the United States have access to paid leave through their employers. That means that many parents must make the impossible choice between taking the time they need to bond with their babies and losing their jobs or economic security. Parents also need paid and medical leave to take care of themselves and for situations that require family caregiving beyond welcoming a child to the family.

As few as 8 states plus DC offer paid family leave, a policy that enables families to support the well-being of infants and other family members.

Babies and their families need a comprehensive paid family and medical leave program that gives them crucial time to foster nurturing relationships that build strong early brain connections and bond with their babies, as well as care for themselves or for children with serious illnesses.

**Working families need comprehensive paid family and medical leave. Strong policy solutions will:**

- Be inclusive of all working people, no matter where they live or the nature of their job;
- Provide comprehensive coverage of personal medical and family caregiving needs as reflected in the Family and Medical Leave Act (FMLA);
- Allow sufficient time—at least 12 weeks—away from work to meet their care and health needs;
- Offer adequate wage replacement rates and benefit levels that make taking leave financially possible for everyone; and
- Protect workers from retaliation or adverse employment consequences for requesting or taking leave.

For more information, visit [thinkbabies.org/policy-priorities-paid-leave](https://thinkbabies.org/policy-priorities-paid-leave) or contact [policycenter@zerotothree.org](mailto:policycenter@zerotothree.org).

### The Akins Family (Louisiana):

After exhausting her unpaid leave, Anna returned to work, rather than risk losing a job she needed and loved. But her son, Gareth, had severe allergies and asthma that led to multiple hospitalizations in his first year. Had Anna had access to comprehensive paid family and medical leave, she would have had the protected paid leave that she needed to address his needs without worry of losing her income and career. Not only would she have been able to spend more time bonding with Gareth, she would have been able to devote her full attention to what was causing his illness earlier, leading to an earlier diagnosis. Instead, she had to walk away from a job she loved to care for her sick child.

### The Weiss Family (Virginia)

Cate used up all her paid time off during a difficult pregnancy, so when her son Jack was born, she had to take unpaid maternity leave for three months. During this time, while her husband was waiting to commission in the military, her family faced significant financial hardship. Not only did they miss her salary, but because she carried her family's health insurance, she owed significant backpay for their coverage when she returned to work. While she values the early bonding time she had with Jack, Cate's family still hasn't recovered from this financial strain.

### The Buckner Family (Texas)

Shawnnita's son, Kaden, was born with severe gastritis and low lactase and palatinase levels. Before and after diagnosis, the family rushed Kaden to the emergency room countless times, where he was frequently admitted for care, because his symptoms could not be controlled at home. Shawnnita and her husband spent many days and nights with Kaden in the hospital. Even as their child was receiving emergency care, Shawnnita and her husband were compelled to pull out their laptops as he slept in the hospital bed next to them. They struggled with the expense of the special formula Kaden needed, and they could not afford to miss work.

## Babies Need Quality, Affordable Child Care

Quality child care prepares babies for future learning and success.

Access to quality child care not only offers families a critical support for employment and education, it supports babies earliest learning laying the groundwork for future success, including strong cognitive skills, higher scores on math and language measures, and the social and emotional skills critical to all learning. But quality child care is tough to access, especially for those who need it most, and most infants are in low- or medium-quality care settings that can be detrimental to their development.

Infant-toddler care is prohibitively expensive, yet little help is available to pay for it. The federal child care tax credit does not approach the actual cost of infant-toddler care, even at the maximum benefit level. Moreover, many families with low-incomes don't benefit from it because they have little or no federal income tax liability and it's not refundable.

Only 12 states allow child care subsidies for families with incomes above 200 percent of the federal poverty level. In fact, only 4 percent of infants and toddlers in families with low- or moderate-incomes are accessing this critical support.

Nearly 8 in 10 voters support increasing funding for quality, affordable early care and learning.

We must strengthen the overall services for infants and toddlers, while ensuring that quality is not the privilege of a few.

**Working families need quality, affordable child care options now.**

**Good child care policy solutions will:**

- Be properly funded and ensure that every eligible family can enroll their child in a high-quality program;
- Provide enhanced federal, financial support for services for infants and toddlers to focus on improving quality and access; and
- Guarantee that child care providers can be paid a living wage.

### The Simon Family (Georgia)

Jasmine was a cocktail waitress in a casino in Las Vegas, Nevada when her daughter Jaelyn was born. While her union membership and the exceptional support of her family afforded her the opportunity to take a year of unpaid leave to bond with her daughter, when she returned to work, to a position without regular hours, Jasmine could not find the reliable and affordable child care she needed for her daughter. Instead, she relied on her family to provide care when she was on the job. Jasmine worried that she or one of her parents would lose their jobs because of the prioritized care for Jaelyn.

### The Thompson Family (Wyoming)

Jamie is a child care provider, and she and her partner were excited to welcome a baby of their own. Kaisen was born energetic and funny but was quickly diagnosed with a sensory processing disorder. On a child care provider's limited budget, Jamie was disappointed as she looked for places in their community where Kaisen could have the quality of care he needed. Even the place where she worked could not make his care affordable for her. Eventually, she decided to stay home with him.

For more information, visit [thinkbabies.org/policy-priorities-child-care](https://thinkbabies.org/policy-priorities-child-care) or contact [policycenter@zerotothree.org](mailto:policycenter@zerotothree.org).

## Babies Need Access to Health Coverage

**For the almost 4 million babies born each year in the United States, health care can mean the difference between a strong beginning and a fragile start.**

Nearly 6 percent of children under age 3 living in families with low-incomes lack health insurance. Proposals to change the structure of Medicaid threaten to continue to undo decades of progress on young children's health and could prove devastating to the more than 5 million infants and toddlers covered by Medicaid and the Children's Health Insurance Program.

On average, 6 in 1,000 babies born in the U.S. will not survive to see their first birthday. Children's and mothers' access to health insurance during pregnancy and in the first months of life can be the difference between life and death, since coverage is linked to significant reductions in infant mortality, childhood deaths, and the incidence of low birthweight. Young children are more likely to rely on Medicaid than older children and would bear a disproportionate burden when funding is decreased. Additionally, repealing or using a block grant for expansion would leave many parents without coverage. Parents' ability to find and afford coverage affects their own health and ability to parent as well as the likelihood that their children will be covered.

States that have expanded Medicaid coverage for adults have seen significant increases in the number of babies that also receive that benefit. The largest increases in children with new coverage were those whose parents had recently received coverage as a part of their state expanding Medicaid. Together, Medicaid and the Children's Health Insurance Program (CHIP) cover more than 1/3 of all children, including more than half of all Black and Latino children.

### **Medicaid expansion and CHIP are critical to the health of babies and families because:**

- Affordable health care means infants and toddlers can receive the critical services and treatment they need to build a strong foundation for their futures.
- Poverty is a strong predictor of developmental delays in children. Low-income and uninsured children are more likely than children from other income groups to have poor health and special health care needs. Yet these children are less likely to receive developmental screening.
- Babies need access to physical and mental health coverage that addresses the social determinants of health and developmental needs, including preventative care.

*For more information, visit [zerotothree.org/policy-and-advocacy/physical-health](https://zerotothree.org/policy-and-advocacy/physical-health) or contact [policycenter@zerotothree.org](mailto:policycenter@zerotothree.org).*

### **The Hibbens Family (New Mexico)**

Jessica's husband is a veteran and she enrolled in Medicaid when she was pregnant with their son, Rafe. Rafe was born with multiple disabilities and health issues. He is legally blind due to a neurologic condition, has mild hypotonia (low muscle tone), and is also nearly globally developmentally delayed. In trying to find the best care for her son, Jessica has engaged multiple medical professionals in their community and has traveled across states for providers not available in New Mexico. Without specialized medical care and early intervention services, Jessica would face even greater challenges finding and affording care for Rafe.

### **The Cox Family (Wisconsin)**

Samuel's daughter was exposed to continuous trauma and stress when she was a baby. Consequently, Maya struggled emotionally and socially, especially in child care settings. Samuel has struggled to find the early childhood programs and child care centers with licensed special education and infant mental health-trained staff to support Maya's needs. Before he became eligible for health care coverage through his employer, Samuel paid out of pocket for the mental health support the family needed.

### **The Flores Family (Kentucky)**

When he was born, Charlene's son, Avron, sustained a traumatic brain injury and ended up spending the next 3 weeks in the NICU. He has severe brain damage which has resulted in a seizure disorder, developmental delays, hypertonia, hypotonia, microcephaly, and visual impairment. While Avron got some services through early intervention, due to visit limits and other stipulations of the system, they are not able to get all the therapy he needs. To make the most of these first three years, they pay out of pocket for additional treatment for his developmental needs. The family has made four unsuccessful attempts to obtain Medicaid for Avron.