Promoting Healthy Infant–Toddler Development by Supporting Teen and Young Adult Parents
Promoting Healthy Infant–Toddler Development by Supporting Teen and Young Adult Parents

BY MELISSA MINCIC AND JENNIFER PALMER

The National Conference of State Legislatures is the bipartisan organization dedicated to serving the lawmakers and staffs of the nation’s 50 states, its commonwealths and territories.

NCSL provides research, technical assistance and opportunities for policymakers to exchange ideas on the most pressing state issues, and is an effective and respected advocate for the interests of the states in the American federal system. Its objectives are:

• Improve the quality and effectiveness of state legislatures.
• Promote policy innovation and communication among state legislatures.
• Ensure state legislatures a strong, cohesive voice in the federal system.

The conference operates from offices in Denver, Colorado and Washington, D.C.

NATIONAL CONFERENCE OF STATE LEGISLATURES © 2020
Raising children is a challenging but rewarding experience for most parents, regardless of their age, life experience or available resources. For many teens and young adults—who are themselves still developing—unstable living conditions and financial insecurity can make raising infants and toddlers even more trying. Further compounding the challenges for these young families, COVID-19 is magnifying family stress and straining family support systems. Without positive supports from friends, family members and their community, these struggles can lead to poor health, developmental and economic outcomes for young parents and their children. Policies, systems and services implemented at federal, state and community levels are designed to support healthy development for these young families.

The Needs of Children Born to Teen and Young Adult Parents

The fundamental needs of children born to teen and young adult parents are the same as for all children. Because of their unique circumstances, however, teen and young parents are likely to face additional challenges to meeting their children’s needs. This is particularly concerning because the first three years of life are so pivotal for brain development. While many legislators are already focused on ensuring parents have the time and tools necessary to meet the needs of their children, this brief focuses specifically on the well-being of infants and toddlers born to teen and young adult parents.

Health Concerns for Teen and Young Parents’ Children

Babies born to teen and young adult parents face increased health risks at birth and throughout their lives. Teen mothers have higher instances of babies born prematurely, and mothers younger than 25 are more likely to receive late or no prenatal care and more often smoke tobacco products during pregnancy than older mothers. All these factors put babies at risk for low birth weight, which in turn can lead to infections, respiratory problems, bleeding in the brain, high blood pressure, heart disease, intellectual and developmental disabilities, and obesity later in life.

Developmental Concerns for Children of Teens and Young Adults

The period from birth to age 3 marks the most rapid rate of physical, cognitive and emotional development in the human lifecycle. Supporting healthy growth and development for children during this critical period leads to lasting positive outcomes throughout life.

Research has shown that parents’ knowledge of child development is linked to the quality of parent-child interactions and parenting practices that support healthy development. Because of their age, many teens and young adults likely do not understand the influence—positive and negative—they have on their children’s development. Compared to children born to older parents, children of teen and young adult parents are less likely to have the social, emotional and communication skills necessary to thrive in school. This could be attributed, at least in part, to a lack of strong and consistent resources available to young parents, particularly in rural areas and suburban pockets of poverty.

How many children are born to teens and young adults?

Although birth rates among mothers ages 15-24 are at record lows, births to teen mothers 15-19 years old in the United States are still among the highest compared to other industrialized nations.

<table>
<thead>
<tr>
<th>Birth rate for teens ages 15-17:</th>
<th>7.2 per 1,000 births.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth rate for teens ages 18-19:</td>
<td>32.3 per 1,000 births.</td>
</tr>
<tr>
<td>Birth rate for women ages 20-24:</td>
<td>68 per 1,000 births.</td>
</tr>
</tbody>
</table>

Note: Birth rates are from 2018.

Source: CDC National Center for Health Statistics
At home and in child care settings, the quality of early care experiences influences young children’s development and school readiness. A 2018 study reported that 63% of parents ages 20 to 24 required child care so they could work. Finding care, particularly high-quality care, often comes at a price that is out of reach for teen and young adult parents. While licensed care is likely safer and higher in quality, families with lower incomes use licensed care less often than families with higher incomes. When they do choose licensed care, they spend an outsized portion of their household income on it. In 2014, working families with mothers ages 15 to 24 spent 15% of their monthly income on child care for children younger than 5 compared to 10% of household income for all working families.

When high-quality care is unavailable or unaffordable, over half of parents ages 18 to 24 make child care arrangements with family, friends and neighbors. Some parents might prefer these informal child care arrangements, which can be very supportive environments for young children’s growth and generally offer parents greater flexibility at a lower cost. Children are shortchanged in the bargain, however, if they are not in safe and nurturing environments rich with developmentally appropriate practices. There is ample research pointing to the positive effects of high-quality early care and education on young children’s development and readiness for school, especially for children from households with lower incomes. In contrast, there is no corresponding research for informal care with family, friends or neighbors.

Socioeconomic Concerns for Teen and Young Adult Parents

The correlation between family economic security and child outcomes is strong, and teen and young adult parents often encounter hurdles that adversely affect their economic security. Those who do struggle economically often have trouble completing high school and attaining postsecondary education, have limited employment opportunities and struggle to keep steady employment. Consequently, they are more likely to raise their children in poverty, continuing a cycle of generational poverty.

Investments in high-quality early childhood programming can significantly improve families’ economic stability and can subsequently reduce their dependence on social safety net programs. For example, a study of early childhood programs in New Hampshire calculated savings up to $4,000 per child from families living below the federal poverty level from investments in high-quality preschool programs. Parents can also increase household income through employment by having access to high-quality preschool programs, thus enhancing family economic stability.
Helping Young Children by Helping Their Parents

Two-generation strategies, also known as whole-family approaches, simultaneously address the needs of children and parents and are gaining traction in some states. Aligning existing policies, programs and funding to implement these strategies can be an efficient and cost-effective way to improve the health, well-being and economic security of young families.

The Whole Family Approach to Jobs initiative is a nontraditional approach to improving the lives of children and families. By bringing together federal, state and regional leaders from the public and private sectors to end “business as usual,” the six New England states are improving child well-being and family economic security while also addressing workforce shortages. Reducing benefits cliffs, or a sudden decrease in public benefits due to an increase in earnings, is one of the clearest examples from this work of how aligning state and federal policies across public benefit programs can simultaneously improve family economic security, child well-being and government efficiency. When families fall off a benefit cliff, parents are often forced to choose between what is necessary for short-term survival versus what is in the long-term best interest of their children. Moreover, the cliff effect can be an anchor into, rather than a ladder out of, poverty for families.

The following public programs and services are built on two-generation strategies or can be implemented in ways that simultaneously benefit infants and toddlers and their young parents.

MEDICAID

Many teen and young adult parents and their children rely on Medicaid for health coverage. In 2015, nearly 80% of parents ages 19 to 24 received Medicaid benefits, an increase of 8.5% from 2013. In 2018, 77.5% of mothers younger than 20 received benefits. Parents’ coverage often has health benefits for their children. In one study, children who had a parent participating in Medicaid were 29% more likely to receive an annual well child visit. Medicaid’s Early, Periodic, Screening, Diagnostic and Treatment benefit also provides comprehensive coverage of medically necessary services to parents younger than 21 and their children even if the service is not covered by a state Medicaid program. Recent legislation reinforces the benefit for young children. California’s AB 1004 ensures accountability for providers of benefits to children from birth to age 3, and Maine’s Legislative Document 1635 commissioned a report to determine state capacity, service gaps and affiliated service gap costs to ensure the benefit to children from birth to age 8.

States are also innovating ways to expand Medicaid’s reach. For example, Michigan’s Mother Infant Health and Equity Improvement Plan aligns Medicaid, behavioral health, child welfare and human services to improve the health of mothers, infants and families. As part of the plan, the state will leverage these partnerships to increase access to comprehensive, high-quality family planning services, especially for teens and men and women earning low incomes. Federal law requires that Medicaid also cover care for infants for one year and pregnancy-related care for mothers for 60 days following birth. Most states and the District of Columbia extend Medicaid eligibility to provide mothers further care beyond the 60-day mark, which can support mothers’ and children’s healthy development.

FAMILY TAX CREDITS

The federal earned income tax credit and the child tax credit reduce taxes for low- to moderate-income working families, and especially families with children. In 2018 alone, the two tax credits combined lifted 10.6 million Americans out of poverty. Research shows that both benefits have increased single mothers’ employment rates and earnings. These benefits have also improved children’s health and development through fewer premature and low-birth-weight births and increased school performance, college attendance and earnings in adulthood. A third family tax credit, the Child and Dependent Care Credit, provides single parents either working or attending school a credit worth up to 35% of child care costs.

On top of the federal tax credit, at least 29 states, the District of Columbia, Guam and Puerto Rico have earned income tax credits. Several states—including Louisiana, Maryland, New Jersey and Vermont—have recently increased earned income tax credit values. Working parents with low incomes and children under
the age of 6 in California, for example, can qualify for both an earned income tax credit and a child tax credit. Despite the availability of the credits, however, approximately 20% of eligible recipients don’t claim the benefits. Several states have enacted legislation in efforts to inform families of their eligibility. Arizona’s HB 2622, for example, requires the Department of Economic Security to provide all child care subsidy recipients with information on the earned income tax credit.

**TEMPORARY ASSISTANCE FOR NEEDY FAMILIES**

Temporary Assistance for Needy Families (TANF) offers cash assistance to families with young children living in poverty. States have a great deal of flexibility in determining eligibility criteria, including work requirements, for receiving TANF assistance. Many states extend targeted assistance to teen parents but don’t make considerations specific to young adult parents. Whereas parents ages 20 to 24 made up 20.5% of TANF recipients in 2015, only 4.5% of teen parents received TANF benefits and yet were the only subset of parents allowed alternative ways of meeting eligibility requirements. Teen parents can meet work requirements, for instance, by participating in job skills training, working toward a high school degree or equivalent, or pursuing education directly related to employment if they don’t yet have a high school degree.

While these exceptions are helpful for teen parents, no specific exceptions are made for parents ages 20 to 24. However, states can choose to allow some activities to count toward work requirements for young parents even if they don’t meet federal requirements. In Nebraska, for example, Adult Basic Education, English as a Second Language and General Education Development programs count toward work participation. Most states exempt single parents from fulfilling TANF work requirements if caring for children up to 2 years of age.

**CHILD CARE DEVELOPMENT BLOCK GRANT**

States have flexibility in using federal Child Care and Development Block Grant (CCDBG) and state funding to improve parents’ access to high-quality early learning opportunities. At least six states—California, Colorado, Delaware, Florida, Illinois and Maryland—expanded eligibility to include parents’ temporary changes in employment status, which could increase teen and young adult parents’ access to quality child care while looking for work. Also, Connecticut enacted SB 936 in 2019 to provide a child care subsidy program to increase the availability, affordability and quality of child care services for parents attending high school.
EARLY HEAD START

At the federal level, Early Head Start programs take a two-generation approach by providing intensive and comprehensive child development and family support services to children younger than 3 and pregnant women from families with lower incomes. In 2013, a large percentage of participating parents were teen and young adult mothers. Research shows that participation improved children’s school readiness skills and engagement in play, lowered the risks of child abuse and neglect, and improved father-child interactions. Research also links fathers’ involvement to enhanced emotional, social and cognitive development and educational achievement for children.

HOME VISITING

Home visiting is a voluntary, evidence-based prevention strategy pairing trained professionals with pregnant women to provide resources supporting healthy pregnancies and early child development. Teen mothers with limited education are among the demographics that enroll and engage in home visiting programs at high rates. Programs have shown positive outcomes for young children, including fewer pre-term and low-birth-weight births and improved school readiness skills. The Illinois Pregnant and Parenting Youth in Care home visiting pilot program is also demonstrating positive outcomes for parenting youth in the foster care system.

Data also show greater high school graduation rates for mothers and several benefits for fathers, including greater child development and parenting knowledge, improved relationship skills and connections to employment opportunities. From a fiscal standpoint, cost-benefit analysis shows substantial return on investments, ranging from $1.75 to $5.70 for every dollar spent due to reduced costs of special education services, grade retention and criminal justice involvement.

In conjunction with the federal Maternal, Infant, Early Childhood Home Visiting grant program, some state legislatures finance home visiting programs through various streams and advance legislation to coordinate state home visiting programs and strengthen program quality and accountability. New Hampshire, for example, authorized TANF funding to expand home visiting services through family resource centers in 2018. Additionally, 20 states were using Medicaid funding to support home visiting services as of 2018.

Policymakers Have Options

As described above, there are many ways legislators can promote healthy development of children born to teen and young adult parents. Below are five strategies to more effectively implement existing programs.

- Invest in strategies that enable teen and young adults to simultaneously meet their parenting obligations while also gaining a foothold in the workforce. For example, in 2016, Oregon’s HB 4110 increased the state earned income tax credit from 8% to 11% of the federal credit for families with children younger than 3.
Align eligibility criteria and leverage available resources for state and federally funded public assistance programs. In 2019, for example, Texas’ SB 748 used Medicaid funds to develop and implement a pilot program to provide coordinated, evidence-based maternity care management. As a result, health care providers and social workers are collaborating to offer mothers individualized risk assessments, pregnancy care plans and consultation throughout pregnancy to reduce poor birth outcomes.

Explore policy options to reduce benefits cliffs. Vermont’s HB 326 raises the asset limitation from $2,000 to $9,000 to determine families’ initial and continued eligibility for the state’s Reach Up Program. The program helps parents earning low incomes to develop job skills and find employment to better support their children, a benefit that could help ensure that more teen and young parents access resources to gain financial stability.

Offer a continuum of services to teen and young adult parents and their families. New Jersey’s SB 1475 establishes the Medicaid home visitation demonstration project, a collaboration between the departments of health, human services, and children and families. It provides ongoing health and parenting information, parent and family support, and health and social services resources from pregnancy through early childhood.

Tailor program approaches to meet the needs of teen and young adult parents and their infants and toddlers. California’s AB 2289 is an example of legislation accommodating the needs of pregnant and parenting teen students. The bill amended previous legislation to allow students eight weeks of parental leave from school for childbirth (or more if needed for medical reasons) and opportunities to make up missed work once they return to school. The bill also expands the definition of an excused absence to include caring for a sick child without requiring a doctor’s note.

Additional Resources

- Prenatal-to-Three Policies, NCSL
- Strong Beginnings, Successful Lives: A Prenatal-to-Three Policy Guidebook for Legislators, NCSL
- Building Strong Foundations: Advancing Comprehensive Policies for Infants, Toddlers, and Families, Zero to Three
- Think Babies, Zero to Three
- Early Childhood Home Visiting: What Legislators Need to Know, NCSL
- Helping Babies and Toddlers Thrive: A Look at Recent State Legislation, NCSL
- Two-Generation Strategies Toolkit, NCSL
- The U.S. and the High Price of Child Care: 2019, Child Care Aware of America
This brief was made possible with funding from ZERO TO THREE as part of Think Babies™, which was developed to make the potential of every baby a national priority. Funding partners for Think Babies™ include the Perigee Fund and the Robert Wood Johnson Foundation, which supports the public education aspects of Think Babies. Learn more at www.thinkbabies.org.