



Minneapolis Infants & Toddlers

*An Executive Summary from the
Minneapolis Department of Health & Family Support's*

CHAMP

(Child Health Assessment and Monitoring Project)

June 2001

A KidStat Publication



Acknowledgements

The Minneapolis Department of Health and Family Support (MDHFS) extends our sincere gratitude to the 3,352 families that participated in the CHAMP survey. Spare time is precious to parents with young children; we appreciate the 30 minutes spent answering our survey.

MDHFS thanks the City of Minneapolis and The Minneapolis Foundation for their financial assistance with the CHAMP survey. In addition, MDHFS would like to thank the many community organizations that provided support and direction. We're especially thankful for the time and effort provided by the Minneapolis Public Schools, Way to Grow, and The Minneapolis Foundation.

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KidStat is an initiative of the Minneapolis Department of Health and Family Support to research issues affecting children's well-being and to advocate for policy changes, programs and activities that promote healthy children.

The Minneapolis Department of Health and Family Support works to ensure that all families are healthy and fully share in the social and economic opportunities of the City of Minneapolis. The MDHFS reaches residents by working in partnership with community organizations, other units of government, schools, health systems and other health agencies.

David S. Doth, Commissioner, Minneapolis Department of Health and Family Support

More details about the CHAMP Survey and findings can be found on the Minneapolis Department of Health and Family Support's web site under Research and Policy www.ci.minneapolis.mn.us/dhfs, or call (612) 673-2301.

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THE EARLY YEARS OF LIFE: MINNEAPOLIS INFANTS & TODDLERS

The early years of a child's life are a time of rapid growth and development that lay the foundation for his or her entire life. How children in the city fare, especially in the early years, has a tremendous impact on the quality of life in Minneapolis, and says much about our community.

The Minneapolis Department of Health and Family Support, with funding from The Minneapolis Foundation, undertook a project in order to understand the early years of life for the city's children. The Child Health Assessment and Monitoring (CHAMP) project had two phases: an analysis of birth certificate data of infants born between June 1997 and December 1998, and a survey of a subset of those parents.

The Minneapolis Department of Health and Family Support (MDHFS) hopes that communities throughout the city along with policymakers and professionals will use this report to help families with young children succeed.



The Birth Certificate Data

Historically, birth certificates have contained important information including parents' names, ages, races and dates of birth. Over the past 20 years, birth certificate data has been expanded to include information such as degree of prenatal care, mother's use of tobacco, alcohol and illicit drugs during pregnancy and mother's educational attainment. The CHAMP Initial Findings Report contains analysis of birth certificate data of the infants and toddlers in the CHAMP project.

The CHAMP Survey

The birth certificates provide much information about the health of infants at birth and their mothers' circumstances; however, understanding the daily lives of these infants and toddlers is also important. The CHAMP survey of parents, conducted when the children were between six months and 2-1/2 years of age, provides a more complete picture of Minneapolis infants and toddlers. The survey consisted of 50 questions concerning:

- the livability of the neighborhood;
- family circumstances, resources and strengths;
- infant and toddler health, health coverage and other support systems; and
- the family's socio-economic status.

Interviews with 3,352 parents (3,222 mothers and 130 fathers) were conducted by phone or in person between July 1, 1999, and January 15, 2000. For a child's family to be eligible for the survey, the mother had to reside in Minneapolis at the time of the birth and live in the City at the time of the interview. Forty-four percent (44%) of all those eligible participated in the survey.

SIGNIFICANT FINDINGS

Families

The family is the most influential force in a child's development and well-being. Families provide basic physical needs and support emotional, intellectual, and physical development. Of the CHAMP respondents, 74% were married, 5% were unmarried couples, 4% were separated or divorced, and 17% had never been married.

Teen Parents

Research has shown that children born to teen mothers are more likely to grow up in homes that offer inadequate emotional and financial support. Teenage parents often face limited educational opportunities, limited job prospects and a greater chance of long-term poverty.

Mothers under age 20 gave birth to 12.1% (958) of all infants included in the birth certificate analysis. Children of teen parents face higher risks for poor birth outcomes and later difficulties than do children of women age 20 and older. The following table illustrates differences between infants born to teen mothers and those over age 20:

<u>Risk Factor</u>	<u>Mother Age 19 or Less</u>	<u>Mother Age 20 or More</u>	<u>Source</u>
Parents unmarried at time of birth	87%	32%	birth certificates
Inadequate or no prenatal care	16%	7%	birth certificates
Low birthweight	12%	7%	birth certificates
Pre-term birth	10%	7%	birth certificates
Low income	86%	39%	CHAMP survey
Secondhand smoke in household	30%	10%	CHAMP survey

Over one-third of the CHAMP teen mothers reported that this was not their first child. In fact 10% (14 respondents) of teen mothers 17 years of age and younger reported they have at least three children. In addition, 8% (25 respondents) of teen mothers reported being pregnant again at the time of the interview.



Fathers

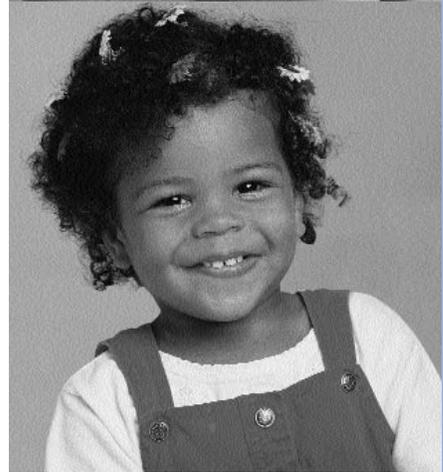
At the time of the survey, 80% of the children were living in the same households as their fathers. The reverse, of course, is that one in five children was not living with his or her father.

The presence of a father as well as a mother adds to or enhances household resources. It is easier for two people to meet the physical and emotional needs of infants

and small children, generate income for the family, and have the time to connect with friends and neighbors. The survey also found that the presence of the father in the household made a difference in how children were disciplined and in the family's financial well-being.

In households with fathers present, 7% of respondents reported using spanking (an undesirable form of discipline) as a means of discipline compared to 17% in households where the father was not present. Among the households where fathers were present, 8% depended on welfare, while among families without the father present, 57% depended on welfare. The following table shows these and other economic differences between the two kinds of households.

<u>Economic Indicator</u>	<u>Father Not in Household</u>	<u>Father in Household</u>
Received MFIP-welfare	57%	8%
Used WIC Food Program	72%	25%
Used food stamps	63%	12%
Mother received court-ordered child support	15%	n/a
Moved two or more times in the past three years	26%	12%



The CHAMP Initial Findings report contains an extensive analysis of single parents and their infants and toddlers.

Children of Foreign-Born Parents

The mothers of 27% of the children included in the birth certificate analysis were born in another country. Within racial and ethnic groups, foreign-born mothers had better birth outcomes than did those of U.S.-born mothers. For example, among blacks, 4% of foreign-born mothers had premature births compared to 11% of US-born blacks. While these infants are healthier at birth, their families tend to be low income. In the CHAMP Survey, 73% of foreign-born families were low-income. These and other differences between outcomes for children of foreign-born and U.S.-born mothers are covered in greater detail in the Initial Findings Report.

Physical Health

Nine out of ten (90%) CHAMP infants and toddlers were reported to be in excellent or very good health. Childhood injuries and chronic diseases were not common— reported in 1% or less of the CHAMP population. However, 5% of the infants and toddlers had been injured seriously enough from a fall that the parents sought medical advice, and 5% of the children were reported to have asthma or wheezing.

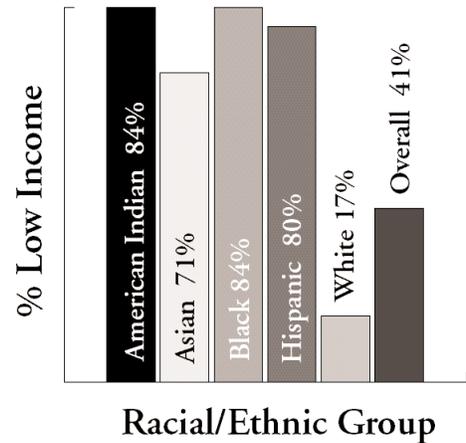
Health Care and Health Insurance

Overall 96% of CHAMP infants and toddlers were covered by health insurance. One in four had either Medicaid or MinnesotaCare as a health insurer. Ninety-nine percent (99%) of infants and toddlers in

the CHAMP Survey had at least one well-baby check. Four percent (4%) of parents reported using the emergency room or urgent care as their regular source of care.

Low Income and Health

At the time of the CHAMP Survey, 41% of respondent households were low-income, meaning that they were receiving one or more forms of government assistance (MFIP/welfare, WIC-food subsidies for Women, Infants & Children, food stamps) and/or reported their income to be below 150% of the Federal Poverty Guideline. In 1999, 150% of Federal Poverty Guideline for a family of four was approximately \$25,000. Among low income parents, 85% reported that their child was in very good or excellent health compared to 95% of children from families that were not considered low income based on the above criteria.

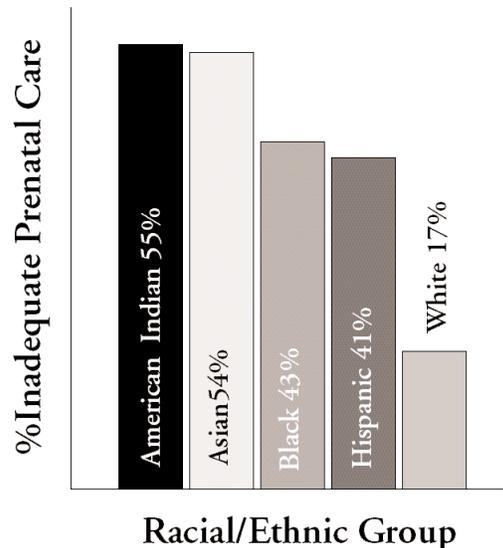
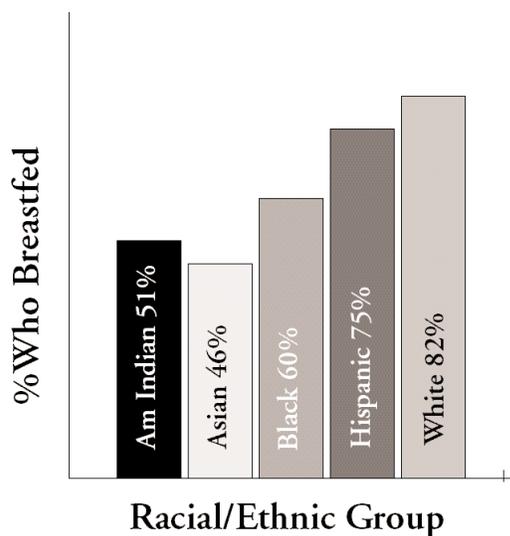


Race/Ethnicity and Health

Recently, a number of national studies have detailed disparities by race and ethnicity in the health of adults. One of the CHAMP Survey’s most compelling findings is that those differences exist for infants and toddlers as well.

In this project, large disparities between white children and all other children were evident for almost every health indicator or predictor. Disparities such as premature birth, infants born with low birth-weight, reported health status, as well as, socioeconomic predictors of health, such as income, employment, education, and community support, were all evident. For example, inadequate prenatal care was much lower among White mothers (17%) compared with all other mothers: [American Indians 55%, Asians 54%, Black 43%, Hispanics 41%]

The following demonstrate racial/ethnic group differences:



Connection to Community

Social and community support within neighborhoods and among family, friends and community groups are important family assets.

Three out of four (75%) of the CHAMP families have extended family or friends who are regularly involved in their child's life. Similarly, 74% are well-connected to their neighborhood and have a strong sense of community (based on a Community Support Scale developed by national researchers).

In addition, two-thirds (66%) of CHAMP families reported attending religious services at least monthly, while 32% reported weekly participation. Regular participation in spiritual/religious events can play an important role in strengthening social and community ties

While most parents felt supported and well connected in their neighborhoods, a sizeable portion of the parents were not as well connected and supported. One out of four parents did not report regular involvement by extended family or friends nor did they feel well connected to the neighborhood.

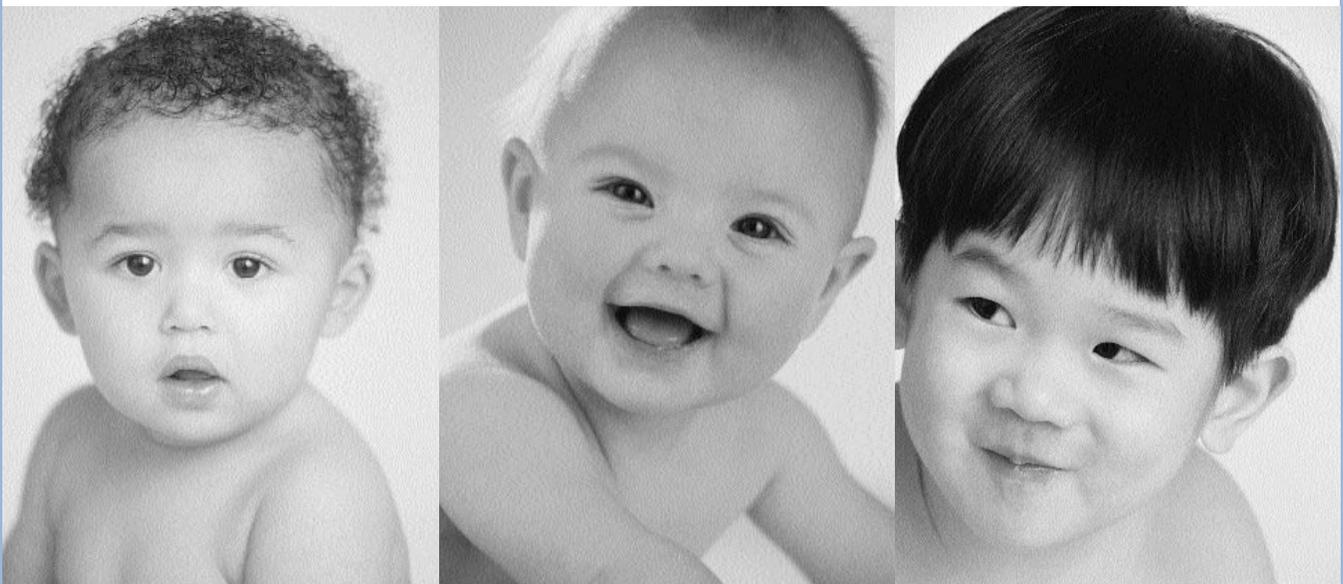
Perception of community support varied by race and ethnicity. Twenty-six percent (26%) of all respondents were defined as having low community support. However, 53% of American Indians, 44% of Asians and Blacks and 33% of Hispanics reported low community support compared to 16% of White respondents.

Parent-Child Interaction

Parenting style is influenced by factors such as culture, family background, parents' emotional and mental health and other life circumstances.

Positive parent-child interactions were much higher among CHAMP families than what was reported in one national survey. Ninety-five percent (95%) of the CHAMP mothers reported playing with their child daily (84% national survey) and 98% reported hugging or cuddling with their child daily (89% national survey).

Parents can help stimulate brain development in infants and toddlers by reading to their children, or



showing them a picture book. Eighty-one percent (81%) of CHAMP mothers reported reading to their children daily compared to 39% in a national survey.

<u>Indicator</u>	<u>Minneapolis</u>	<u>National Survey</u>
Play with child daily	95%	84%
Hug or cuddle daily	98%	89%
Read to child daily	81%	39%

Smoking and Use of Alcohol or Illegal Drugs during Pregnancy

While birth certificates now record whether mothers smoked, used alcohol and/or used illicit drugs during pregnancy, studies have found that mothers almost always under-report this information. The birth certificates analyzed for this study showed 10.9% of mothers reporting that they smoked during pregnancy, 2.7% reporting that they used alcohol and 4.2% using illicit drugs.

Section II of the Initial Finding Report contains an expanded analysis of these issues. It looks at data such as age and race of mother, smoking and age, and age and educational attainment.

SUMMARY

The findings presented here and in the Initial Findings Report tell us that while most children are off to a good start in life, too many are going without essential supports such as sufficient income, pre-natal care, and an involved father, family and friends.

The Minneapolis Department of Health and Family Support wants communities of all kinds (e.g., block clubs, faith groups, parent associations, civic groups and social service and health organizations) to use this report to reach out more effectively to young children and their families. For some it will mean learning to communicate better with people from a wide range of cultures. For others it will mean changing the way they operate or the messages they send to parents of young children. For others it will mean stepping forward to knock on closed doors and gradually draw young families into the life of the neighborhood.

