

**Supportive Parenting and Childcare Systems Briefing Document
Presented to the Governor's Interagency Council on Health Disparities
September 20, 2007**

Early childhood is a time of immense physical, social, emotional, and intellectual growth of children – all critical elements of school readiness and success later in life. Moreover, the importance of early childhood development for health has been well-documented. **Supportive parenting and childcare systems** are key factors in promoting optimal child development. Common measures of supportive parenting include reading to young children and regular bedtime and mealtime. Indicators of quality child care include learning environments, nurturing adult/child interactions, and teacher-child ratios. Data are not available for these indicators in Washington.

CRITERION #1: MAGNITUDE

- In the U.S. in 2005, 60.3% of children ages 3-5 who had not yet entered kindergarten were read to daily by a family member.
- According to national data from 2000, 58% of children between the ages of 4 months and 35 months had both a regular meal time and a regular bed time.
- According to the perceptions of kindergarten teachers in Washington State, 44% of the incoming students in 2004 were not prepared for kindergarten.
- In 2005, there were about 175,000 children enrolled in 7,771 licensed childcare facilities in Washington State.

CRITERION #2: ASSOCIATION TO HEALTH OUTCOMES

- Reading to young children has been shown to promote language development and reading comprehension, which in turn relates to later success in school. The link between education and health outcomes has been well-documented.
- Regular mealtimes with children provide opportunities for parents and children to interact and allow parents to model healthy eating behaviors. Regular bedtimes help to ensure that children receive proper rest and reduce sleep problems, which have been shown to hinder performance in elementary school. A lack of a regular bedtime has also been associated with mental health risks.
- High quality child care is associated with better cognitive, language and social development in children.

CRITERION #3: DISPARITY

- According to national data in 2005, the proportion of children ages 3-5 who had not yet entered kindergarten who were read to daily was highest for non-Hispanic white children (67.7%), followed by Asians (65.6%), non-Hispanic blacks (49.7%), and Hispanic children (44.7%), for an index of disparity of not being read to daily of 44.5%.
- In 2000, the proportion of U.S. children between the ages of four months and 35 months who had both the same mealtime and bedtime every day was highest for non-Hispanic whites (63%), compared with 47% of non-Hispanic black children and 53% of Hispanic children of the same age.

The Index of Disparity is the average of the difference in rates between the racial/ethnic group with the "best" rate and all other racial/ethnic groups.

Keppel KG et al., Measuring progress in healthy people 2010. Statistical Notes, no 25. NCHS, 2004.

**Consistent with Keppel et al., (2004), rates were transformed to rates for not being read to daily for purposes of calculating the Index of Disparity.*