
 **COVID-19 - CA statewide stay-at-home order**
March 16, 2020

 **2020 Los Angeles County WIC Survey**
July - Dec 2020

This is WIC

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a nutrition assistance program of the United States Department of Agriculture (USDA) that serves pregnant and postpartum women, infants, and children under 5 years of age from low-income households. WIC provides participants with benefits that can be redeemed for select healthy foods and beverages, in addition to breastfeeding support, nutrition education and counseling, and health and related referrals. Due to its broad reach to low-income households, serving 6.2 million participants in 2020 and providing assistance to over 50% of children before age 5 years, WIC can support in the education and early detection of developmental delays. Every three years since 2005, a survey has been conducted with WIC participants living in Los Angeles County (LAC) to evaluate various metrics of health and support provided through WIC services.

During the early years of childhood, any conditions that impair the expected progression of physical, learning, language or behavioral milestones are considered developmental delays or disabilities. In 2018, only 10% of screened and diagnosed infants and toddlers received intervention services for developmental delays or disabilities^{1,2,3}. Early detection through access to routine health care and home visiting programs can lead to better linkage to services and more overall support. About 50% of children ages 9 to 35 months are reported to receive support services like home visiting programs, which can help improve early detection and linkage to services⁴. In the United States, Hispanic children are the least likely to be diagnosed with a developmental delay compared to non-Hispanic White and Black children (13.8%, 18.5%, and 19.0% respectively)^{5,6}. This report focuses on developmental concerns reported by parents of young children who participated in the 2005, 2008 or 2020 Los Angeles County (LAC) WIC Survey.

Developmental screening questions were drawn from the National Survey of Children's Health (NSCH)⁷. Due to the pandemic that caused closures and interruptions in many services, the

2020 LAC WIC survey also included questions on home visiting to study the potential impact these changes in service may have had on developmental screening and support. The sample size and distribution by gender, child age and race and ethnicity for the LAC WIC population across the survey years has remained relatively consistent except for the increase in Hispanic Spanish-speaking respondents (65%) in 2008 compared to other years. Trends for the LAC WIC population have shown a shift from majority Spanish speaking Hispanic participants to a majority English speaking population since 2002⁸. In 2020, the Black and Asian communities were oversampled to capture a more complete picture of what these families were experiencing during this focal year. Data from each survey year is weighted to account for differences by race and ethnicity in the predominantly Hispanic LAC WIC population.

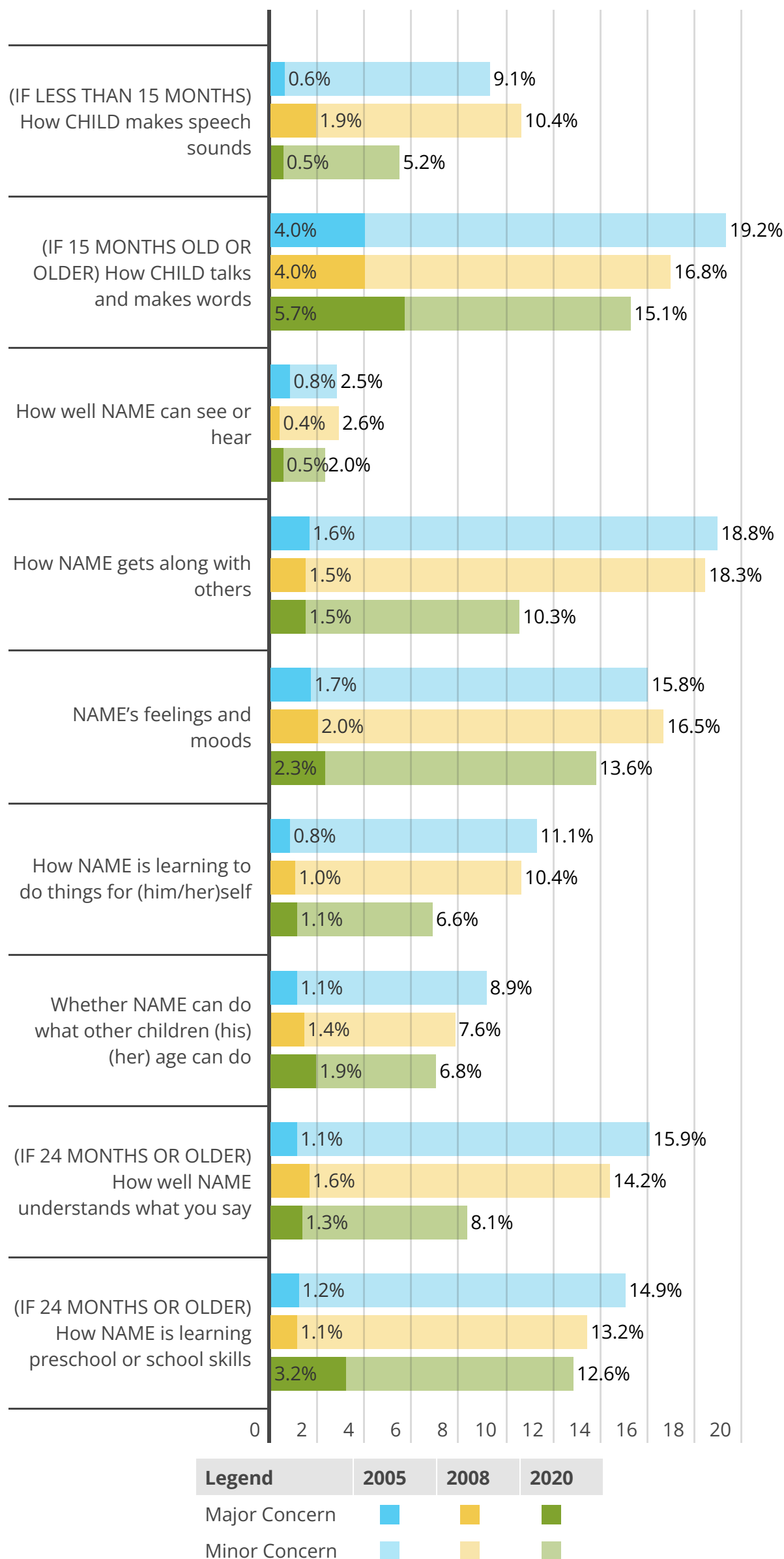
Table 1: Sample Demographics

	2005	2008	2020
Sample Size	3467	3637	5120
Gender			
Boy	51.3%	50.8%	51.1%
Girl	48.7%	49.2%	48.9%
Age			
1 year old	28.4%	27.3%	28.2%
2 year old	25.10%	26.0%	24.1%
3 year old	22.9%	24.6%	23.9%
4 year old	23.6%	22.0%	20.8%
Race			
Asian	2.0%	4.3%	2.4%
Black	5.7%	6.5%	10.1%
Hispanic, EN	16.3%	18.0%	44.3%
Hispanic, SP	48.0%	65.0%	27.0%
Other	4.8%	2.7%	2.4%
White	23.1%	3.4%	13.9%
Service Planning Area (SPA)			
1	2.9%	7.7%	4.3%
2	13.5%	12.6%	14.8%
3	15.9%	13.2%	13.6%
4	12.7%	14.5%	10.5%
5	1.6%	1.9%	1.4%
6	22.1%	22.6%	23.3%
7	17.0%	14.9%	18.0%
8	14.2%	12.6%	14.0%

Sample size and demographics of children under 5 for survey years 2005, 2008 and 2020. Data is weighted to account for oversampling and race & ethnicity differences in the predominantly Hispanic WIC population for Los Angeles County.

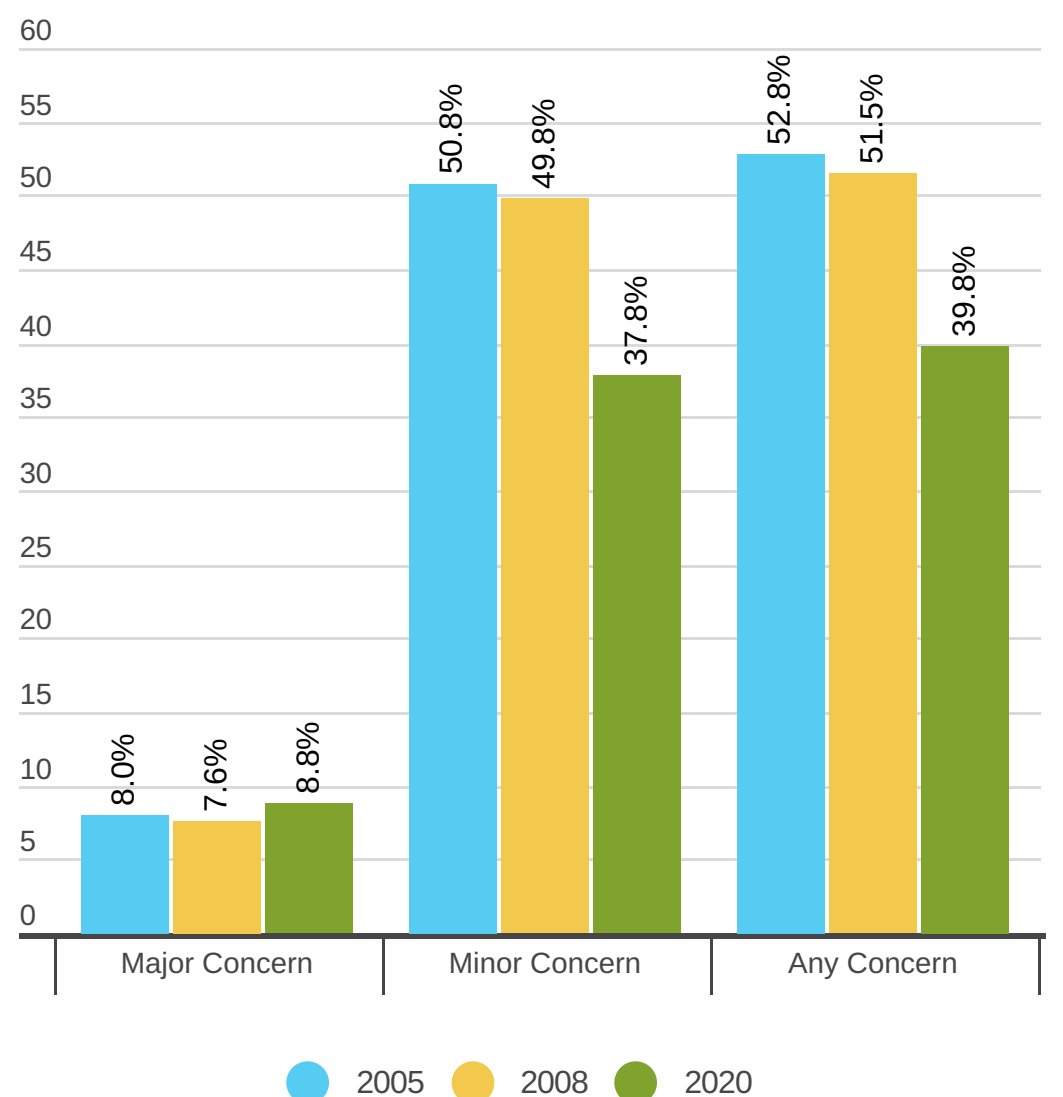
Developmental Concerns Trends by Los Angeles County WIC Survey Year

Figure 1: Major and Minor Developmental Concerns by Survey year



Developmental concerns were evaluated with 9 screening questions to analyze trends by survey year, Service Planning Area (SPA), race and ethnicity, gender and age group for all eligible respondents. For analytical purposes, if any question in the series had a response of "A big problem", it was categorized as a major concern. A response of "a small problem" was categorized as a minor concern. Speech and behavior related concerns were the most reported by parents in each survey year (Figure 1). In 2020, major concerns increased most for speech and learning concerns among children older than 1 year compared to the past two survey years. In 2020, there was a substantial decrease in parental reports of minor concerns and a small increase in reports of major concerns, as compared to prior years (Figure 2). This could indicate that while major concerns were caught during the pandemic, many minor concerns were not identified due to the impacts COVID-19 had on childcare, schooling, home visiting programs and routine health care visits.

Figure 2: Total Developmental Concerns by Survey Year

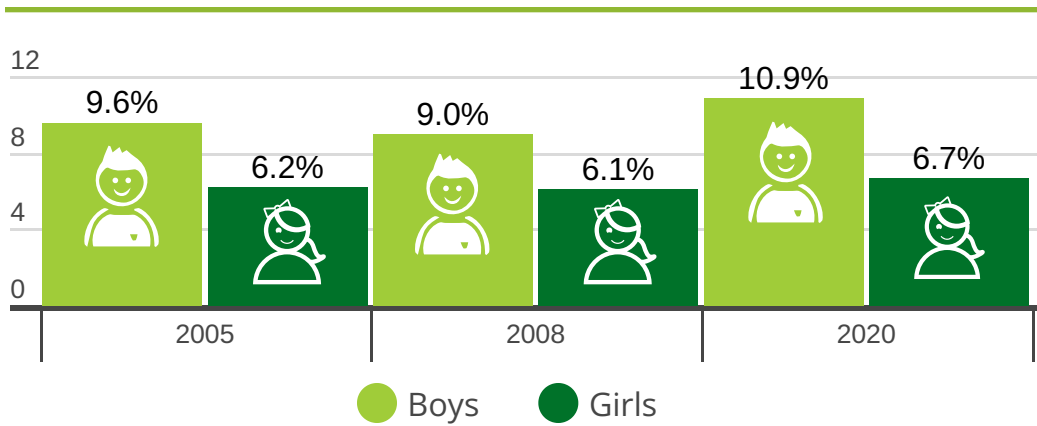


Developmental concerns have been categorized into Major Concern, Minor Concern and Any Concern. Any concern is a response of "A small problem" or "A big problem" to any of the developmental concern questions. Since parents could report both "a small problem" and "a big problem" for the same concern, the sum of minor and major concerns do not add up to the total count of "any concern".

Developmental concern questions from the LA WIC County Survey asked in 2005, 2008, and 2020. A response of "A big problem" to any of these questions has been categorized as a *major concern*, while a response of "a small problem" is categorized as a *minor concern*.

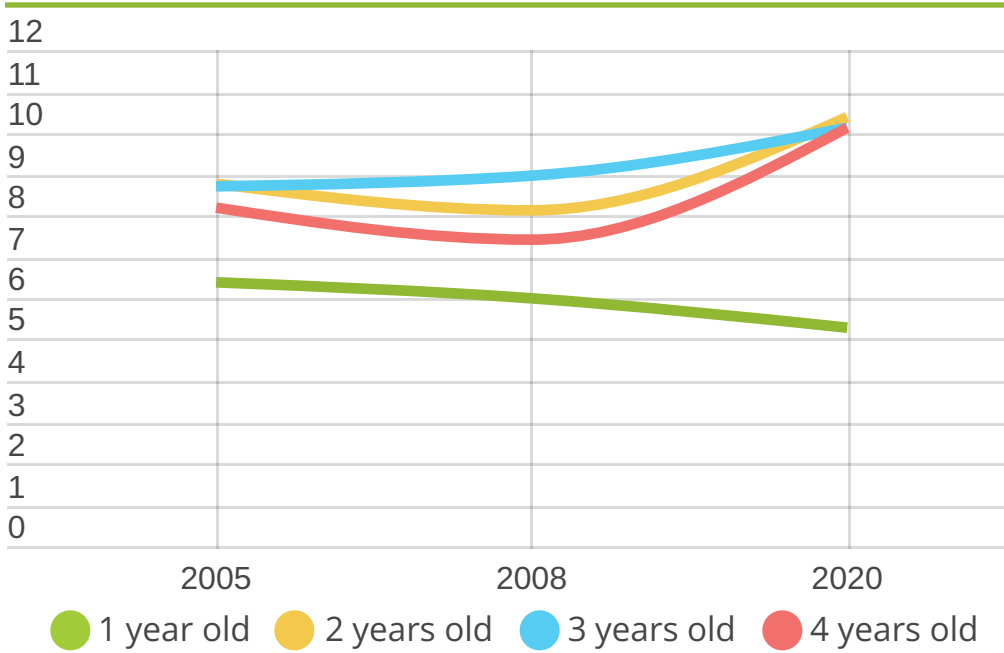
Developmental Concerns by Child Characteristics and Region

Figure 3: Major Developmental Concerns by Gender



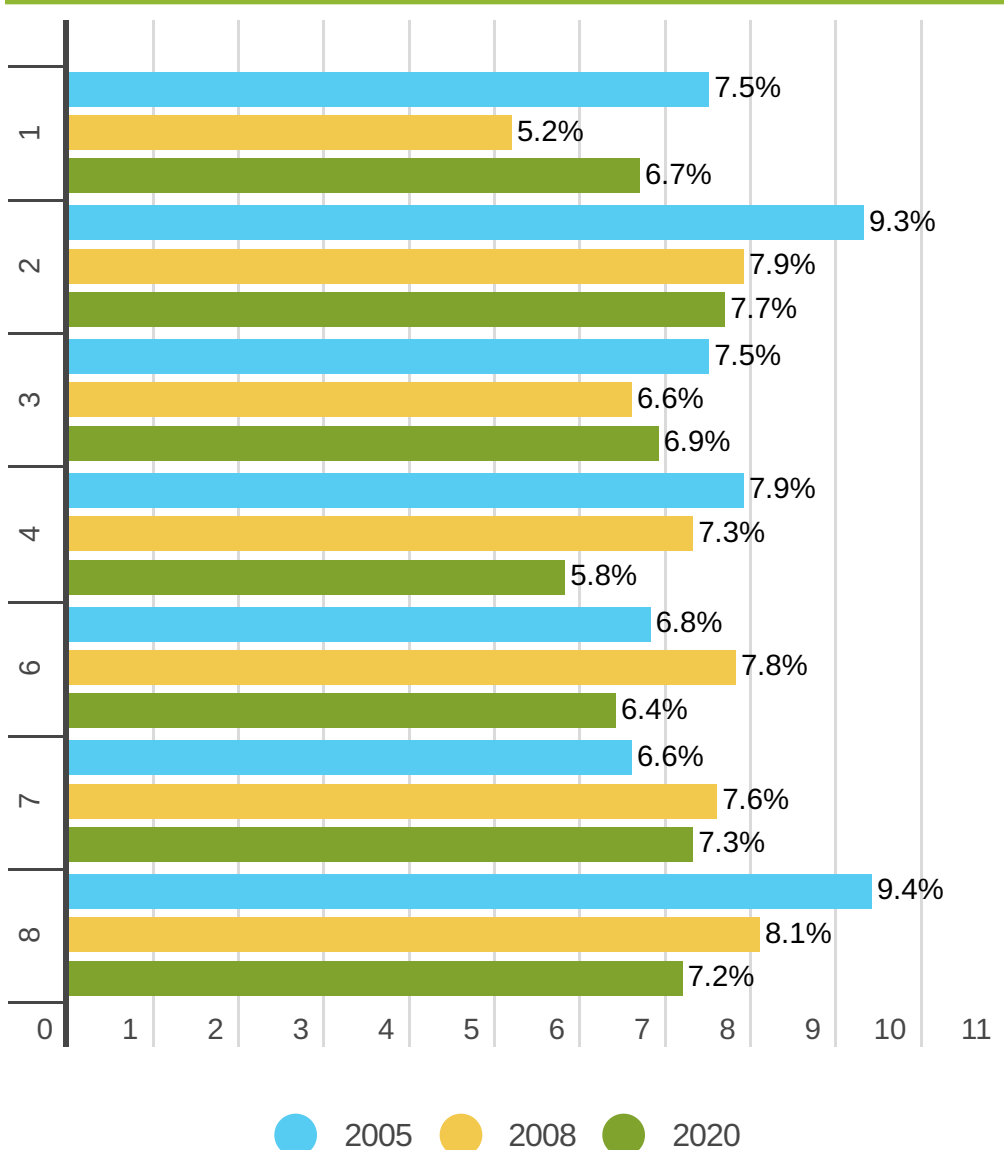
Percent of major concerns reported by gender.

Figure 4: Major Developmental Concerns by Child Age



Percent of major concerns reported by age group.

Figure 5: Major Developmental Concerns by SPA

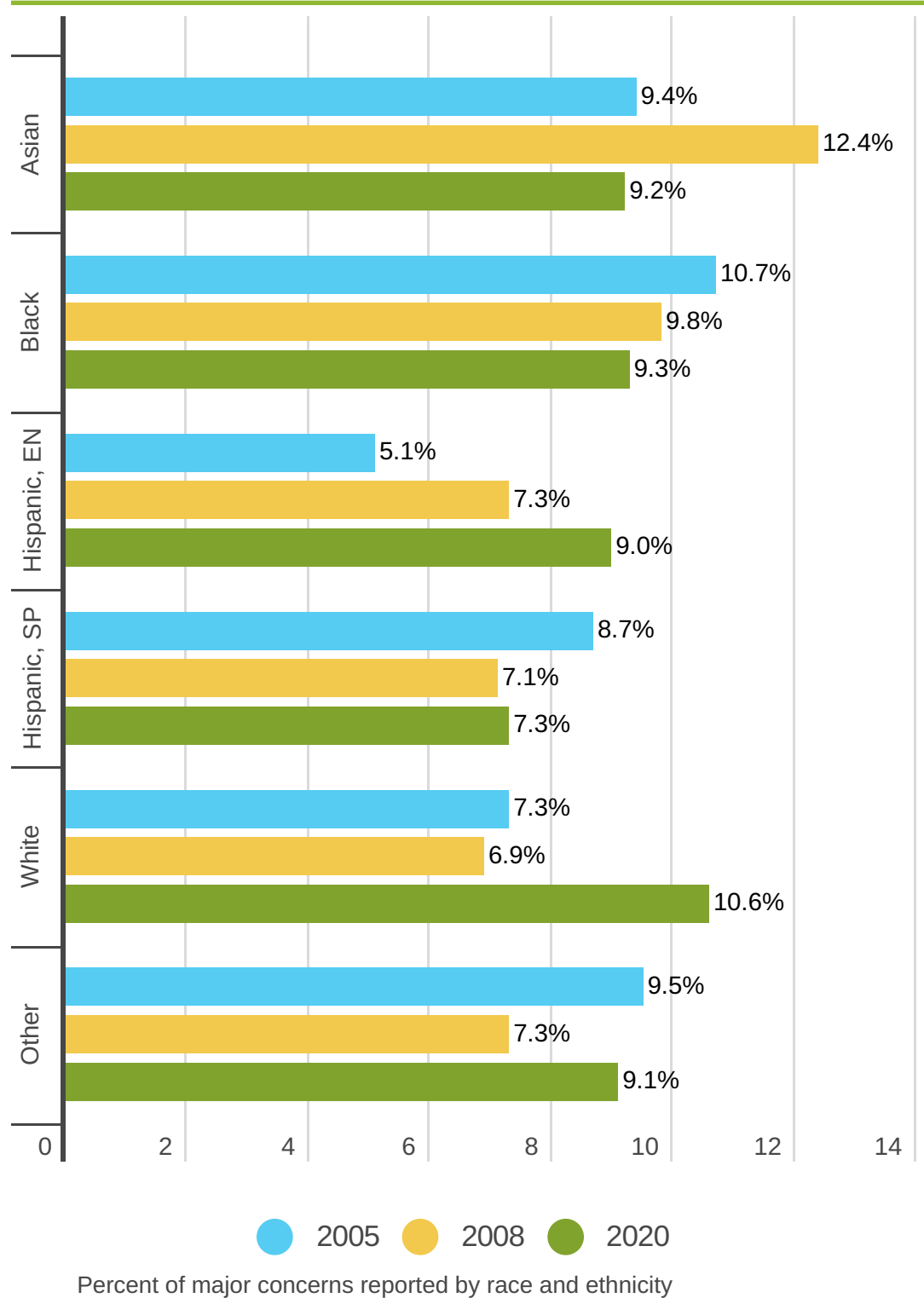


Percent of children with a major concern reported by SPA. SPA 5 not shown due to inadequate sample size.

Developmental concerns were highest among male children in every survey year and this increased in 2020 (Figure 3). Studies have shown that developmental delays and disabilities are most prevalent in male children and the data from the survey mirrors these findings in LAC⁹. Similarly, report of concerns increase as children get older, as seen in Figure 4. Reports of major concerns dropped for 1 year old children but increased for all other age groups in 2020. Figure 5 shows major concerns by SPA.

When looking at differences by race and ethnicity, Hispanic English-speaking, Other race and White WIC participants were more likely to report a major concern in 2020 compared to 2008 (Figure 6). The largest increase in major concerns reported was among White WIC participants. Asians and Blacks were the groups reporting fewer major concerns compared to previous years. As studies have shown disparities in early detection and access to services in certain racial ethnic groups, further analysis is needed to understand why these groups were reporting fewer concerns while other racial ethnic groups reported similar or more major concerns¹⁰.

Figure 6: Major Concerns by Race and Ethnicity

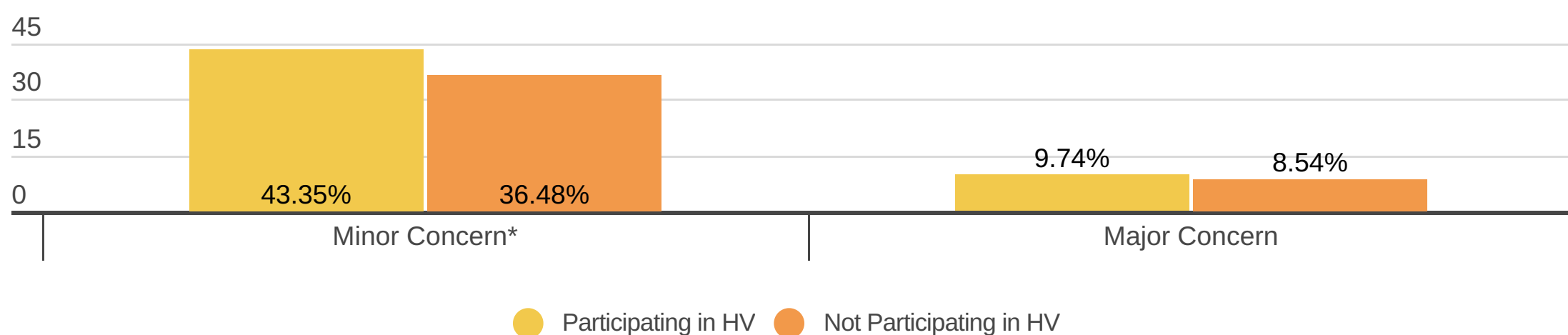


Percent of major concerns reported by race and ethnicity

Developmental Concerns and Home Visiting

The 2020 Los Angeles County WIC survey collected data on home visiting participation and changes related to the COVID-19 pandemic. According to the National Conference of State Legislatures, home visiting programs are a "prevention strategy used to support pregnant moms and new parents to promote infant and child health, foster educational development and school readiness, and help prevent child abuse and neglect"¹¹. Studies have shown a connection between home visiting and increased parental awareness of and ability to identify developmental concerns in their child. The question to evaluate home visitation read: "During [child's] first year, did any professional visit your home to provide information about parenting NAME, such as a nurse, social worker or home visitor?" Analysis of this question for children of all ages showed that 1 in 5 households participated in home visiting during the child's first year. Of these, 13% (151) were children under 1 year of age who would have been actively participating in home visiting prior to or during the COVID-19 pandemic. Those participating in home visiting were more likely to report minor and major developmental concerns (Figure 7). The difference in recognizing and reporting minor concerns was substantially and significantly higher for those families engaged in home visiting.

Figure 7: Major Concerns and Minor Concerns Reported by Participation in Home Visiting Program



Percent of all households who participated in home visiting grouped by level of concern reported. Among households with children less than 1 year old who were participating in home visiting during child's first year during the COVID-19 pandemic in 2020 (n=151), 60% experienced a change in their home visiting caused by the pandemic. Forty percent of the households that would be participating in home visiting just prior to or during the pandemic reported that the visits continued by phone or video while 17% reported the visits stopped entirely due to concerns related to COVID-19. * p<.05

These results suggest that home visiting has a direct impact on the reporting of concerns made by parents. It is critical that developmental concerns are caught early, providing the most optimal window for early intervention. A critical role of home visiting as it relates to developmental concerns is to assist families in early detection and to connect families to resources when concerns are identified. By strengthening referral pathways to get more families access to home visiting programs, more families will benefit from early intervention and better access to resources.

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