



BIRTH OUTCOMES

Premature birth can lead to lifelong developmental and intellectual disabilities for babies. In the first few years of life, babies' brains are forming the neural connections for social, emotional, cognitive, and language development that shape their capacity to read by third grade and subsequently access their full potential.

Very Preterm

32 weeks

Moderately Preterm

34 weeks

Late Preterm

36 weeks

Early Term

39 weeks

Full Term



Babies born prior to 39 weeks of gestation are more likely to experience **poor health outcomes** than those born at full term.

Obstetrics & Gynecology [2013]



Increased parent-infant language interactions in the NICU is associated with improved language and cognitive outcomes of preterm babies at 18 months of age.

Pediatrics [2014]



Children born at 30 weeks are 3.5X more likely to be diagnosed with **Attention Deficit Hyperactivity Disorder** than children born at 40 weeks, while those born at 25 weeks are almost 6X more likely.

Pediatrics [2015]



Early-term infants born at 37 weeks face a 33% increased risk of **severe reading impairment** compared to 3% of those born at 40 weeks.

Pediatrics [2012]

Late-preterm babies born between 34 to 36 weeks are:

36% more likely to have a developmental delay or disability;

19% more likely to be suspended in kindergarten; and

10 - 13% more likely to be placed in special education and retained in kindergarten.

Pediatrics [2009]



Newborns admitted to a neonatal intensive care unit (NICU) are **6X** more likely at 36 months to develop disorganized attachment than their counterparts—an indicator highly predictive of later mental health disorders.

Early Human Development [2015]



Kangaroo Mother Care (continuous skin-to-skin contact between parent and infant) for preterm and low-birthweight infants is linked to better school attendance, reduced hyperactivity, and less aggressiveness in young adults.

Pediatrics [2017]

Children born before 28 weeks of gestation, but without severe neurodevelopmental disorders, are still up to 8X more likely to have symptoms indicating **mental health problems** by age 11.



Pediatrics [2016]



Participating in a shared reading program in a NICU significantly reduces a child's likelihood of hyperactivity, separation anxiety, and behavior problems; improves attachment; and provides parents with an **increased sense of control and a source of comfort**.

Journal of Developmental and Behavioral Pediatrics [2011]; Reading Research Quarterly [1995]



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When we uncover underlying factors that affect a child's ability to read, we increase our opportunity to improve outcomes. Here are just a few actions that are impacting those factors.



Develop and support efforts that increase the number of infants and toddlers who receive Language Nutrition from their parents and caregivers.



Provide Language Nutrition coaching for parents of premature babies in NICUs.



Provide opportunities for parents of infants admitted to a NICU to share reading experiences with their babies.



Expand the use of Centering Pregnancy, an integrated approach to prenatal care in a group setting incorporating peer support and education, which is shown to decrease the likelihood of preterm birth at no additional cost to parents.



Promote the understanding of waiting until 39 weeks of gestation to give birth, unless medically indicated.



Support Kangaroo Mother Care (continuous skin-to-skin contact between parent and infant) for preterm and low-birthweight infants to improve physical, social, and emotional development, which is linked to better school attendance, reduced hyperactivity, and less aggressiveness in young adults.



Promote and increase utilization of the statewide Planning for Healthy Babies program, developed by the Georgia Department of Community Health, to help reduce the number of low-birthweight and preterm infants.



Continue to invest in Children 1st—Georgia's single entry point into all public health services and a wide range of community programs for children birth to 5. Children 1st is the primary way for all children born in Georgia to be identified for conditions that would otherwise result in poor health and development.