

## Health Care

*[Reprinted from Birth to Five Policy Alliance](#)*

Having access to quality health care is critically important for children below the ages of five years old. Read below for a brief summary of key research findings related to effective health services and complications from lack of care.

- **Infants (ages 0 to 2) who are not up-to-date on well-child visits are more likely to be hospitalized unnecessarily.** Reasons for avoidable hospitalizations include acute upper-respiratory infections, lower respiratory infections, gastroenteritis and dehydration, asthma and chronic bronchitis, and acute injury or poisoning. Even sporadic well-child visits that are not up-to-date are associated with lower rates of avoidable hospitalization, compared to children who do not receive any well-child visits.[3]
- **Being up-to-date on well-child visits from birth to 7 months of age decreases the chance that an infant will visit a hospital emergency room.**[4]
- **Vaccines are extremely effective for preventing the targeted illness.** For example, prior to 2006, the rotavirus was responsible for 55,000 to 70,000 hospitalizations, and 205,000 to 272,000 emergency department visits among children under five years of age. A rotavirus vaccine was introduced in 2006 and by the 2007-2008 rotavirus season the incidence of disease had decreased by more than half. Also, the rotavirus season prior to 2006 was 26 weeks long, but was shortened to only 14 weeks long after the vaccine was introduced.[2]
- **The positive health effects of having health insurance among children are equivalent, in monetary terms, to a 54% increase in income.**[1]
- **Earlier detection of special needs is linked to more positive development for children.** For example, identifying permanent childhood hearing impairments by two weeks of age (versus 9 months of age) is associated with more positive developmental outcomes including better social development, gross motor development, and overall better quality of life.[5]

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3. Hakim, R. B., & Bye, B. V. (2001). Effectiveness of compliance with pediatric preventive care guidelines among Medicaid beneficiaries. *Pediatrics*, 108(1), 90-97.
4. Hakim, R. B., & Ronsaville, D. S. (2002). Effect of compliance with health supervision guidelines among US infants on emergency department visits. *Archives of Pediatrics and Adolescent Medicine*, 156(10), 1015-1020. doi: poa20085 [pii]
5. Korver, A. M., Konings, S., Dekker, F. W., Beers, M., Wever, C. C., Frijns, J. H., Oudesluys-Murphy, A. M. Newborn hearing screening vs later hearing screening and developmental outcomes in children with permanent childhood hearing impairment. *Journal of the American Medical Association*, 304(15), 1701-1708. doi: 10.1001/jama.2010.1501