# The State of Alaska's Babies W



Where children are born can affect their chances for a strong start in life. Babies need good health, strong families, and positive early learning experiences to foster their healthy brain development and help them realize their full potential.

This state profile provides a snapshot of how infants, toddlers, and their families are faring in each of these three policy domains. Within each domain, view data for selected child, family, and policy indicators compared to national averages. The profile begins with a demographic description of the state's babies and families to offer the broadest context for exploring what may be very different experiences of the state's youngest children.

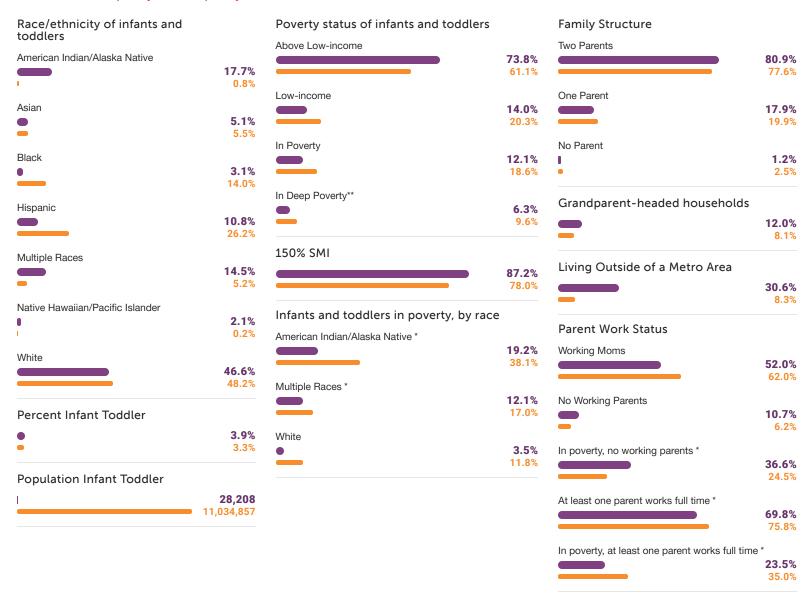
### **Demographics**

Alaska National Average

#### Infants and toddlers in Alaska

Alaska is home to 28,208 babies, representing 3.9 percent of the state's population. As many as 26.1 percent live in households with incomes less than twice the federal poverty line (in 2021, about \$55,000 for a family of four<sup>1</sup>), placing them at economic disadvantage. The state's youngest children are diverse and are raised in a variety of family contexts and household structures.

1. Source: U.S. Census Bureau, Population Division. Poverty Thresholds by Size of Family and Number of Children. https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html



<sup>\*</sup>Numbers are small; use caution in interpreting.

Note: N/A indicates Not Available

<sup>\*\*</sup>Subset of "In Poverty"

### **Good Health**



### How are Alaska's babies faring in Good Health?

Supporting babies' and mothers' physical and mental health provides the foundation for infants' lifelong physical, cognitive, emotional, and social well-being. Babies' brains grow rapidly in the first years of life, and, in these early years, the brain works with other organs and organ systems to set the stage for subsequent development and health outcomes. Equitable access to good nutrition during the prenatal period and first years of life is key to ensure that babies receive the nourishment and care they need for a strong start in life. Strengthening equitable access to integrated, affordable maternal, pediatric, and family health care is also essential to meeting babies' and families' health and developmental needs.

Alaska falls in the Reaching Forward (R) tier for the Good Health domain. A state's ranking is based on indicators of maternal and child health, including health care coverage, prenatal care, birth outcomes, and receipt of recommended preventive care as well as nutrition and mental health. Alaska performs better than national averages on key indicators, such as the percentage of babies born at low birth weight and babies breastfed at 6 months. The state is performing worse than national averages on indicators such as the percentage of uninsured babies in families with low income and babies receiving recommended vaccinations.

### **Key Indicators of Good Health**



<sup>\*</sup>Numbers are small; use caution in interpreting.

Good Health Policy in Alaska  Medicaid expansion state				Yes 🗸
CHIP maternal coverage for unborn child option NR				No X
Postpartum extension of Medicaid coverage			No law beyon	nd mandatory 60 day
Pregnant workers protection			:	State employees onl
State Medicaid policy for maternal depression screening in well-child visits				No polic
Medicaid plan covers social-emotional screening for young children				Yes ✓
Medicaid plan covers IECMH services at home				Yes ✓
Medicaid plan covers IECMH services at pediatric/family medicine practic	es			No ×
Medicaid plan covers IECMH services in early childhood education settings	S			No X
Note: N/A indicates Not Available				
All Good Health Indicators for Alaska			State Indicator	National Av
Health Care Coverage and Affordability				
R Eligibility limit (% FPL) for pregnant women in Medicaid	<b>205.0</b> 200.0	G	Uninsured low-income infants and toddlers	<b>12.3</b> 9 5.29
R Medical home	<b>52.9%</b> 51.0%			
Nutrition				
Infants ever breastfed NR	<b>90.9%</b> 83.8%	W	Infants breastfed at 6 months	<b>63.3%</b> 55.0%
High weight-for-length in WIC NR	14.2% NA	R	WIC coverage for infants	<b>94.5</b> % 98.4%
WIC coverage for one-year-olds	<b>76.5%</b> 64.5%	R	WIC coverage for two-year-olds	<b>43.7</b> % 48.1%
Maternal Health				
Late or no prenatal care received	<b>5.9%</b> 6.4%		Maternal mortality rate (deaths per 100,000 live births)	IR NA
Mothers reporting less than optimal mental health	<b>22.4%</b> 21.9%			
Children's Health				
Babies born preterm	9.8% 10.1%	W	Babies with low birthweight	<b>6.6%</b> 8.2%

Babies born pretermInfant mortality rate (deaths per 1,000 live births)

Preventive medical care received

**5.1** • Preventive dental care received 5.4

**95.1% G** Received recommended vaccines 89.3%

**65.0%** 72.5%

**35.3%** 33.5%

Note: N/A indicates Not Available.

# **Strong Families**

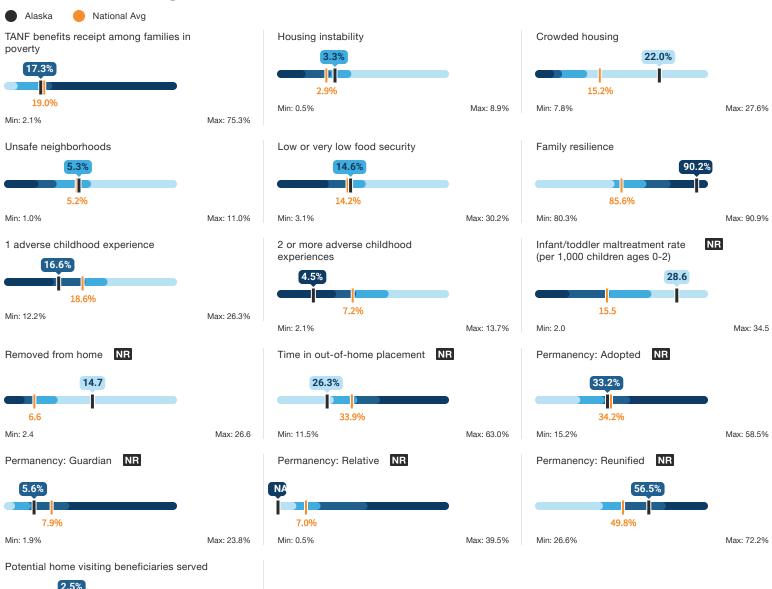


### How are Alaska's babies faring in Strong Families?

Young children develop in the context of their families, where stability, safety, and supportive relationships nurture their growth. All families may benefit from parenting supports, but families with low income and in historically marginalized communities of color face additional challenges that impact their babies' immediate and future well-being. Many policies can be designed to address these disparities by race, ethnicity, and income, including the provision of safe and stable housing, home visiting services, family-friendly employer policies, economic support for families with low income, and tax credits that benefit families with young children.

Alaska falls in the Reaching Forward (R) tier of states when it comes to indicators of Strong Families. The state's ranking in this domain reflects indicators on which it is performing better than the national average, such as the percentage of babies who live in families that report being resilient and babies who have had two or more adverse experiences. Alaska is doing worse than the national average on indicators such as the percentage of babies experiencing housing instability (moved 3 or more times) and babies living in crowded housing.

#### **Key Indicators of Strong Families**



Max: 6.2%

2.1%

Min: 0.1%

<sup>\*</sup>Numbers are small; use caution in interpreting.

Strong Families Policy in Alaska Paid family leave		No	o <b>X</b>
Paid sick time that covers care for child		No	o <b>X</b>
TANF work exemption		Yes	s 🗸
State child tax credit		No	o <b>X</b>
State Earned Income Tax Credit		No	o <b>X</b>
Note: N/A indicates Not Available			
All Strong Families Indicators for Alaska		State Indicator	al Avg
Basic Needs			
TANF benefits receipt among families in poverty	<b>17.3%</b> 19.0%	· · · · · · · · · · · · · · · · · · ·	<b>3.3%</b> 2.9%
<b>G</b> Crowded housing	22.0% 15.2%	· ·	1.8% 5.0%
R Low or very low food security	14.6% 14.2%		
Child Well-being and Resilience			
W Family resilience	<b>90.2%</b> 85.6%		5. <b>6%</b> .8.6%
2 or more adverse childhood experiences	4.5% 7.2%	Infant/toddler maltreatment rate (per 1,000 children ages 0-2)	<b>28.6</b> 15.5
Removed from home NR	<b>14.7</b> 6.6		<b>5.3%</b> 33.9%
Permanency: Adopted NR	<b>33.2%</b> 34.2%	<u> </u>	5.6% 7.9%
Permanency: Relative NR	<b>NA</b> 7.0%		5.5% 19.8%

2.5% 2.1%

Note: N/A indicates Not Available.

O Potential home visiting beneficiaries served

# **Positive Early Learning Experiences**

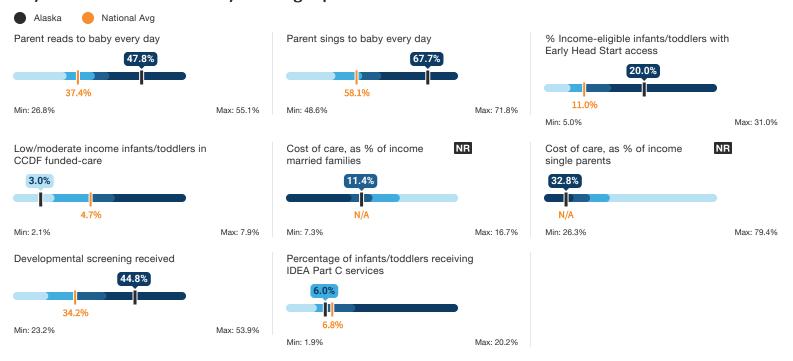


### How are Alaska's babies faring in Positive Early Learning?

Infants and toddlers learn through interactions with the significant adults in their lives and active exploration of enriching environments. The quality of babies' early learning experiences at home and in other care settings can impact their cognitive and social-emotional development as well as early literacy. High-quality early childhood care can strengthen parents' interactions with their children in the home learning environment and support parents' ability to go to work or attend school. Equitable access to high-quality care across factors like race, ethnicity, and income ensures all infants and toddlers have the opportunity for optimal development. However, disparities in access to high-quality care remain across many states and communities in the United States.

Alaska scores in the Working Efficiently (W) tier for Positive Early Learning Experiences. The state's ranking in this domain reflects indicators on which it is performing better than the national average, such as the percentage of infants/toddlers who received a developmental screening in the past year. Alaska is doing worse than the national average on indicators such as the percentage of babies in families with incomes equal to or below 150 percent of the state median income who received a child care subsidy. Beginning with the 2022 profile, infant care costs as a percentage of the state's median income for single and married parents are not factored into the ranking.

#### **Key Indicators of Positive Early Learning Experiences**



<sup>\*</sup>Numbers are small; use caution in interpreting.

		EHS standards met for 3 of	of 3 age group	
Level of teacher qualification required by the state beyond a high scho	ool diploma	No credential beyond a high school diplom		
Group size		EHS standards met for 3 of	of 3 age group	
Infant/toddler professional credential NR			No 🗙	
Families above 200% of FPL eligible for child care subsidy			Yes 🗸	
State reimburses center-based child care			No X	
At-risk children included in Part C eligibility definition NR			No X	
Note: N/A indicates Not Available				
All Positive Early Learning Experiences Indic				
Parent reads to baby every day	<b>47.8%</b> 37.4%	Parent sings to baby every day	<b>67.7%</b> 58.1%	
•		Parent sings to baby every day		
•		Parent sings to baby every day  G Low/moderate income infants/toddlers in CCDF-funded care		
Access to Early Learning Programs  W % Income-eligible infants/toddlers with Early Head Start	37.4% <b>20.0%</b>		3.0% 4.79 32.8%	
Access to Early Learning Programs  % Income-eligible infants/toddlers with Early Head Start access	20.0% 11.0% 11.4%	Low/moderate income infants/toddlers in CCDF-funded care	58.1° 3.0%	

34.2%

NA

100.0%

6.8%

Note: N/A indicates Not Available.

Timeliness of Part C services NR