# The State of Arkansas's Babies G



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.

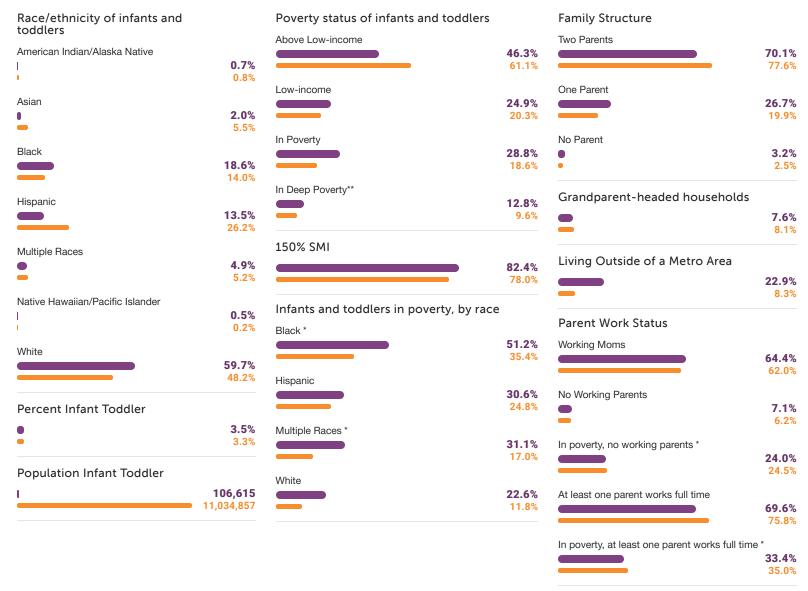
# **Demographics**

Arkansas National Average

#### Infants and toddlers in Arkansas

Arkansas is home to 106,615 babies, representing 3.5 percent of the state's population. As many as 53.7 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**

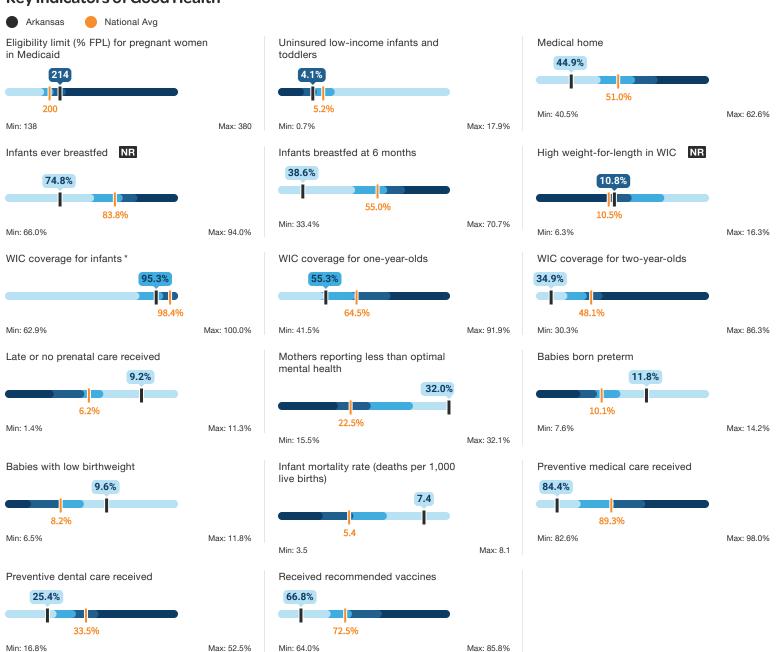


## How are Arkansas's babies faring in Good Health?

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.

Arkansas falls in the Getting Started (G) 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. Arkansas performs better than national averages on key indicators, such as the percentage of uninsured babies in families with low incomes and Medicaid income eligibility level for pregnant women. The state is performing worse than national averages on indicators such as the percentage of women receiving late or no prenatal care and the infant mortality rate.

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



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

Good Health Policy in Arkansas			
Medicaid expansion state			Yes 🗸
CHIP maternal coverage for unborn child option NR			Yes ✓
Postpartum extension of Medicaid coverage		No law beyond n	nandatory 60 days
Pregnant workers protection			No protections
State Medicaid policy for maternal depression screening in well-child	visits		No policy
Medicaid plan covers social-emotional screening for young children			No X
Medicaid plan covers IECMH services at home			Yes 🗸
Medicaid plan covers IECMH services at pediatric/family medicine pr	actices		Yes 🗸
Medicaid plan covers IECMH services in early childhood education se	ettings		No 🗙
Note: N/A indicates Not Available			
All Good Health Indicators for Arkansas		State Indicator	National Avg
Health Care Coverage and Affordability			
Eligibility limit (% FPL) for pregnant women in Medicaid	<b>214.0</b> 200.0	O Uninsured low-income infants and toddlers	<b>4.1%</b> 5.2%
<b>G</b> Medical home	<b>44.9%</b> 51.0%		
Nutrition			
Infants ever breastfed NR	<b>74.8%</b> 83.8%	<b>G</b> Infants breastfed at 6 months	<b>38.6%</b> 55.0%
High weight-for-length in WIC NR	10.8% NA	R WIC coverage for infants	<b>95.3%</b> 98.4%
R WIC coverage for one-year-olds	<b>55.3%</b> 64.5%	<b>G</b> WIC coverage for two-year-olds	34.9% 48.1%
Maternal Health			
<b>G</b> Late or no prenatal care received	<b>8.7%</b> 6.4%	Maternal mortality rate (deaths per 100,000 live births)	NA 23.8
<b>G</b> Mothers reporting less than optimal mental health	<b>30.8%</b> 21.9%		
Children's Health			
<b>G</b> Babies born preterm	11.8% 10.1%	<b>G</b> Babies with low birthweight	<b>9.6%</b> 8.2%

7.4

84.4%

89.3%

**G** Preventive dental care received

**G** Received recommended vaccines

**25.4%** 33.5%

66.8%

72.5%

Note: N/A indicates Not Available.

**G** Preventive medical care received

**G** Infant mortality rate (deaths per 1,000 live births)

# **Strong Families**



## How are Arkansas'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.

Arkansas falls in the Getting Started (G) 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 living in crowded housing. Arkansas 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 who have had two or more adverse experiences.

#### **Key Indicators of Strong Families** National Avg Arkansas TANF benefits receipt among families in Crowded housing Housing instability poverty 5.3% 4.1% 15.2% 19.0% Min: 0.5% Max: 8.9% Min: 7.8% Max: 27.6% Max: 75.3% Unsafe neighborhoods Low or very low food security Family resilience 85.1% 14.1% Min: 1.0% Max: 11.0% Min: 3.1% Max: 30.2% Min: 80.3% Max: 90.9% 1 adverse childhood experience 2 or more adverse childhood Infant/toddler maltreatment rate NR experiences (per 1,000 children ages 0-2) 21.0% 11.3% 28.1 18.6% 7.2% 15.5 Min: 12.2% Max: 26.3% Min: 2.1% Max: 13.7% Min: 2.0 Max: 34.5 Removed from home Time in out-of-home placement Permanency: Adopted 10.3 32.1% İd 6.6 33.9% 34.2% Min: 2.4 Max: 26.6 Min: 11.5% Max: 63.0% Min: 15.2% Max: 58.5% Permanency: Guardian Permanency: Relative Permanency: Reunified 45.5% 7.9% 7.0% 49.8% Max: 23.8% Min: 0.5% Min: 26.6% Min: 1.9% Max: 39.5% Max: 72.2% Potential home visiting beneficiaries served 2.3%

Max: 6.2%

2.1%

Min: 0.1%

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

	rong Families Policy in Arkansas d family leave					No 🗶	
Pai	d sick time that covers care for child					No 🗙	
TAN	TANF work exemption						
Sta	te child tax credit					No 🗙	
Sta	te Earned Income Tax Credit					No 🗙	
No	te: N/A indicates Not Available						
Αl	Strong Families Indicators for Arkansas			State Indicator	Natio	onal Avg	
Ва	sic Needs						
G	TANF benefits receipt among families in poverty	<b>4.1%</b> 19.0%	G	Housing instability		<b>5.3%</b> 2.9%	
R	Crowded housing	13.2% 15.2%	R	Unsafe neighborhoods		<b>5.5%</b> 5.0%	
0	Low or very low food security	<b>14.1%</b> 14.2%					
Ch	ild Well-being and Resilience						
G	Family resilience	<b>85.1%</b> 85.6%		1 adverse childhood experience NR		<b>21.0%</b> 18.6%	
G	2 or more adverse childhood experiences	11.3% 7.2%		Infant/toddler maltreatment rate (per 1,000 children ages 0-2)	NR	28.1 15.5	
	Removed from home NR	<b>10.3</b> 6.6		Time in out-of-home placement NR		<b>47.0%</b> 33.9%	
	Permanency: Adopted NR	<b>32.1%</b> 34.2%		Permanency: Guardian NR		<b>4.5%</b> 7.9%	
	Permanency: Relative NR	<b>17.2%</b> 7.0%		Permanency: Reunified NR		<b>45.5%</b> 49.8%	
0	Potential home visiting beneficiaries served	2.3% 2.1%					

# **Positive Early Learning Experiences**

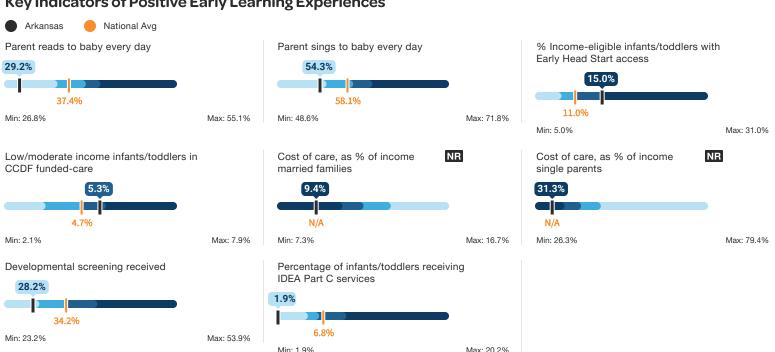


## How are Arkansas's babies faring in Positive Early Learning?

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.

Arkansas scores in the Getting Started (G) 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 babies in families below 100 percent of the federal poverty line with access to Early Head Start. Arkansas is doing worse than the national average on indicators such as the percentage of parents who read to their babies daily. 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.

	sitive Early Learning Experiences Policy in	EHS standards met for (	EHS standards met for 0 of 3 age groups No credential beyond a high school diploma		
Leve	el of teacher qualification required by the state beyond a high scho	No credential beyond a hig			
Gro	up size	EHS standards met for (	EHS standards met for 0 of 3 age groups		
Infa	nt/toddler professional credential NR			Yes ✓	
Fam	ilies above 200% of FPL eligible for child care subsidy			Yes ✓	
Stat	e reimburses center-based child care			No X	
At-ri	sk children included in Part C eligibility definition NR			No X	
Not	e: N/A indicates Not Available				
_	Positive Early Learning Experiences Indicative Early Learning Experiences Indicative Early Learning	ators for Ark	State Indicator	National Avg	
G	Parent reads to baby every day	<b>29.2%</b> 37.4%	<b>G</b> Parent sings to baby every day	<b>54.3%</b> 58.1%	
Ac	cess to Early Learning Programs				
0	% Income-eligible infants/toddlers with Early Head Start access	15.0% 11.0%	O Low/moderate income infants/toddlers in CCDF-funded care	<b>5.3%</b> 4.7%	
	Cost of care, as % of income married families NR	9.4% NA	Cost of care, as % of income single parents NR	31.3% NA	
Eai	·ly Intervention				
G	Developmental screening received	<b>28.2%</b> 34.2%	<b>G</b> Percentage of infants/toddlers receiving IDEA Part C services	1.9% 6.8%	

91.5% NA

Note: N/A indicates Not Available.

Timeliness of Part C services NR