The State of Montana's Babies **R**



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

Montana National Average

Infants and toddlers in Montana

Montana is home to 33,695 babies, representing 3.1 percent of the state's population. As many as 32 percent live in households with incomes less than twice the federal poverty line (in 2021, about \$55,000 for a family of four¹), 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/timeseries/demo/income-poverty/historical-poverty-thresholds.html

Race/ethnicity of infants and toddlers		Poverty status of infants and toddlers
		Above Low-income
American Indian/Alaska Native	8.6 % 0.8%	
Asian		Low-income
	0.9% 5.5%	_
Black		In Poverty
	0.7% 14.0%	—
Hispanic		In Deep Poverty**
	7.3% 26.2%	-
Multiple Races		150% SMI
	5.6%	
-	5.2%	
Native Hawaiian/Pacific Islander		
1	0.1%	Infants and toddlers in poverty, by rac
1	0.2%	White
White		-
	76.7% 48.2%	
	40.2%	
Percent Infant Toddler		
•	3.1%	
• 	3.3%	
Population Infant Toddler		
	33,695 11,034,857	
Population Infant Toddler		

Family Structure Two Parents 68.0% 86.8% 61.1% 77.6% One Parent 18.4% 12.5% 20.3% 19.9% No Parent 13.6% 0.8% 1 18.6% 2.5% Grandparent-headed households 5.1% 9.6% 5.9% 8.1%

Living Outside of a Metro Area

69.3% 78.0%

9.6%

11.8%

race

	76.4% 8.3%
Parent Work Status	
Working Moms	

- - - -

	74.8 %
	62.0 %
No Working Parents	
	5.3%
-	6.2 %
In poverty, no working parents *	
	23.3 %
	24.5%
At least one parent works full time	
	73.7%
	75.8 %
In poverty, at least one parent works full ti	mo *
in poverty, at least one parent works full th	

31.7% 35.0%

*Numbers are small: use caution in interpreting. **Subset of "In Povertv" Note: N/A indicates Not Available

G R O W

Good Health

How are Montana'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.

Montana 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. Montana performs better than national averages on key indicators, such as the percentage of babies receiving preventative dental care and babies with a medical home. The state is performing worse than national averages on indicators such as the Medicaid income eligibility for pregnant women and percentage of mothers reporting less than favorable mental health.

Key Indicators of Good Health



*Numbers are small; use caution in interpreting.

Good Health Policy in Montana Medicaid expansion state

Medicaid expansion state	Yes 🗸
CHIP maternal coverage for unborn child option NR	No 🗙
Postpartum extension of Medicaid coverage	No law beyond mandatory 60 days
Pregnant workers protection	No protections
State Medicaid policy for maternal depression screening in well-child visits	Recommended
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 practices	Yes 🗸
Medicaid plan covers IECMH services in early childhood education settings	Yes 🗸
Note: N/A indicates Not Available	

State Indicator

National Avg

All Good Health Indicators for Montana

Health Care Coverage and Affordability				
G Eligibility limit (% FPL) for pregnant women in Medicaid	162.0 200.0	G Uninsured low-income infants and toddlers	7.4% 5.2%	
W Medical home	56.8% 51.0%			
Nutrition				
Infants ever breastfed NR	85.3% 83.8%	Infants breastfed at 6 months	58.7% 55.0%	
High weight-for-length in WIC NR	8.8% NA	G WIC coverage for infants	74.7% 98.4%	
G WIC coverage for one-year-olds	49.0% 64.5%	R WIC coverage for two-year-olds	42.7% 48.1%	
Maternal Health				
• Late or no prenatal care received	5.9% 6.4%	Maternal mortality rate (deaths per 100,000 live births) NR	NA 23.8	
G Mothers reporting less than optimal mental health	31.5% 21.9%			
Children's Health				
O Babies born preterm	9.8% 10.1%	O Babies with low birthweight	7.7% 8.2%	
Infant mortality rate (deaths per 1,000 live births)	5.0 5.4	Preventive dental care received	42.8% 33.5%	
G Preventive medical care received	86.3% 89.3%	Received recommended vaccines	71.0% 72.5%	

Note: N/A indicates Not Available.



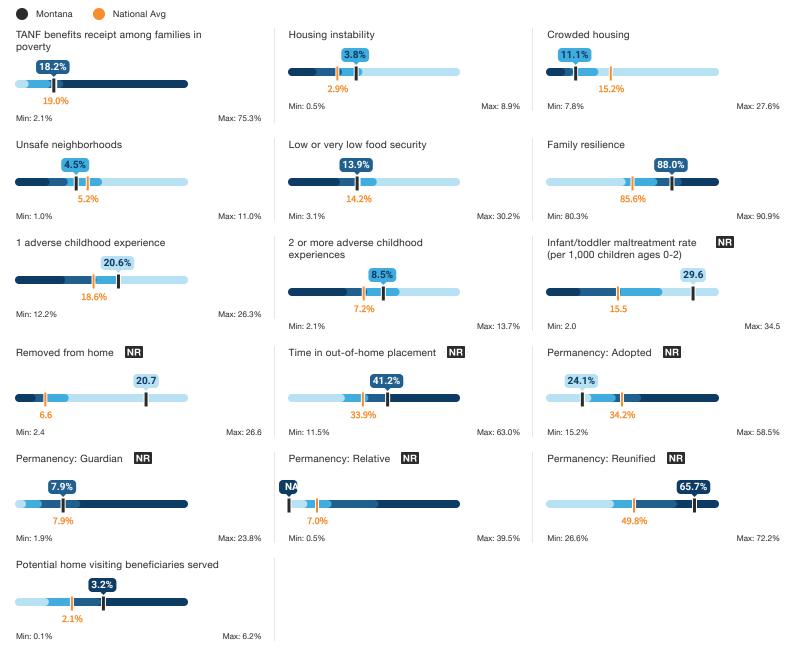
Strong Families

How are Montana'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.

Montana 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 living in crowded housing and babies who live in families that report being resilient. Montana is doing worse than the national average on indicators such as the percentage of babies who have had two or more adverse experiences and babies experiencing housing instability (moved 3 or more times).

Key Indicators of Strong Families



*Numbers are small; use caution in interpreting.

Strong Families Policy in Montana

Paid family leave	No	×
Paid sick time that covers care for child	No	×
TANF work exemption	No	×
State child tax credit	No	×
State Earned Income Tax Credit	Yes	✓
Note: N/A indicates Not Available		

All Strong Families Indicators for Montana State Indicator National Avg

Basic Needs			
• TANF benefits receipt among families in poverty	18.2% 19.0%	R Housing instability	3.8% 2.9%
R Crowded housing	11.1% 15.2%	R Unsafe neighborhoods	5.0% 5.0%
O Low or very low food security	13.9% 14.2%		
Child Well-being and Resilience			
• Family resilience	88.0% 85.6%	1 adverse childhood experience NR	20.6% 18.6%
R 2 or more adverse childhood experiences	8.5% 7.2%	Infant/toddler maltreatment rate (per 1,000 children ages 0-2)	NR 29.6 15.5
Removed from home NR	20.7 6.6	Time in out-of-home placement NR	41.2% 33.9%
Permanency: Adopted NR	24.1% 34.2%	Permanency: Guardian NR	7.9% 7.9%
Permanency: Relative NR	NA 7.0%	Permanency: Reunified NR	65.7% 49.8%
W Potential home visiting beneficiaries served	3.2% 2.1%		

Note: N/A indicates Not Available.

Positive Early Learning Experiences



How are Montana'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.

Montana scores in the Improving Outcomes (O) 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. Montana is doing worse than the national average on indicators such as the percentage of infants and toddlers who received Individuals with Disabilities Education Act (IDEA) Part C services. 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



*Numbers are small; use caution in interpreting.

Positive Early Learning Experiences Policy in Montana Adult/child ratio

Adult/child ratio	EHS standards met for 2 of 3 age groups
Level of teacher qualification required by the state beyond a high school diploma	No credential beyond a high school diploma
Group size	EHS standards met for 0 of 3 age groups
Infant/toddler professional credential NR	Yes 🗸
Families above 200% of FPL eligible for child care subsidy	No 🗙
State reimburses center-based child care	No 🗙
At-risk children included in Part C eligibility definition NR	No 🗙
Note: N/A indicates Not Available	

All Positive Early Learning Experiences Indicators for Montana



Activities that Support Early Learning

Activities that support Early Eculinia			
Parent reads to baby every day	44.7% 37.4%	R Parent sings to baby every day	58.8% 58.1%
Access to Early Learning Programs			
% Income-eligible infants/toddlers with Early Head Start access	28.0% 11.0%	G Low/moderate income infants/toddlers in CCDF-funded care	2.5% 4.7%
Cost of care, as % of income married families NR	11.6% NA	Cost of care, as % of income single parents NR	40.2% NA
Early Intervention			
O Developmental screening received	36.4% 34.2%	G Percentage of infants/toddlers receiving IDEA Part C services	2.4% 6.8%
Timeliness of Part C services NR	97.6% NA		

Note: N/A indicates Not Available.