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
Infants and toddlers in Massachusetts

Overview
Massachusetts is home to 214,419 babies, representing 3.1 percent of the state’s population. As many as 26.5 percent live in households with incomes less than twice the federal poverty line (in 2018, about $50,000 a year for a family of four), placing them at economic disadvantage. America’s youngest children are diverse and are raised in a variety of family contexts. In Massachusetts, 41.9 percent of babies are children of color and less than 1 percent of the state’s infants and toddlers live in rural areas. A broad array of policies and services are required to ensure all of them have an equitable start in life.
What is Good Health?

Good physical and mental health provide the foundation for babies to develop physically, cognitively, emotionally, and socially. The rate of brain growth is faster in the first 3 years than at any later stage of life, and this growth sets the stage for subsequent development. Access to good nutrition and affordable maternal, pediatric, and family health care is essential to ensure that babies receive the nourishment and care they need for a strong start in life.

Massachusetts falls in the Working Effectively (W) 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 food security, nutrition, and mental health. Massachusetts performs better than national averages on key indicators, such as a lower infant mortality rate and the percentage of babies receiving recommended vaccinations. The state is performing worse than national averages on indicators such as the percentage of babies receiving preventive dental care. Massachusetts is a Medicaid expansion state.

Six Key Indicators of Good Health

- Infant mortality rate (deaths per 1,000 live births)
  - Min: 3.7
  - Max: 8.6
  - Massachusetts: 3.7
  - National average: 8.6

- Late or no prenatal care received
  - Min: 1.7
  - Max: 11.3
  - Massachusetts: 4.7
  - National average: 11.3

- Preterm births
  - Min: 7.8
  - Max: 14.2
  - Massachusetts: 8.9
  - National average: 14.2

- Babies with low birthweight
  - Min: 5.9
  - Max: 12.1
  - Massachusetts: 7.6
  - National average: 14.2

- Ever breastfed
  - Min: 60.5
  - Max: 92.4
  - Massachusetts: 84.3
  - National average: 84.3

Good Health Policy in Massachusetts

- 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
  - No

What Defines Strong Families?

Young children develop in the context of their families, where stability, safety, and supportive relationships nurture their growth. All families benefit from parenting supports, and many—particularly those challenged by economic instability—require access to additional resources that help them meet their children’s daily and developmental needs. Key supports include 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.

Massachusetts falls in the Working Effectively (W) 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 percentages of families in poverty with babies receiving TANF and babies who have had one adverse experience. Massachusetts is doing worse than the national average on indicators such as the percentage of babies who could benefit from home visiting receiving those services. Policy-wise, the state has implemented 4 of 5 policies that promote strong families, such as paid sick and family leave, Temporary Assistance to Needy Families (TANF) options, the Child Tax Credit, and Earned Income Tax Credit.

Six Key Indicators of Strong Families

- Family resilience
  - Min: 77.1
  - Max: 91.8
  - Massachusetts: 87.7
  - National average: 88.3

- TANF benefits receipt among families in poverty
  - Min: 2.7
  - Max: 11.3
  - Massachusetts: 65.5
  - National average: 88.3

- Crowded housing
  - Min: 5.6
  - Max: 28.4
  - Massachusetts: 11.3
  - National average: 11.3

- Infant/toddler maltreatment rate (per 1,000 infants/toddlers)*
  - Min: 2.0
  - Max: 38.1
  - Massachusetts: 29.5
  - National average: 56.2

- Time in out-of-home placement*
  - Min: 4.9
  - Max: 71.1
  - Massachusetts: 22.3
  - National average: 26.0

- Two or more adverse childhood experiences
  - Min: 1.2
  - Max: 20.9
  - Massachusetts: 1.6
  - National average: 1.4

Strong Families Policy in Massachusetts

- Paid family leave
  - Yes

- Paid sick time that covers care for child
  - Yes

- TANF Work Exemption
  - Yes

- State Child Tax Credit
  - No

- State Earned Income Tax Credit (EITC)
  - Yes
What Defines Positive Early Learning Experiences?

Infants and toddlers learn through play, active exploration of their environment, and, most importantly, through interactions with the significant adults in their lives. The quality of babies’ early learning experiences at home and in other care settings impacts how prepared they are for life-long learning and success. Parents who work or attend school require access to affordable, high-quality care options that foster their babies’ development. During this rapid period of growth, access to screening and early intervention is essential to address potential developmental delays.

Massachusetts scores in the Reaching Forward (R) 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 higher percentages of babies who received developmental screening and babies who receive IDEA Part C services. Massachusetts is doing worse than the national average on indicators such as the lower percentage of income-eligible babies with access to Early Head Start. Infant care costs as a percentage of the state’s median income for single and married parents also contribute to the ranking. The state offers child care subsidy assistance to families with incomes above 200 percent of the Federal Poverty Level.

Six Key Indicators of Positive Early Learning Experiences

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Massachusetts</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent reads to baby every day</td>
<td>42.7%</td>
<td>42.7%</td>
</tr>
<tr>
<td>Developmental screening received</td>
<td>39.2%</td>
<td>39.2%</td>
</tr>
<tr>
<td>Percentage of infants/toddlers receiving IDEA Part C services</td>
<td>28.0%</td>
<td>28.0%</td>
</tr>
<tr>
<td>Cost of care, as % of income</td>
<td>70.9%</td>
<td>70.9%</td>
</tr>
<tr>
<td>Low/moderate income infants/toddlers in CCDF funded-care</td>
<td>4.4%</td>
<td>4.4%</td>
</tr>
</tbody>
</table>

Positive Early Learning Experiences Policy in Massachusetts

- Families above 200% of FPL eligible for child care subsidy: Yes ✔
- Allocated CCDBG funds: No ❌
- Group size requirements meet or exceed EHS standards: 1 age group
- Adult/child ratio requirements meet or exceed EHS standards: 3 age groups
- Level of teacher qualification required by the state: High school diploma
- Infant/toddler credential adopted: Yes ✔
- State reimburses center based child care at/above 75th percentile of market rates: No ❌
- State includes ‘at-risk’ children as eligible for IDEA Part C services or reports that they serve ‘at-risk’ children: Yes ✔

All indicators for Massachusetts

- Eligibility limit (% FPL) for pregnant women in Medicaid: 205.0% (National average: 200.0%)
- Low or very low food security: 7.9% (National average: 15.9%)
- Infants breastfed at 6 months: 56.2% (National average: 54.6%)
- High weight-for-length among WIC recipients: 14.1% (National average: N/A)
- Mothers reporting less than optimal mental health: 20.5% (National average: 19.8%)
- Babies with low birthweight: 7.6% (National average: 9.3%)
- Preventive medical care received: 93.9% (National average: 91.1%)
- Received recommended vaccines: 82.1% (National average: 70.4%)
- Uninsured low-income infants/toddlers: 1.9% (National average: 5.4%)
- Ever breastfed: 84.3% (National average: 82.9%)
- WIC coverage: 81.6% (National average: 85.0%)
- Late or no prenatal care received: 4.7% (National average: 6.2%)
- Infant mortality rate (deaths per 1,000 live births): 3.7 (National average: 5.8)
- Preterm births: 8.9% (National average: 10.1%)
- Preventive dental care received: 30.2% (National average: 31.9%)

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Strong Families

<table>
<thead>
<tr>
<th>Indicator</th>
<th>State</th>
<th>National Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>TANF benefits receipt among families in poverty</td>
<td>65.5%</td>
<td>21.7%</td>
</tr>
<tr>
<td>Crowded housing</td>
<td>11.3%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Family resilience</td>
<td>87.7%</td>
<td>85.2%</td>
</tr>
<tr>
<td>Two or more adverse childhood experiences</td>
<td>1.6%</td>
<td>8.6%</td>
</tr>
<tr>
<td>Time in out-of-home placement*</td>
<td>22.3%</td>
<td>20.2%</td>
</tr>
<tr>
<td>Potential home visiting beneficiaries served</td>
<td>1.2%</td>
<td>1.9%</td>
</tr>
</tbody>
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<thead>
<tr>
<th>Indicator</th>
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<th>National Average</th>
</tr>
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<tbody>
<tr>
<td>Housing instability</td>
<td>0.2%</td>
<td>2.7%</td>
</tr>
<tr>
<td>Unsafe neighborhoods</td>
<td>2.6%</td>
<td>5.8%</td>
</tr>
<tr>
<td>One adverse childhood experience</td>
<td>14.9%</td>
<td>22.4%</td>
</tr>
<tr>
<td>Infant/toddler maltreatment rate (per 1,000 infants/toddlers)*</td>
<td>29.5</td>
<td>15.9</td>
</tr>
<tr>
<td>Infants/toddlers exiting foster care to permanency*</td>
<td>99.6%</td>
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</tr>
</tbody>
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Positive Early Learning Experiences

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<tbody>
<tr>
<td>Parent reads to baby every day</td>
<td>42.7%</td>
<td>37.8%</td>
</tr>
<tr>
<td>Percentage of income-eligible infants/toddlers with Early Head Start access</td>
<td>5.0%</td>
<td>7.0%</td>
</tr>
<tr>
<td>Cost of care, as % of income single parents</td>
<td>70.9%</td>
<td>N/A</td>
</tr>
<tr>
<td>Developmental screening received</td>
<td>39.2%</td>
<td>31.1%</td>
</tr>
<tr>
<td>Percentage of infants/toddlers receiving IDEA Part C services</td>
<td>28.0%</td>
<td>9.7%</td>
</tr>
<tr>
<td>Parent sings to baby every day</td>
<td>58.4%</td>
<td>57.6%</td>
</tr>
<tr>
<td>Cost of care, as % of income married families</td>
<td>16.4%</td>
<td>N/A</td>
</tr>
<tr>
<td>Low/moderate income infants/toddlers in CCDF funded-care</td>
<td>4.4%</td>
<td>4.2%</td>
</tr>
<tr>
<td>Infants/toddlers with developmental delay*</td>
<td>0.7%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Timeliness of Part C services</td>
<td>99.7%</td>
<td>N/A</td>
</tr>
</tbody>
</table>

*This indicator is not factored into the GROW tier rankings. | Note: N/A indicates Not Available.