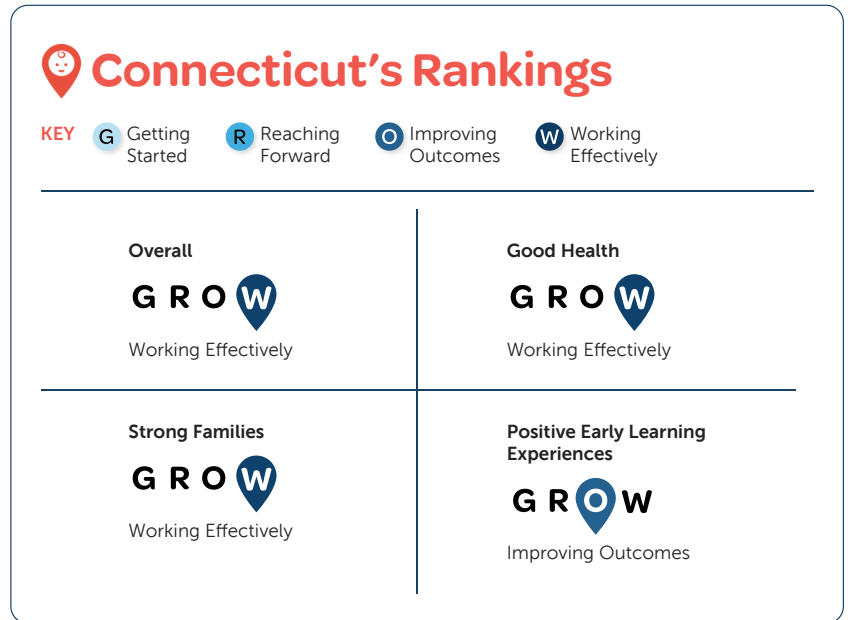




Where children are born can affect their chances for a strong start in life. Babies need good health, strong families, and positive early learning experiences to foster their healthy brain development and help them realize their full potential.

This fact sheet provides a snapshot of how infants, toddlers, and their families are faring with respect to these three developmental domains. For each domain, selected child or family indicators and policy indicators are highlighted and compared to national averages. Important demographic information is also included. A summary table of all indicators is provided on the last page, for reference.



Demographics

Infants and toddlers in Connecticut

Overview

Connecticut is home to 108,539 infants and toddlers, representing 3 percent of the state's population. As many as 35 percent live in households with incomes less than twice the federal poverty line (in 2017, 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. A broad array of policies and services are required to ensure that all of them have an equitable start in life.

CONNECTICUT NATIONAL AVERAGE

Race/ethnicity of infants and toddlers

Non-Hispanic White
 Connecticut: 52.0%
 National Average: 49.3%

Hispanic
 Connecticut: 26.4%
 National Average: 26.1%

Non-Hispanic Black
 Connecticut: 11.7%
 National Average: 13.8%

Non-Hispanic Asian
 Connecticut: 5.4%
 National Average: 4.9%

Non-Hispanic other
 Connecticut: 4.1%
 National Average: 5.1%

American Indian/Alaska Native
 Connecticut: 0.3%
 National Average: 0.8%

Working moms

Mothers in the Labor Force
 Connecticut: 71.8%
 National Average: 61.5%

Poverty status of infants and toddlers

Above Low-Income
 Connecticut: 65.1%
 National Average: 55.4%

In Poverty
 Connecticut: 18.3%
 National Average: 22.7%

Low-Income
 Connecticut: 16.6%
 National Average: 22.0%

Infants and toddlers in poverty, by race

Non-Hispanic Black
 Connecticut: 38.0%
 National Average: 39.5%

Hispanic
 Connecticut: 30.2%
 National Average: 30.8%

Non-Hispanic Other
 Connecticut: 12.7%
 National Average: 20.0%

Non-Hispanic White
 Connecticut: 8.8%
 National Average: 14.6%

Family structure

2-Parent Family
 Connecticut: 88.4%
 National Average: 76.3%

1-Parent Family
 Connecticut: 10.2%
 National Average: 21.5%

No Parents Present
 Connecticut: 1.4%
 National Average: 2.2%

Grandparent-headed households

Connecticut: 7.4%
 National Average: 9.4%

Rural/Non-metro area

Living Outside of a Metro Area
 Connecticut: 4.8%
 National Average: 8.7%

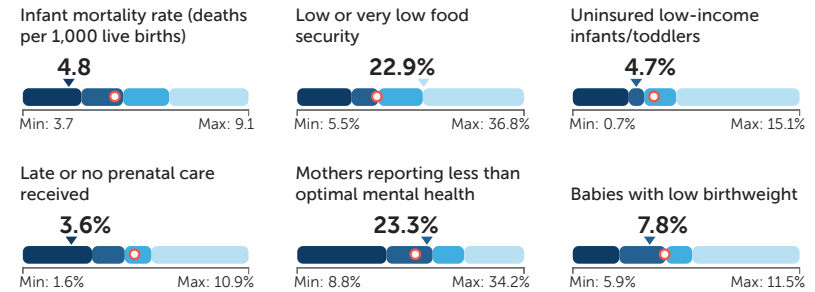
What is Good Health?

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 other stage of life, and this growth sets the stage for subsequent development. Access to good nutrition and affordable maternal, pediatric, and family health care are essential to ensure that babies receive the nourishment and care they need for a strong start in life.

Connecticut falls in the Working Effectively (W) tier of states when it comes to the overall health of infants and toddlers. The state's high ranking in the Good Health domain reflects indicators such as the state's infant mortality rate and the percentage of women receiving late or no prenatal care. In contrast, Connecticut has a higher percentage of young children who experience low or very low food security when compared to other states, which puts the state in the Getting Started (G) tier for this indicator.

Six Key Indicators of Good Health

KEY ← Range of all state values → ▼ Connecticut ○ National average
G Getting Started **R** Reaching Forward **O** Improving Outcomes **W** Working Effectively



Good Health Policy in Connecticut

Medicaid expansion state	Yes <input checked="" type="checkbox"/>
State Medicaid policy for maternal depression screening in well-child visits	Allowed
Medicaid plan covers social-emotional screening for young children	Yes <input checked="" type="checkbox"/>
Medicaid plan covers IECMH services at home	Yes <input checked="" type="checkbox"/>
Medicaid plan covers IECMH services at pediatric/family medicine practices	Yes <input checked="" type="checkbox"/>
Medicaid plan covers IECMH services at ECE programs	Yes <input checked="" type="checkbox"/>

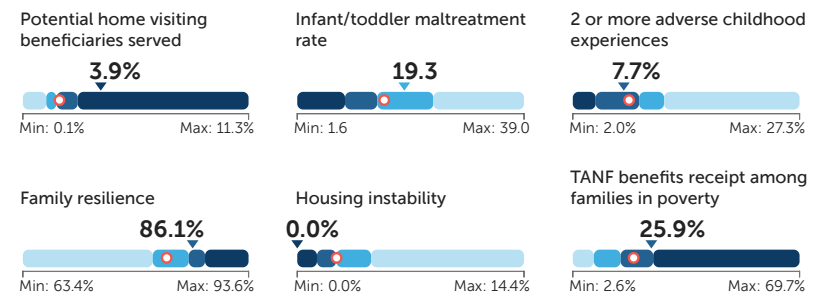
What Defines Strong Families?

Young children develop in the context of their families, where stability and supportive relationships nurture their growth. All families of infants and toddlers benefit from support with parenting, and many—particularly those challenged by economic instability—need access to resources that help them meet their children's daily and developmental needs. Important supports include home visiting services, child welfare systems that are responsive to young children's needs, and family-friendly employer policies that provide paid sick and family leave.

Connecticut falls in the Working Effectively (W) tier of states when it comes to indicators of Strong Families. The state's high ranking in this domain reflects the relatively higher prevalence of housing stability among families of young children, and the higher percentage of infants and toddlers who are receiving evidence-based home visiting services. However, Connecticut has a lower percentage of infants and toddlers exiting foster care to permanency, in comparison to most other states, putting the state in the lowest tier for this indicator.

Six Key Indicators of Strong Families

KEY ← Range of all state values → ▼ Connecticut ○ National average
G Getting Started **R** Reaching Forward **O** Improving Outcomes **W** Working Effectively



Strong Families Policy in Connecticut

Paid sick time that covers care for child	Yes <input checked="" type="checkbox"/>
Paid family leave	No <input checked="" type="checkbox"/>



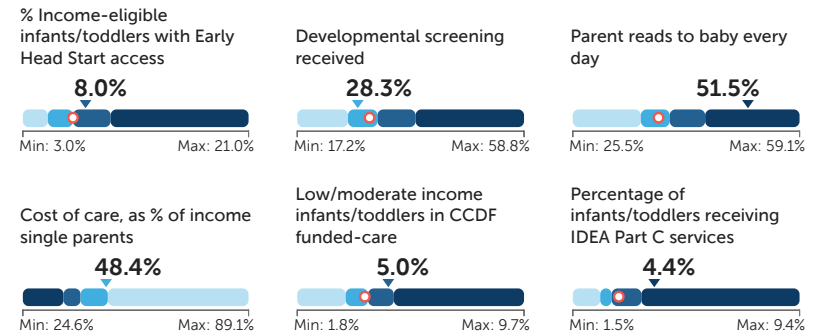
What Defines Positive Early Learning Experiences?

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 has a lasting impact on their preparedness for life-long learning and success. Parents who require child care while they work or attend school need access to affordable, high-quality care options that promote positive development.

Connecticut scores in the Improving Outcomes (O) tier of states when considering key indicators related to early care and education and early intervention for infants and toddlers. The state's high ranking in the Positive Early Learning Experiences domain reflects indicators such as the percentage of parents who read to and sing songs to their babies every day, as well as the percentage of infants and toddlers receiving IDEA Part C services. However, Connecticut is in the Getting Started (G) tier when it comes to the percentage of infants and toddlers with a moderate/severe developmental delay.

Six Key Indicators of Positive Early Learning Experiences

KEY ← Range of all state values → ▼ Connecticut ○ National average
G Getting Started **R** Reaching Forward **O** Improving Outcomes **W** Working Effectively



Positive Early Learning Experiences Policy in Connecticut

Families above 200% of FPL eligible for child care subsidy Yes

All indicators for Connecticut

G Getting Started **R** Reaching Forward **O** Improving Outcomes **W** Working Effectively

Good Health

W Eligibility limit (% FPL) for pregnant women in Medicaid	263.0	<i>National average: 200.0</i>	O Uninsured low-income infants/toddlers	4.7%	<i>National average: 5.8%</i>
G Low or very low food security	22.9%	<i>National average: 16.5%</i>	O Infants ever breastfed	86.3%	<i>National average: 83.2%</i>
O Infants breastfed at 6 months	59.6%	<i>National average: 57.6%</i>	W Late or no prenatal care received	3.6%	<i>National average: 6.2%</i>
O Mothers reporting less than optimal mental health	23.3%	<i>National average: 22.0%</i>	R Preventive medical care received	91.8%	<i>National average: 90.7%</i>
R Preventive dental care received	29.7%	<i>National average: 30.0%</i>	O Babies with low birthweight	7.8%	<i>National average: 8.2%</i>
W Infant mortality rate (deaths per 1,000 live births)	4.8	<i>National average: 5.9</i>	O Received recommended vaccines	75.7%	<i>National average: 70.7%</i>

Strong Families

W Housing instability	0.0% <i>National average: 2.5%</i>	O Crowded housing	10.6% <i>National average: 15.6%</i>
O TANF benefits receipt among families in poverty	25.9% <i>National average: 20.6%</i>	R Infant/toddler maltreatment rate	19.3 <i>National average: 16.0</i>
O Unsafe neighborhoods	3.4% <i>National average: 6.3%</i>	O Family resilience	86.1% <i>National average: 82.6%</i>
R 1 adverse childhood experience	23.2% <i>National average: 21.9%</i>	O 2 or more adverse childhood experiences	7.7% <i>National average: 8.3%</i>
G Infants/toddlers exiting foster care to permanency	95.0% <i>National average: 98.4%</i>	W Potential home visiting beneficiaries served	3.9% <i>National average: 1.9%</i>

Positive Early Learning Experiences

W Parent reads to baby every day	51.5% <i>National average: 38.2%</i>	W Parent sings to baby every day	63.5% <i>National average: 56.4%</i>
O % Income-eligible infants/toddlers with Early Head Start access	8.0% <i>National average: 7.0%</i>	R Cost of care, as % of income married families	12.8% <i>National average: N/A</i>
R Cost of care, as % of income single parents	48.4% <i>National average: N/A</i>	O Low/moderate income infants/toddlers in CCDF funded-care	5.0% <i>National average: 4.2%</i>
R Developmental screening received	28.3% <i>National average: 30.4%</i>	G Infants/toddlers with developmental delay	2.1% <i>National average: 1.1%</i>
W Percentage of infants/toddlers receiving IDEA Part C services	4.4% <i>National average: 3.1%</i>		