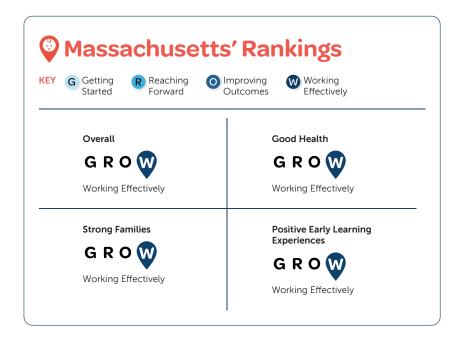


Where children are born can affect their chances for a strong start in life. Babies need good health, strong families, and positive early learning experiences to foster their healthy brain development and help them realize their full potential.

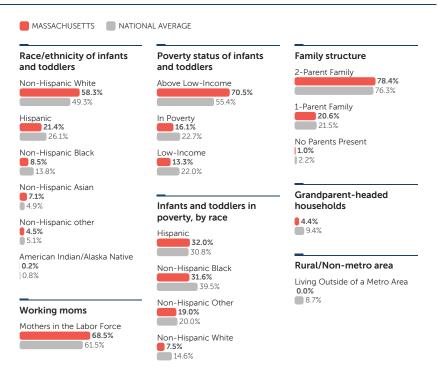
This fact sheet provides a snapshot of how infants, toddlers, and their families are faring with respect to these three developmental domains. For each domain, selected child or family indicators and policy indicators are highlighted and compared to national averages. Important demographic information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





Overview

Massachusetts is home to 215,593 infants and toddlers, representing 3.1 percent of the state's population. As many as 29 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.





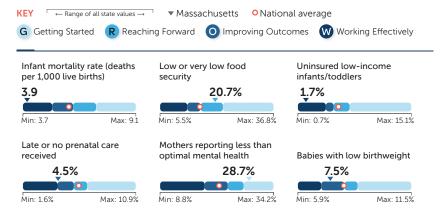


What is Good Health?

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.

Massachusetts 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 primarily reflects indicators of health care access and affordability, and children's health, such as the state's infant mortality rate. Massachusetts' Medicaid plan covers early childhood mental health services in home and pediatric/family medicine practices. However, the percentage of mothers of infants/toddlers in Massachusetts rating their mental health as less than optimal puts the state in the Getting Started (G) tier for this indicator.

Six Key Indicators of Good Health



Good Health Policy in Massachusetts

Medicaid expansion state	Yes 🗸
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 at ECE programs	No 😵



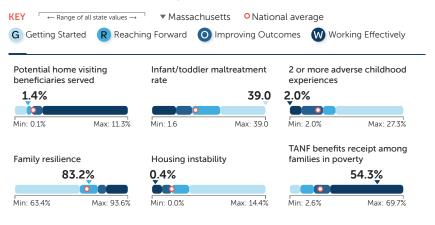


What Defines Strong Families?

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.

Massachusetts falls in the Working Effectively (W) tier of states when it comes to indicators of strong families for infants and toddlers. The state's high ranking in this domain reflects its performance on indicators relating to access to basic needs and supports, and child welfare, such as the prevalence of adverse childhood experiences. Massachusetts is in the Reaching Forward (R) tier on some indicators of child welfare, such as neighborhood safety. Massachusetts requires employers to offer paid sick days that cover care for children. The state also has a paid family leave program.

Six Key Indicators of Strong Families



Strong Families Policy in Massachusetts

Paid sick time that covers care for child	Yes 🗸
Paid family leave	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 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.

Massachusetts scores in the Working Effectively (W) 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 infants and toddlers receiving IDEA Part C services and the percentage of parents who read to or sing to their babies daily. However, Massachusetts' infant care costs are more burdensome compared to other states. The percentage of low/moderate income young children in CCDF-funded care in the state is in the Improving Outcomes (O) tier.

KEY ← Range of all state values → ▼ Massachusetts ○ National average G Getting Started R Reaching Forward Improving Outcomes W Working Effectively % Income-eligible infants/toddlers with Early Developmental screening Parent reads to baby every day **Head Start access** received 7.0% 46.3% 50.4% Min: 17.2% Min: 25.5% Low/moderate income Percentage of Cost of care, as % of income infants/toddlers in CCDF infants/toddlers receiving single parents funded-care **IDEA Part C services** 70.9% 4.4% 9.4%

Six Key Indicators of Positive Early Learning Experiences

Positive Early Learning Experiences Policy in Massachusetts

Max: 9.7%

Min: 1.5%

Min: 1.8%

Families above 200% of FPL eligible for child care subsidy

Max: 89.1%

Min: 24.6%

Yes 🗸

Max: 9.4%

All indicators for Massachusetts

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

Good Health



Strong Families

W Housing instability	0.4% National average: 2.5%	O Crowded housing	10.6% National average: 15.6%
W TANF benefits receipt among families in poverty	54.3% National average: 20.6%	G Infant/toddler maltreatment rate	39.0 National average: 16.0
R Unsafe neighborhoods	5.2% National average: 6.3%	R Family resilience	83.2% National average: 82.6%
1 adverse childhood experience	18.2% National average: 21.9%	W 2 or more adverse childhood experiences	2.0% National average: 8.3%
W Infants/toddlers exiting foster care to permanency	100.0% National average: 98.4%	R Potential home visiting beneficiaries served	1.4% National average: 1.9%

Positive Early Learning Experiences

W Parent reads to baby every day	50.4% National average: 38.2%	W Parent sings to baby every day	66.7% National average: 56.4%
R % Income-eligible infants/toddlers with Early Head Start access	7.0% National average: 7.0%	G Cost of care, as % of income married families	17.2% National average: N/A
G Cost of care, as % of income single parents	70.9% National average: N/A	O Low/moderate income infants/toddlers in CCDF funded-care	4.4% National average: 4.2%
N Developmental screening received	46.3% National average: 30.4%	R Infants/toddlers with developmental delay	1.4% National average: 1.1%
Percentage of infants/toddlers receiving IDEA Part C services	9.4% National average: 3.1%		





