

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.

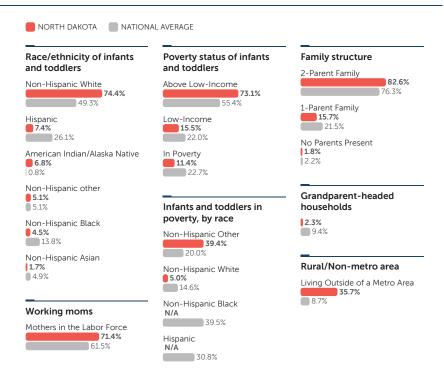
This fact sheet provides a snapshot of how infants, toddlers, and their families are faring with respect to these three developmental domains. For each domain, selected child or family indicators and policy indicators are highlighted and compared to national averages. Important demographic information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





### Overview

North Dakota is home to 32,926 infants and toddlers, representing 4.4 percent of the state's population. As many as 27 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.





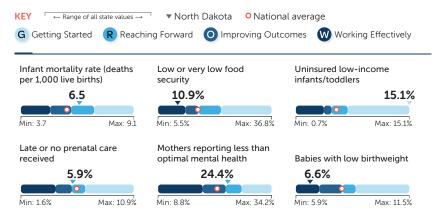


#### What is Good Health?

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.

North Dakota falls in the Reaching Forward (R) tier of states when it comes to the overall health of infants and toddlers. The state's low ranking in the Good Health domain primarily reflects many indicators in the Reaching Forward (R) tier; however, the state is doing better than national averages on a few indicators, such as food security and low birthweight. The state's low ranking also stems from the percentage of low-income infants and toddlers who are uninsured, the percentage of young children who had a preventive dental visit in the past year, and the state's income eligibility limit for pregnant women in Medicaid (as a percentage of the federal poverty line), in comparison to other states.

## Six Key Indicators of Good Health



## **Good Health Policy in North Dakota**

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	Yes 🗸



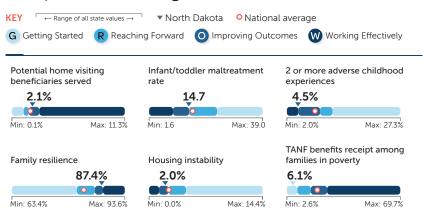


### What Defines Strong Families?

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.

North Dakota falls in the Reaching Forward (R) tier of states when it comes to indicators of Strong Families. The state's low ranking in this domain reflects indicators such as the relatively lower percentage of families of infants and toddlers living in poverty that receive TANF benefits, and the percentage of infants and toddlers exiting foster care to permanency. However, North Dakota is in the Working Effectively (W) tier in terms of the percentage of young children in crowded housing, and neighborhood safety. The state does not require employers to offer paid sick days that cover care for children and does not have a paid family leave program.

## Six Key Indicators of Strong Families



### Strong Families Policy in North Dakota

Paid sick time that covers care for child	No 🔀
Paid family leave	No 😵

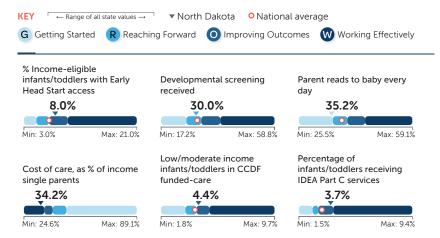


# What Defines Positive Early Learning Experiences?

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.

North Dakota 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 that most of North Dakota's indicators score in the Improving Outcomes (O) and Working Effectively (W) tiers. For example, the average cost of infant care (as a percentage of single parents' and married parents' incomes) is less burdensome compared to other states. When it comes to the percentage of parents reading to and singing to their babies daily, however, North Dakota ranks in the Getting Started (G) tier.

# Six Key Indicators of Positive Early Learning Experiences



## Positive Early Learning Experiences Policy in North Dakota

Families above 200% of FPL eligible for child care subsidy

Yes 🗸

# All indicators for North Dakota

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

All Illulcators for North Dakota

### **Good Health**

G Eligibility limit (% FPL) for pregnant women in Medicaid	152.0 National average: 200.0	G Uninsured low-income infants/toddlers	<b>15.1%</b> National average: 5.8%
W Low or very low food security	10.9% National average: 16.5%	R Infants ever breastfed	<b>81.7%</b> National average: 83.2%
R Infants breastfed at 6 months	<b>58.2%</b> National average: 57.6%	R Late or no prenatal care received	<b>5.9%</b> National average: 6.2%
R Mothers reporting less than optimal mental health	24.4% National average: 22.0%	Preventive medical care received	<b>94.4%</b> National average: 90.7%
G Preventive dental care received	17.4% National average: 30.0%	Babies with low birthweight	<b>6.6%</b> National average: 8.2%
R Infant mortality rate (deaths per 1,000 live births)	<b>6.5</b> National average: 5.9	R Received recommended vaccines	<b>68.2%</b> National average: 70.7%

# **Strong Families**

O Housing instability	<b>2.0%</b> National average: 2.5%	W Crowded housing	<b>7.8%</b> National average: 15.6%
<b>G</b> TANF benefits receipt among families in poverty	<b>6.1%</b> National average: 20.6%	o Infant/toddler maltreatment rate	<b>14.7</b> National average: 16.0
W Unsafe neighborhoods	1.9% National average: 6.3%	Family resilience	<b>87.4%</b> National average: 82.6%
R 1 adverse childhood experience	<b>22.7%</b> National average: 21.9%	2 or more adverse childhood experiences	<b>4.5%</b> National average: 8.3%
G Infants/toddlers exiting foster care to permanency	<b>87.0%</b> National average: 98.4%	Potential home visiting beneficiaries served	<b>2.1%</b> National average: 1.9%

# Positive Early Learning Experiences

<b>G</b> Parent reads to baby every day	<b>35.2%</b> National average: 38.2%	<b>G</b> Parent sings to baby every day	<b>50.6%</b> National average: 56.4%
% Income-eligible infants/toddlers with Early Head Start access	8.0% National average: 7.0%	Cost of care, as % of income married families	<b>9.3%</b> National average: N/A
Cost of care, as % of income single parents	<b>34.2%</b> National average: N/A	O Low/moderate income infants/toddlers in CCDF funded-care	<b>4.4%</b> National average: 4.2%
R Developmental screening received	30.0% National average: 30.4%	o Infants/toddlers with developmental delay	<b>0.6%</b> National average: 1.1%
Percentage of infants/toddlers receiving IDEA Part C services	<b>3.7%</b> National average: 3.1%		





