

The State of New Hampshire's Babies

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.

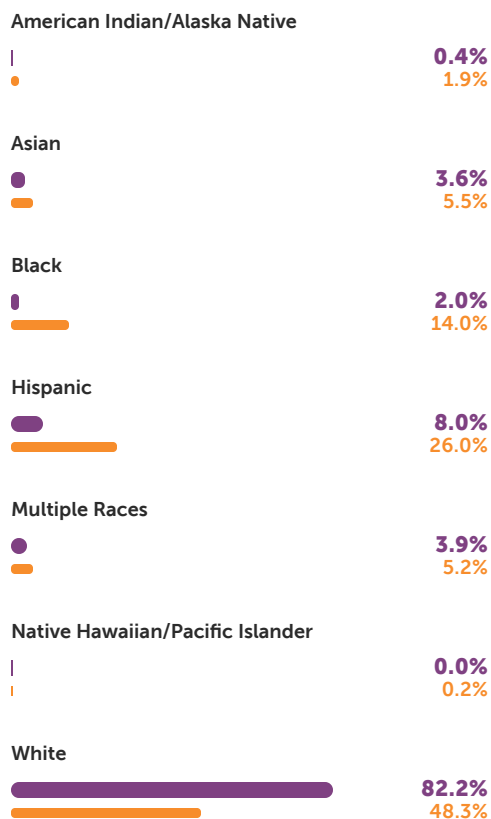
Demographics

New Hampshire National Average

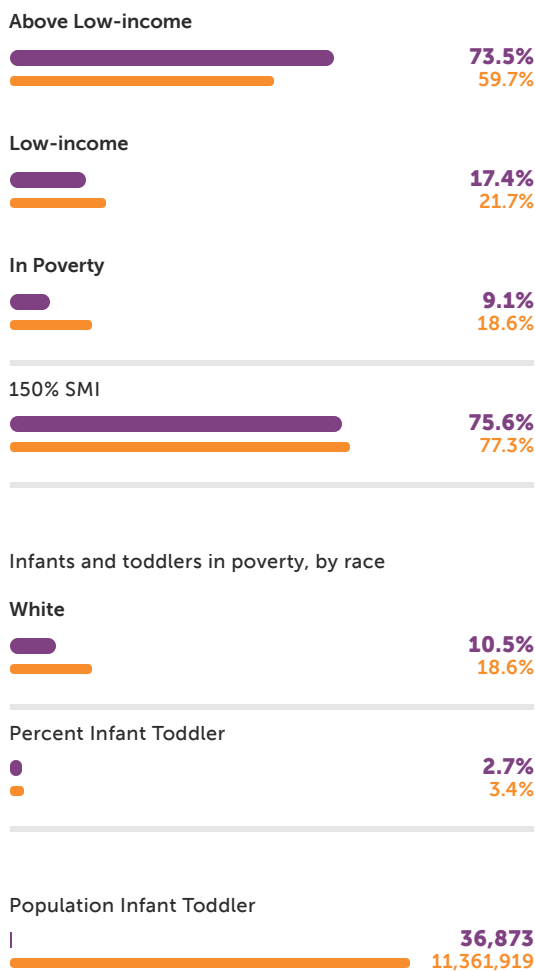
Infants and toddlers in New Hampshire

New Hampshire is home to 36,873 babies, representing 2.7 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 2020, about \$52,400 for a family of four), placing them at economic disadvantage. The state's youngest children are diverse and are raised in a variety of family contexts and household structures.

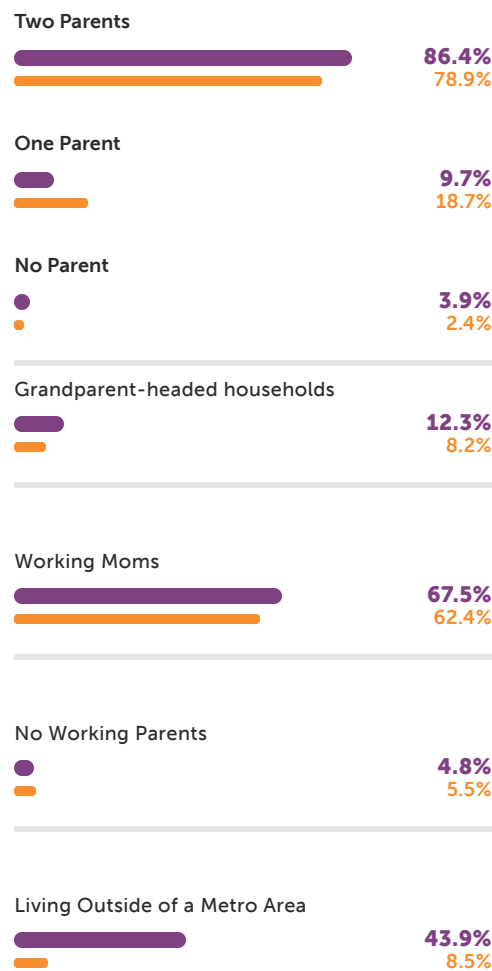
Race/ethnicity of infants and toddlers



Poverty status of infants and toddlers



Family Structure



*Numbers are small; use caution in interpreting.
Note: N/A indicates Not Available

How are New Hampshire'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.

New Hampshire falls in the Improving Outcomes (O) 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. New Hampshire performs better than national averages on key indicators, such as the infant mortality rate and the percentage of women receiving late or no prenatal care. The state is performing worse than national averages on indicators such as the percentages of eligible babies participating in WIC and mothers reporting less than favorable mental health.

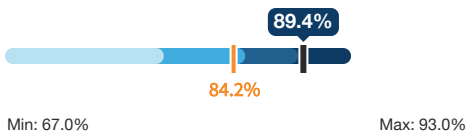
Key Indicators of Good Health

● New Hampshire ● National Avg

Eligibility limit (% FPL) for pregnant women in Medicaid



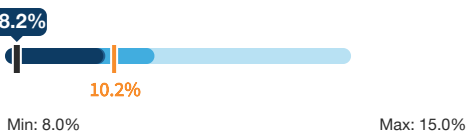
Infants ever breastfed **NR**



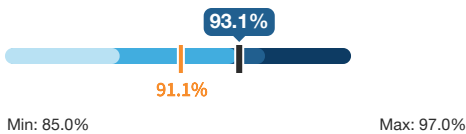
WIC Coverage



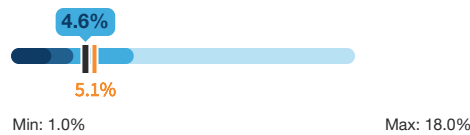
Babies born preterm



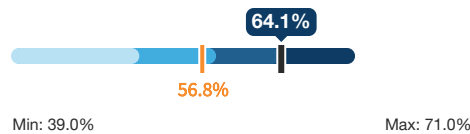
Preventive medical care received



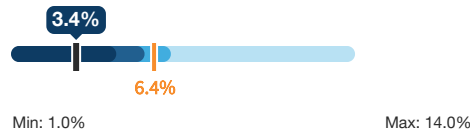
Uninsured low-income infants and toddlers



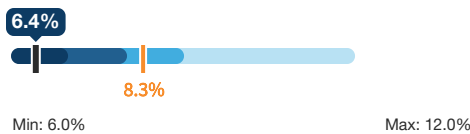
Infants breastfed at 6 months **NR**



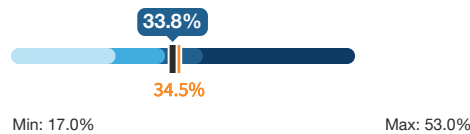
Late or no prenatal care received



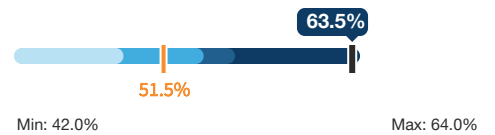
Babies with low birthweight



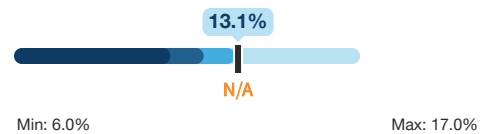
Preventive dental care received



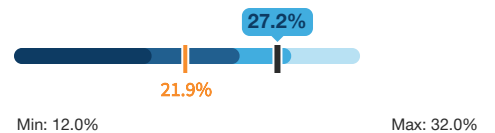
Medical home



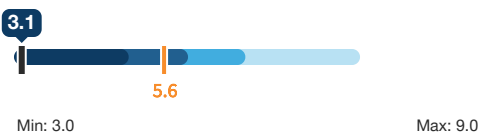
High weight-for-length **NR**



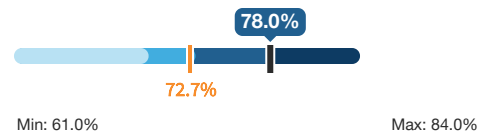
Mothers reporting less than optimal mental health



Infant mortality rate (deaths per 1,000 live births)



Received recommended vaccines



*Numbers are small; use caution in interpreting.

Good Health Policy in New Hampshire

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	No Policy
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

All Good Health Indicators for New Hampshire

● State Indicator ● National Avg

Health Care Coverage and Affordability

R Eligibility limit (% FPL) for pregnant women in Medicaid	201.0 200.0	R Uninsured low-income infants and toddlers	4.6% 5.1%
W Medical home	63.5% 51.5%		

Nutrition

Infants ever breastfed NR	89.4% 84.2%	O Infants breastfed at 6 months	64.1% 56.8%
High weight-for-length NR	13.1% NA	G WIC coverage	64.7% 97.8%

Maternal Health

W Late or no prenatal care received	3.4% 6.4%	Maternal mortality rate (deaths per 100,000 live births) NR	NA 20.1
R Mothers reporting less than optimal mental health	27.2% 21.9%		

Children's Health

W Babies born preterm	8.2% 10.2%	W Babies with low birthweight	6.4% 8.3%
W Infant mortality rate (deaths per 1,000 live births)	3.1 5.6	O Preventive dental care received	33.8% 34.5%
O Preventive medical care received	93.1% 91.1%	O Received recommended vaccines	78.0% 72.7%

Note: N/A indicates Not Available.

How are New Hampshire's babies faring in Strong Families?

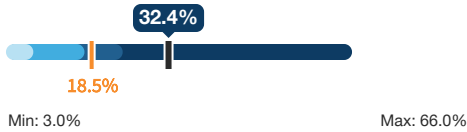
Young children develop in the context of their families, where stability, safety, and supportive relationships nurture their growth. All families may benefit from parenting supports, but families with low income and in historically marginalized communities of color face additional challenges that impact 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.

New Hampshire falls in the Improving Outcomes (O) 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 families in poverty with babies who receive TANF and the infant/toddler maltreatment rate. New Hampshire is doing worse than the national average on the percentage of babies who could benefit from home visiting receiving those services.

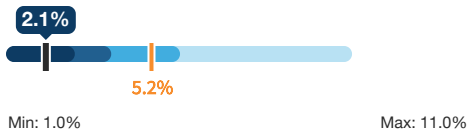
Key Indicators of Strong Families

● New Hampshire ● National Avg

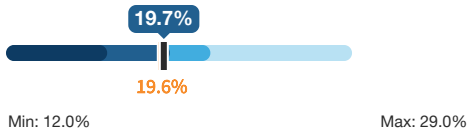
TANF benefits receipt among families in poverty



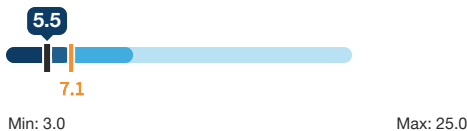
Unsafe neighborhoods



1 adverse childhood experience



Removed from home **NR**



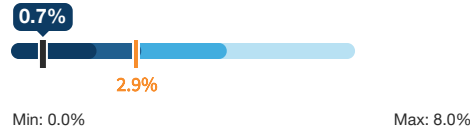
Permanency: Guardian **NR**



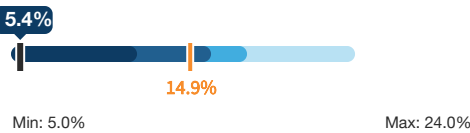
Potential home visiting beneficiaries served



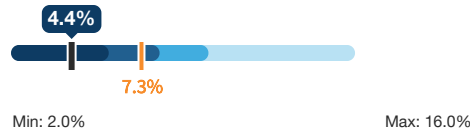
Housing instability



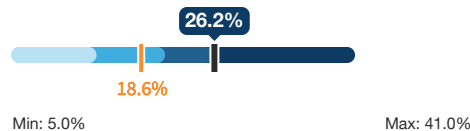
Low or very low food security



2 or more adverse childhood experiences



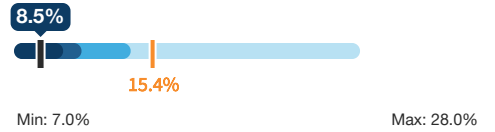
Time in out-of-home placement



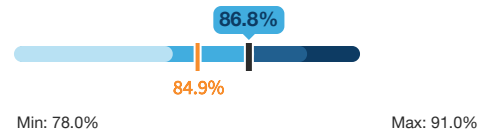
Permanency: Relative **NR**



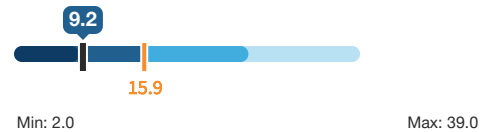
Crowded housing



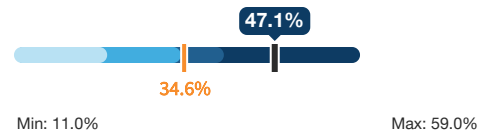
Family resilience



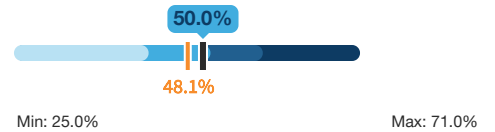
Infant/toddler maltreatment rate (per 1,000 children ages 0-2) **NR**



Permanency: Adopted **NR**



Permanency: Reunified **NR**



*Numbers are small; use caution in interpreting.

Strong Families Policy in New Hampshire

Paid family leave	No X
Paid sick time that covers care for child	No X
TANF work exemption	No X
State child tax credit	No X
State Earned Income Tax Credit	No X

Note: N/A indicates Not Available

All Strong Families Indicators for New Hampshire

● State Indicator ● National Avg

Basic Needs

W TANF benefits receipt among families in poverty	32.4% 18.5%	W Housing instability	0.7% 2.9%
W Crowded housing	8.5% 15.4%	W Unsafe neighborhoods	2.1% 5.2%
W Low or very low food security	5.4% 14.9%		

Child Well-being and Resilience

O Family resilience	86.8% 84.9%	1 adverse childhood experience NR	19.7% 19.6%
W 2 or more adverse childhood experiences	4.4% 7.3%	Infant/toddler maltreatment rate (per 1,000 children ages 0-2) NR	9.2 15.9
Removed from home NR	5.5 7.1	Time in out-of-home placement NR	0.3% %
Permanency: Adopted NR	47.1% 34.6%	Permanency: Guardian NR	NA 8.3%
Permanency: Relative NR	NA 7.8%	Permanency: Reunified NR	50.0% 48.1%
R Potential home visiting beneficiaries served	1.4% 2.1%		

Note: N/A indicates Not Available.

How are New Hampshire's babies faring in Positive Early Learning Experiences?

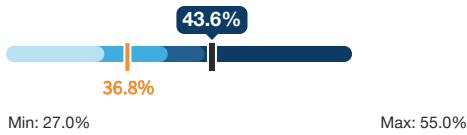
Infants and toddlers learn through interactions with the significant adults in their lives and active exploration of enriching environments. The quality of babies' early learning experiences at home and in other care settings can impact their cognitive and social-emotional development as well as early 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.

New Hampshire 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 higher percentage of parents who sing or tell stories to their babies daily. New Hampshire is doing worse than the national average on indicators such as the lower percentage of babies in families below 100 percent of the federal poverty line with access to Early Head Start. 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.

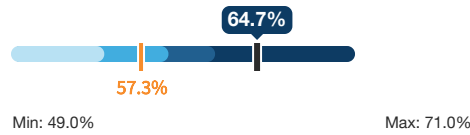
Key Indicators of Positive Early Learning Experiences

● New Hampshire ● National Avg

Parent reads to baby every day



Parent sings to baby every day



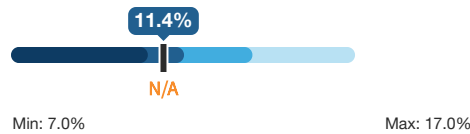
% Income-eligible infants/toddlers with Early Head Start access



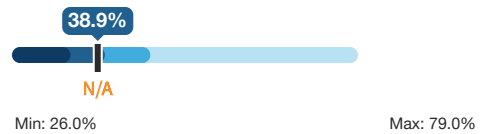
Low/moderate income infants/toddlers in CCDF funded-care



Cost of care, as % of income married families



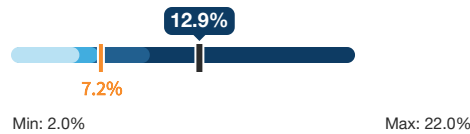
Cost of care, as % of income single parents



Developmental screening received



Percentage of infants/toddlers receiving IDEA Part C services



*Numbers are small; use caution in interpreting.

Positive Early Learning Experiences Policy in New Hampshire

Adult/child ratio	_____	EHS Standards met for 1 of 3 age groups
Level of teacher qualification required by the state beyond a high school diploma	_____	No ✗
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	_____	Yes ✓
Allocated CCDBG funds	_____	No ✗
State reimburses center-based child care	_____	No ✗
At-risk children included in Part C eligibility definition	NR _____	Yes ✓

Note: N/A indicates Not Available

All Positive Early Learning Experiences Indicators for New Hampshire

● State Indicator ● National Avg

Activities that Support Early Learning

W Parent reads to baby every day	43.6% 36.8%	W Parent sings to baby every day	64.7% 57.3%
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Access to Early Learning Programs

G % Income-eligible infants/toddlers with Early Head Start access	9.0% 11.0%	O Low/moderate income infants/toddlers in CCDF-funded care	5.1% 4.6%
Cost of care, as % of income married families NR	11.4% NA	Cost of care, as % of income single parents NR	38.9% NA

Early Intervention

R Developmental screening received	33.9% 33.8%	W Percentage of infants/toddlers receiving IDEA Part C services	12.9% 7.2%
Timeliness of Part C services NR	98.2% NA		

Note: N/A indicates Not Available.