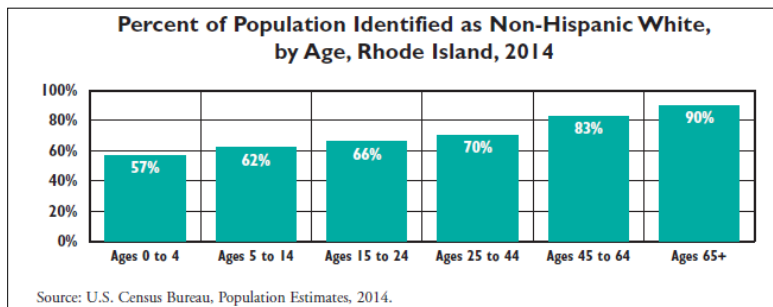


EXECUTIVE SUMMARY OF THE 2016 RHODE ISLAND KIDS COUNT FACTBOOK

COMMUNITY TRENDS

- **Child population continues to decline.** Between 2000 and 2014, Rhode Island’s child population decreased by 14% (from 247,822 to 212,555). Rhode Island had the fifth lowest birth rate in the U.S.
- **Changes in the enrollment and demographics of Rhode Island public schools.** On October 1, 2015, there were 142,014 students enrolled in Rhode Island public schools in preschool through grade 12. In October 2015, 60% of Rhode Island public school students were non-Hispanic White, 24% were Hispanic, 8% were Black, 3% were Asian/Pacific Islander, 4% were Multi-Racial, and 1% were Native American.
 - There are racial differences among communities: 20% of students enrolled in the four core cities were White, compared with 80% in the remainder of the state.
 - In October 2015, nearly one-half (47%) of students in Rhode Island were eligible for free or reduced-price meals (income less than 185% of the federal poverty level). During this time, 77% of students enrolled in the four core cities were low-income, compared with 31% in the remainder of the state.
- **Shifting diversity among Rhode Island children and families:**
 - Young children in Rhode Island are less likely to be identified as non-Hispanic White than any other age group. Fifty-seven percent of Rhode Island children under age five identify as non-Hispanic White, compared with 70% of adults ages 25 to 44 and 90% of people age 65 or over.



- The median age of Hispanic Rhode Islanders in 2014 was 26 years, compared with 45 years for White Rhode Islanders, 34 years for Native American Rhode Islanders, 32 years for Black Rhode Islanders, 31 years for Asian Rhode Islanders, and 20 years for Rhode Islanders who identify as Two or more races.
- As of September 1, 2015, there were 4,970 Rhode Island children under age five who were born to a mother who did not speak English. For young children growing up in homes where English is not the first language, the quality, type, and amount of early childhood education can help boost English language development and kindergarten readiness.

ECONOMIC WELL-BEING

Education and employment of parents has an impact on child outcomes.

- **Educational attainment is strongly associated with economic well-being.**
 - Between 2010 and 2014 in Rhode Island, adults without a high school diploma were nearly four times as likely to be unemployed as those without a Bachelor's degree.
 - Rhode Islanders who have achieved a Bachelor's degree or higher have nearly double the wages of residents who have only completed high school.
 - More than one in three Hispanic and more than one in four Black adults in Rhode Island, lack a high school diploma, compared to one in ten White adults.
 - In Rhode Island between 2010 and 2014, 37% of all infants were born to mothers with a high school diploma or less, and 39% were born to fathers with a high school diploma or less
- **Maternal education has an impact on infant outcomes.**

In Rhode Island between 2010 and 2014:

 - 9.4% of births to women with a high school degree or less were preterm, compared with 8.3% of those with higher education levels.
 - 8.2% of infants born to women with a high school degree or less were low birthweight, compared to 6.3% of those born to women with higher education levels.
 - Mothers with a high school degree or less had a higher infant mortality rate than mothers with more advanced educational degrees (6.1 and 4.8 per 1,000 live births).
- **Parental employment positively impacts children.** Children with unemployed parents are at increased risk for homelessness, child abuse or neglect, and failure to finish high school or college. The majority of children living in Rhode Island between 2010 and 2014 had one or both parents in the labor force. Between 1998 and 2013, the percentage of Rhode Island children living in low-income families with no employed parents fell from 34% to 25%.

Improvements in Economic Well-Being Outcomes

- **Unemployment is decreasing.** Rhode Island had one of the nation's highest unemployment rates in 2014, but there were improvements in 2015. In December 2015, Rhode Island's unemployment rate was 5.4%, higher than the U.S. unemployment rate of 5.0%, and the 19th highest in the nation. However, it was considerably lower than at the height of Rhode Island's recession in December 2009, when the unemployment rate was 11.2%.
- **Income and family support programs are helping working Rhode Island families.**

Having access to work supports, such as health insurance, earned income tax credits (EITCs), SNAP, and child care subsidies, can facilitate and support steady employment.

 - **State and federal Earned Income Tax Credits (EITCs)** provide tax reductions and wage supplements for low- and moderate-income working families. EITCs reduce child poverty, decrease taxes, and increase work incentives for families struggling to make ends meet. State EITCs can supplement the federal EITC to further support working families. In 2015, the Rhode Island General Assembly passed legislation that increased the state's EITC from 10% to 12.5% of the federal EITC. In 2014, 84,091

Rhode Island working families and individuals received a total of \$190 million in EITC tax credits for tax year 2013.

- **Child care subsidies** increase the likelihood that low-income parents are able to work, are employed full-time, and are able to maintain employment over longer periods of time. In December 2015, there were 9,684 child care subsidies in Rhode Island, an increase of 8% from 8,991 in December 2014, but down 32% from the 2003 peak.

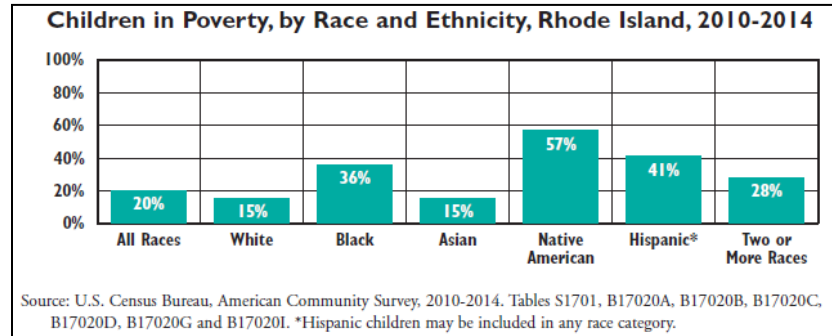
Additional Rhode Island policies positively affecting babies, new parents, and the economy:

- **Paid Family Leave** is defined as the number of approved claims to bond with a new child or to care for a seriously ill family member through Rhode Island's Temporary Caregiver Insurance Program (TCI). The TCI program is financed entirely by employee contributions.
 - Paid family leave provides job security and consistent income so that working parents can care for a new child or any worker can care for a seriously ill family member.
 - Secure parental employment increases family income and reduces poverty.
 - Taking time off from work to care for a new child reduces infant mortality rates and child abuse, improves breastfeeding rates and duration, and increases preventive medical care and immunizations.
 - There were 4,941 approved claims for TCI during 2015 (up from 3,870 in 2014); 77% were to bond with a new child and 23% were to care for a seriously ill family member.
 - Of the 3,803 approved claims to bond with a new child, 34% were filed by men and 66% were filed by women.
- **Breastfeeding** has significant social and economic benefits, including reduced cost to the family, reduced health care costs, and reduced employee absenteeism. Rhode Island reports 79.7% of infants ever having been breastfed. Several recent developments support breastfeeding in Rhode Island:
 - In Rhode Island in 2015, legislation passed that prohibits job discrimination based on pregnancy, childbirth, and related medical conditions. It requires employers to make reasonable accommodations for workers for conditions related to pregnancy and childbirth, including breastfeeding.
 - In 2014, Rhode Island became the first state to establish licensure for International Board Certified Lactation Consultants. State-certified lactation consultants provide comprehensive lactation support and counseling for pregnant and postpartum women.

Challenges in Economic Well-Being Outcomes

- **Poverty is related to every KIDS COUNT indicator, and has a negative impact on children both *immediately* and in the *long-term*.** Children in poverty, especially those who experience poverty in early childhood and for extended periods, are more likely to have physical and behavioral health problems, experience difficulty in school, become teen parents, and earn less or be unemployed as adults.
 - In 2015, the federal poverty threshold was \$19,096 for a family of three with two children and \$24,036 for a family of four with two children.

- In 2014, nearly one in five (19.8%) children in Rhode Island (a total of 41,629 children) lived in poverty.
- **Wide disparities exist in economic well-being outcomes among racial and ethnic groups in Rhode Island:**



- Between 2010 and 2014, 57% of Native American, 41% of Hispanic, and 36% of Black children in Rhode Island lived in poverty, compared to 15% of White children and Asian children.
- Between 2010 and 2014, 24.8% (16,530) of Rhode Island children under age six lived in poverty.

Economic Well-Being Outcomes, by Race and Ethnicity, Rhode Island

	WHITE	HISPANIC	BLACK	ASIAN	NATIVE AMERICAN	ALL RACES
Children in Poverty	15%	41%	36%	15%	57%	20%
Births to Mothers with <12 Years Education	8%	27%	17%	9%	28%	13%
Unemployment Rate	5%	9%	12%	NA	NA	6%
Median Family Income	\$79,418	\$32,207	\$39,454	\$69,677	\$25,941	\$73,217
Homeownership	65%	28%	31%	49%	22%	60%

- Between 2010 and 2014 in Rhode Island, the median family income for White households was \$79,418; compared to \$25,941 for Native American households, \$32,207 for Hispanic households, \$39,454 for Black households, and \$69,677 for Asian households.
 - Low-income workers are less likely to have benefits, such as paid time off and flexible work schedules that would allow them to address the needs of sick children.
- In 2015 in Rhode Island, the unemployment rate among White workers was 5.2%, compared to 12.2% for Black workers and 9.1% for Hispanic workers.

HEALTH

Evidence-based home visiting programs are reaching vulnerable babies and children.

- Adverse experiences in infancy and early childhood disrupt the developing brain architecture and can lead to permanent changes in learning, behavior and physiology. Known as “**toxic stress,**” the effect is cumulative, and it is most harmful when there are numerous stressors over an extended period of time.
- Providing early and intensive support to families with multiple risk factors helps parents develop critical nurturing skills during the prenatal, infancy, and toddler periods and can offset (and help prevent) toxic stress. Children in at-risk families who participate in evidence-based family home visiting programs have improved outcomes have improved language, cognitive, and social-emotional development and are less likely to experience child abuse and neglect.
 - As of October 2015, there were 823 families enrolled in one of the three MIECHV-funded evidence-based home visiting programs in Rhode Island (up from 500 in 2014).
 - Home-based Early Head Start is also recognized as an evidence-based home visiting program that improves child outcomes. As of October 2015 in Rhode Island, there were 367 children enrolled in home-based Early Head Start.

Housing and Health

Safe, affordable, and stable housing maintains the health and well-being of families and children, supporting mental and emotional health as well as physical safety. Because the causes of many health conditions related to the home environment are interconnected, it can be cost-effective to address multiple hazards simultaneously.

Housing stock throughout Rhode Island is old, and paying high rents and mortgages presents a high cost burden:

- In 2013, 24% of Rhode Island’s 154,568 working households spent more than half of their income on housing costs, making Rhode Island the state with the highest cost burden in New England. Families who pay more than 30% of their income for housing are considered cost burdened.
- Rhode Island has the highest percentage of low-income children living in older housing, and the second highest percentage of children living in older housing in the U.S. This poses health risks for children because lead paint was commonly used in the interior and exterior of homes before 1978.
 - **Childhood lead poisoning.** The number of children with elevated blood lead levels has been steadily declining in all areas of Rhode Island for more than a decade and a half. The number of children in Rhode Island under age six who were significantly lead poisoned has decreased from 212 children in 2005 to 42 children in 2015, but is up from 2014 (32 children).
 - Starting in 2015, an environmental inspection of a child’s home is offered when a single venous test result is ≥ 15 $\mu\text{g}/\text{dL}$ (versus ≥ 20 $\mu\text{g}/\text{dL}$ previously). The Rhode Island Department of Health sends certified lead inspectors to determine whether lead hazards are present and works with owners to make the property lead-safe.
 - In 2015, 68 inspections were offered, of which 41 were performed, 14 were refused, 11 the child moved, and two were pending.

Improvements in Health Outcomes

- **Continued high rates of health insurance coverage.** In 2014, 3.3% of Rhode Island's children under age 18 were uninsured. Rhode Island ranks seventh best in the U.S., with 96.7% of children having health insurance.
 - As of October 2015, 1,651 children were enrolled in commercial coverage in the individual market of HealthSource RI, which is a 29% increase from 2014 (1,282).
- **Access to dental coverage and preventive dental care is improving.** In 2014, 94% of children in Rhode Island had dental insurance that paid for routine dental care, up from 73% in 2001 and 62% in 1990.
 - The number of children enrolled in Medical Assistance programs receiving dental services has increased by 37% since 2005 (41,541 to 57,108).
 - In 2015, the Rhode Island General Assembly passed legislation to increase access to oral health care for children by allowing dental hygienists to perform approved services in public health settings.
- **Improvements in infants born at highest risk.** Between 2007 and 2015 in Rhode Island, the number of infants born at highest risk (babies born to unmarried teen mothers without a high school diploma) fell 63%, and the proportion of births to teen mothers fell from 10% to 5% of all births.

Challenges in Health Outcomes

- **Increases in babies born with exposure to substances.** Babies born with exposure to opioids (pain medication) face immediate and long-term negative outcomes. In Rhode Island in 2014, 97 babies were diagnosed with Neonatal Abstinence Syndrome (NAS), a rate of 92 per 10,000 births, up from 76 babies in 2013 and more than double the rate of 37.2 in 2006. Of the babies born with NAS: 88% of babies were born to White mothers, 85% had Medicaid coverage. One-third (34%) of babies born with NAS lived in the four core cities and 66% lived in the remainder of the state.
- **Increases in hospitalizations of children related to mental health issues:** In 2014, there were 2,744 hospitalizations of children with a primary diagnosis of mental disorder at Bradley, Butler, Hasbro Children's Hospital, Newport, and Memorial hospitals. This represents a 53% increase from 2005.

SAFETY

Improvements in Child and Youth Safety Outcomes

- **RI ranks best in the nation for teen death rate (lowest rate):** In 2014, Rhode Island's teen death rate for children ages 15 to 19 was 22 per 100,000 children. This was a decrease from 34 deaths per 100,000 teens in 2013. Rhode Island also ranked fourth best in the nation for the child death rate, with a rate of a rate of 12 deaths per 100,000 children ages one to 14 in 2014.
- **Continued declines in number of youth involved with the juvenile justice system.**
 - In Rhode Island in 2014, 476 juveniles were arrested for assault offenses, down from 567 in 2013.
 - The number of children and youth referred to Family Court for wayward and delinquent offenses declined 43% between 2009 and 2015, from 4,825 to 2,770. During the same period, the number of juvenile offenses declined by 38%, from 7,829 to 4,885.
 - Between 2006 and 2015, the annual total number of youth in the care and custody of the Training School any point during the year declined from 1,123 to 470.
- **Decreases in child abuse and neglect.** After increasing annually between 2011 and 2014, the number of child maltreatment reports, completed investigations, and indicated investigations of child abuse and neglect declined between 2014 and 2015 in Rhode Island. Between 2014 and 2015, the numbers of unduplicated child maltreatment reports decreased by 2%, completed investigations decreased by 15%, and indicated investigations decreased by 8%.
 - In Rhode Island in 2015, the child abuse and neglect rate was 13.8 per 1,000 children, down from a rate of 14.5 per 1,000 children in 2014.
- **Decrease in children living in congregate care.** On December 31, 2015, 400 children lived in a residential facility or group home, a decline of 11% from 449 children on December 31, 2014. The percentage of children in out-of-home placement who were in a foster care home with a grandparent or other relative increased from 31% on December 31, 2014 to 34% on December 31, 2015.

Challenges for Child and Youth Safety Outcomes

- **Increases in child sexual abuse.** In Rhode Island in 2015, there were 195 indicated allegations (confirmed claims) of child sexual abuse, up from 160 in 2014.
- **Children continue to witness and experience domestic violence.** In Rhode Island in 2014, there were 5,265 domestic violence incidents that resulted in arrests, up 5% from 5,028 incidents in 2013. Children were reported present in 35% (1,856) of these incidents. One-third (36%) of indicated allegations of child neglect by DCYF in 2015 involved children who were exposed to domestic violence.
- **Disparities in the juvenile justice system.** While 46% percent of offenses referred to the Family Court involved White youth, 22% Black youth, 16% Hispanic youth, 1% Asian youth, and 16% of offenses involved youth of some other race or an unknown race, youth of color are disproportionately more likely than White youth to be detained and sentenced to the Training School.

Disproportionate Minority Contact in Rhode Island		
	% OF TOTAL CHILD POPULATION, 2010	% OF YOUTH IN THE CARE AND CUSTODY OF RHODE ISLAND TRAINING SCHOOL, 2015
White	64%	32%
Hispanic	21%	33%
Black	6%	23%
Asian	3%	2%
Multi-Racial	5%	7%
Other*	2%	1%
Unknown	NA	2%
<i>n</i> =	223,956	470

- Increases in parental incarceration.** On September 30, 2015, inmates at the ACI (including those awaiting trial) reported having 4,222 children. This is an 8% increase from 3,920 reported children among inmates the year prior. In addition to the separation of families during incarceration, a parent’s criminal record is often an obstacle to securing employment.

EARLY CHILDHOOD AND K-16 EDUCATION

Reading Skills

Starting in the 2014-2015 school year, Rhode Island began using a new statewide assessment, the *Partnership for Assessment of Readiness for College and Careers (PARCC)*, which is aligned to the *Common Core State Standards* in English language arts/literacy and assesses students' ability to read and comprehend complex texts, use different sources to compare and synthesize ideas, and write effectively.

In 2015, 37% of Rhode Island third graders met expectations on the *PARCC* English language arts (ELA) assessment. One in five (21%) low-income third graders met expectations in ELA, compared with 53% of higher-income third graders.

In 2015, 38% of Rhode Island seventh graders met expectations on the *PARCC* ELA assessment. One in five (22%) low-income seventh graders met expectations in ELA, compared with 53% of higher-income seventh graders.

The *PARCC* replaced the *New England Common Assessment Program (NECAP)*, which was administered in Rhode Island between 2005 and 2013. Results from the *PARCC* are not comparable with *NECAP* assessment tests, and therefore trend analysis is not available this year.

The *Factbook* also reports on the *National Assessment of Educational Progress (NAEP)*, used to assess reading proficiency nationally and across states every other year. In 2015, 40% of Rhode Island fourth graders performed at or above the Basic level in reading on the *NAEP*, higher than the national average of 35% (ninth best in the U.S. and 5th in New England). In 2015, 35% of Rhode Island eighth graders performed at or above the Basic level in reading on the *NAEP*, higher than the national average of 33% (25th in the U.S. and 6th in New England).

Math Skills

The math *PARCC* is aligned to the *Common Core State Standards* in math and assesses students' ability to demonstrate mathematical reasoning and apply mathematical concepts to solve complex, real-world problems.

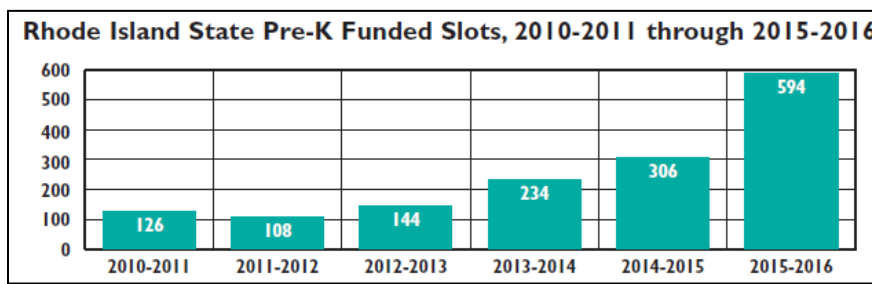
In 2015, 36% of Rhode Island third graders, 27% of fourth graders, 27% of fifth graders, 26% of sixth graders, and 25% of seventh graders met expectations on the *PARCC* math assessment.

The *PARCC* replaced the *New England Common Assessment Program (NECAP)*, which was administered in Rhode Island between 2005 and 2013. Results from the *PARCC* are not comparable with *NECAP* assessment tests, and therefore trend analysis is not available this year.

The *Factbook* also reports on the *National Assessment of Educational Progress (NAEP)*, which measures proficiency in math nationally and across states every other year. In 2015, 80% of Rhode Island fourth graders and 81% of U.S. fourth graders performed at or above the Basic level in math on the *NAEP*, and 72% of Rhode Island eighth graders and 70% of U.S. eighth graders performed at or above the Basic level in math on the *NAEP*. Rhode Island is one of only eight states that saw decreases in both fourth- and eighth-grade math achievement between 2013 and 2015 as measured by the *NAEP* math tests.

Improvements in Education Outcomes

- **More early care and education programs are participating in BrightStars.** As of January 2016, there were 690 licensed early care and education programs with an active BrightStars quality rating, up from 669 in January 2015 and more than three times as many as were rated in January 2014. BrightStars is Rhode Island's Quality Rating and Improvement System (QRIS). BrightStars conducts program quality assessments using research based standards for licensed centers (including child care, preschool and Head Start), family child care homes, and public schools. As of October 2014, all programs serving children participating in the Child Care Assistance Program are required to have a BrightStars rating.
- **More children are enrolled in State Pre-K.** As of the 2015-2016 school year, there are 33 State Pre-K classrooms in Rhode Island with a total of 594 children enrolled. Of these children, 70% are low-income.



- Including the 1,391 low-income four-year-olds enrolled in Head Start in Rhode Island, approximately **33% of the state's low-income four-year-olds are enrolled in a public preschool program** (State Pre-K or Head Start). Children who attend high-quality preschool make substantive developmental, academic, language, and social gains that can persist well into later school years, and are less likely to be retained a grade or enrolled in special education.
- **More children enrolled in full-day kindergarten.** In the 2015-2016 school year, 88% of Rhode Island kindergartners statewide and 100% of kindergartners in the four core cities were in full-day kindergarten. As of the 2015-2016 school year, 31 of the 35 elementary school districts and all of the public charter elementary schools in Rhode Island offer universal access to full-day kindergarten programs. Children in full-day kindergarten make significant gains in early reading, math, and social skills when compared with children in half-day kindergarten.
 - Three school districts are operating universal full-day kindergarten for the first time in the 2015-2016 school year: Johnston, North Kingstown, and Tiverton.
 - There are only four districts in Rhode Island that do not offer full-day kindergarten for all students: Coventry, Cranston, East Greenwich, and Warwick.
- **Suspensions continue to decline.** Since the 2009-2010 school year, the number of out-of-school suspensions in Rhode Island has decreased by 47%. In 2014-2015, more than one-half of out-of-school suspensions were for non-violent offenses, such as insubordination or disrespect (29%) and disorderly conduct (23%).

- Of all disciplinary actions during the 2014-2015 school year, 9% (2,515) involved elementary school students, 39% (10,506) involved middle school students, and 51% (13,656) involved high school students.
 - Kindergartners received 203 disciplinary actions, including 187 out-of-school suspensions.
- **Programs are targeting Summer Learning Loss.** Low-income elementary school students lose up to two months of reading skills over the summer while their higher-income peers make slight gains. Over time, this summer learning loss adds up and widens existing achievement gaps. During the summer of 2014, 3,193 Rhode Island children in grades Pre-K-12 participated in 21st Century Community Learning Center programs in 45 schools, and over 1,600 Rhode Island children in grades K-12 participated in 17 Hasbro Summer Learning Initiative programs. Students who participated in these two summer learning programs had improved reading and math skills and fewer unexcused absences and disciplinary incidents.
 - **Increased graduation rates.** The four-year graduation rate for Rhode Island's Class of 2015 was 83%, up from 81% for the Class of 2014, and 70% for the Class of 2007. The graduation rate for the four core cities is 75%, up from 71% for the Class of 2014.

Challenges in Education Outcomes

- **Not enough high-quality early learning program options.** Launched in 2009, BrightStars conducts program quality assessments using research based standards for licensed centers (including child care, preschool and Head Start), family child care homes, and public schools. Programs participating in BrightStars receive a star rating and develop a quality improvement plan across six quality domains. As of January 2016, there were 690 licensed early care and education programs with an active BrightStars quality rating. Fewer than one in five (17%) licensed early learning centers had met the benchmarks for a high-quality rating of four or five stars and 2% of family child care homes had received a high-quality rating of four or five stars. Thirteen percent of public schools serving preschoolers had a high-quality rating.
- **Insufficient access to Early Head Start and Head Start.** As of October 2015, there were 257 eligible pregnant women and children ages birth to three on waiting lists for Early Head Start Services and 368 eligible preschool children on waiting lists for Head Start services in Rhode Island. All Rhode Island Head Start programs maintain active waiting lists of eligible children.
- **Chronic absence (students who are absent 18 days or more) is a problem at all grade levels.** Students who are absent from school miss opportunities to learn and develop positive relationships within the school community. In Rhode Island during the 2014-2015 school year, 14% of children in grades K-3, 16% of middle schoolers, and 26% of high schoolers were chronically absent.
 - One-third (33%) of Rhode Island's low-income middle and high school students were chronically absent in 2014-2015, compared with 12% of higher-income students.

- **Disparities in suspensions and disciplinary actions.** In Rhode Island and nationally, Black and Hispanic students are more likely to be suspended than their White peers despite the fact that there is no evidence that these students have more serious patterns of rule breaking.

Disparities in School Discipline by Special Education Status and Race/Ethnicity, Rhode Island, 2014-2015		
	% OF STUDENTS ENROLLED	% OF SUSPENSIONS
Students With Disabilities	15%	30%
White Students	61%	44%
Asian Students	3%	1%
Black Students	8%	14%
Hispanic Students	24%	35%
Native American Students	1%	2%

Source: Rhode Island Department of Education, 2014-2015 school year. Detailed data by district is available at www.ride.ri.gov

- **Rhode Island has an access gap for college enrollment.** Among the Rhode Island Class of 2014, 63% immediately enrolled in college. There are large gaps in four-year college access between low- and higher-income students: 25% of low-income students immediately enrolled in a four-year college, compared to 57% of higher-income students.

NATIONAL RANKINGS

1st is best; 50th is worst

- **Rhode Island ranks in the top 10 states** in the following indicators: teen death rate (1), infant mortality rate (3), child death rate (4), teen birth rate (7), children’s health insurance (7), and 4th-grade NAEP reading proficiency (9).
- **Rhode Island ranks in the top 25 states** in the following indicators: Preterm births (12), Low birthweight infants (15), Teens not in school and not working (20), and 8th-grade NAEP reading proficiency (25).

The full 2016 *Rhode Island Kids Count Factbook* is available at [http:// bit.ly/RIKCFactbook](http://bit.ly/RIKCFactbook).

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Rhode Island KIDS COUNT is a statewide children’s policy organization that works to improve the health, economic well-being, safety, education and development of Rhode Island children.