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#RIFactbook

Federal programs under threat

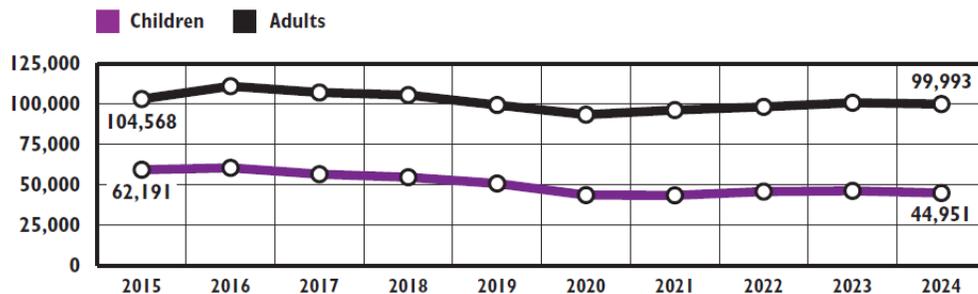
Children need stability, care, and opportunity to thrive. However, many programs that Rhode Island children and families rely on are currently under threat.

We have chosen to highlight the programs that depend on federal funding, to call attention to what's at stake if the federal government eliminates or dramatically cuts funding for these important programs.

The following programs ensure that our children are fed, sheltered, educated, and cared for. We must ensure that families will be able to access the programs that help them thrive.

- **SNAP:** SNAP (the Supplemental Nutrition Assistance Program) is an important anti-hunger program that helps individuals and families purchase food when they have limited income, face unemployment or reduced work hours, or experience a crisis.

Participation in the Supplemental Nutrition Assistance Program, Children and Adults, Rhode Island, 2015-2024

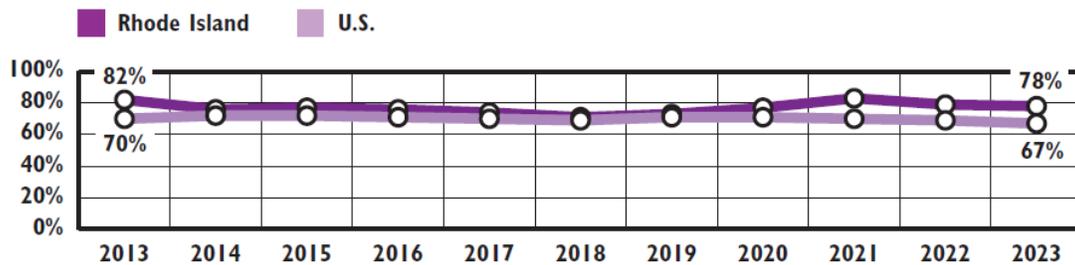


- In Rhode Island during October 2024, **44,951 children received SNAP benefits** that provided their families with monthly benefits they could use to purchase food at retail stores and farmers markets.
 - 70% of SNAP households had gross incomes below the federal poverty level (\$25,820 for a family of three in 2024).
 - In October 2024, the average monthly SNAP benefit for a family of three in Rhode Island was \$766.
 - Participation in SNAP in early childhood is associated with improvements in short- and long-term health outcomes, improved high school graduation rates, and increases in adult earnings.
- **Health insurance:** Children who have health insurance coverage are healthier and have fewer preventable hospitalizations than those who are uninsured.
 - Rlite Care is Rhode Island's Medicaid/CHIP managed care health insurance program. In December 2024, **117,890 children under age 19 were enrolled in Rlite Care.**

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- RItE Care also serves as the health care delivery system for specific groups of children who qualify for Medical Assistance based on a disability or because they are in foster care or receiving an adoption subsidy.
 - Children insured through Medicaid and Children’s Health Insurance Program (CHIP) are more likely to receive primary and preventive medical and dental care, have access to specialists, and have fewer unmet health needs than uninsured children.
 - Children are more likely to be insured if their parents also have health insurance.
- **Immunizations:** Vaccines interact with the immune system to produce antibodies that protect the body if it is later exposed to disease.

Fully Immunized Children*, Rhode Island and United States, 2013-2023



**Fully immunized children received the 4:3:1:3:3:1:4 series. In 2018, the National Immunization Survey-Child (NIS-Child) methodology changed from coverage among children 19 to 35 months of age to coverage by age 24 months.*

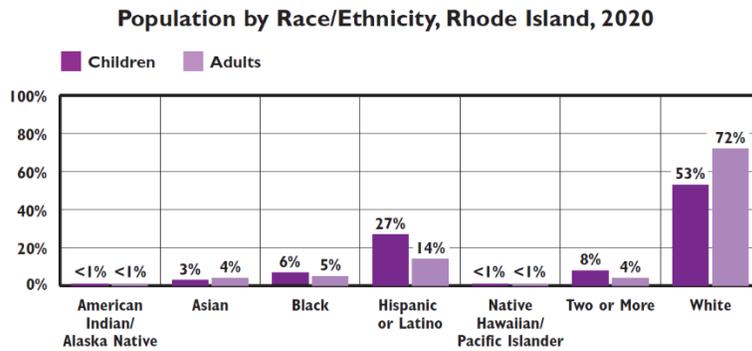
- **In 2023, 78% of Rhode Island’s children were fully immunized by age 24 months, above the national average of 67%, but down from 82% in 2013.**
- Timely and complete immunization protects children against many infectious diseases that were once common and resulted in death or disability. The benefits of immunization include improved quality of life and productivity, reduced health spending, and prevention of illness and death.
- High vaccination levels also protect society by reducing disease outbreaks and reducing exposure for medically vulnerable children who cannot be vaccinated for medical reasons.
- Despite their well-demonstrated safety, misinformation leads some parents to request an alternate schedule or refuse some vaccines, leaving all children at greater risk if an outbreak occurs.
- Although all major religions support routine childhood immunizations, Rhode Island allows parents to request religious exemptions from vaccines required to attend child care or school. In rare cases, a doctor will determine that a child is medically exempt from immunization requirements.
- In the 2024-2025 school year, 185 kindergarten students and 382 seventh grade students had exemptions from vaccination requirements. Ninety percent of kindergarten

exemptions and 93% of 7th grade exemptions were for religious reasons.

- **Head Start:** Head Start is a federally funded comprehensive early childhood program for preschool children ages three through five who are low-income and/or have high needs.
 - **In October 2024, there were 1,438 children enrolled in Head Start, up 3% from 2023 but down 36% from 2015.**
 - In October 2024, there were 493 eligible children on a waiting list for Head Start.
 - Head Start programs deliver early education; dental, medical, and mental health support; nutrition services, and developmental screenings. Families are involved in program decision making, build parenting skills, and are supported to enter and remain in the workforce.
 - Rhode Island is one of 14 states and Washington, DC that invest state funds in Head Start and/or Early Head Start to serve more children, support more competitive teacher salaries, and help programs meet their federally required 20% funding match.
- **School meals:** Universal School Meal Programs provide free breakfast and/or lunch to all children regardless of income, guaranteeing all children access to nutritious meals. Providing free meals for all students eliminates the stigma associated with students receiving subsidized priced meals or accruing meal debt, increases participation, and reduces administrative burdens on school districts.
 - **In Rhode Island, in December 2024, 35,314 children participated in the School Breakfast Program and more than half of all students (75,933) participated in the National School Lunch Program.**
 - Enacted in 2010, the federal Community Eligibility Provision (CEP) is a pathway for schools and districts with 25% or more students identified as low-income to provide free universal school meals to all students. However, the CEP program is under threat. If the eligibility threshold for schools to be able to participate in CEP is increased from 25% to 60%, the number of Rhode Island children eligible for free meals would be cut in half, from 98,092 to 49,155 students.

In addition to these vital programs, diversity, equity, and inclusion (DEI) is under attack from the federal government.

- **Diversity is an asset:** Sharing viewpoints and spending time with individuals from different backgrounds, experiences, and perspectives fosters growth and builds community.
- **Increasing racial and ethnic diversity in Rhode Island:** Rhode Island's children are diverse in race, ethnicity, language, and country of origin.



- Children in Rhode Island are more likely to be identified as People of Color than adults. In 2020 in Rhode Island, 47% of children under age 18 were People of Color, compared with 28% of adults.
- In 2020 in Rhode Island, 53% of children under age 18 were white, 8% were Two or more races, 6% were Black or African American, 3% were Asian, 1% identified as Some other race, and less than 1% were American Indian or Alaska Native. In 2020, 27% of children living in Rhode Island were Hispanic.
- **Sexual orientation and gender identity** are other important facets of diversity among youth. According to the *2023 Youth Risk Behavior Survey*, 17.5% of high school students in Rhode Island described themselves as lesbian, gay, or bisexual. In addition, 5.2% described themselves as other and 4.8% as questioning. Among high school students, 3.9% described themselves as transgender.
 - In 2023, LGBTQ+ Rhode Island high school students reported higher rates of sadness and hopelessness than their peers.
 - Youth who identify as lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ+) are overrepresented in the homeless youth population, some of whom report being forced out of their homes by parents who disapprove of their sexual orientation or gender identity.
- **Persistent disparities in child well-being:** Diversity is an asset, however, there are persistent disparities in child well-being by race and ethnicity.
 - Racial and ethnic disparities in child well-being can be traced to the founding of the United States and the inequitable practices and policies that harmed Families of Color. From the removal of Native Americans from their lands and the use of Africans as enslaved labor, the country's first People of Color were prevented from fully participating in the economy while simultaneously building wealth for the country and its white citizens.
 - Racism became an economic tool infused into laws, policies, and practices that have harmed Asian, Black, Latino, Native American, and low-income white people for centuries. Substantial changes to these laws and policies did not occur until the late 1960s, and the harm continues to reverberate in the lives of Children of Color.

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- Long-standing racial and ethnic disparities continue. **Please see page 18 for further information on the root causes of racial and ethnic disparities in child well-being.**
 - Between 2019 and 2023, 29% of American Indian and Alaska Native, 28% of children of Some other Race, 25% of Hispanic, 24% of Black, and 22% of children of Two or more races in Rhode Island lived in poverty, compared to 7% of Asian/Pacific Islander children and 7% of white children.
 - During 2024 in Rhode Island, Black youth were 11 times more likely to be at the Rhode Island Training School compared to white youth and were five times more likely compared to youth of all races.
 - In Rhode Island, the median family income for Latino families is \$65,799 compared to \$120,491 for white families.

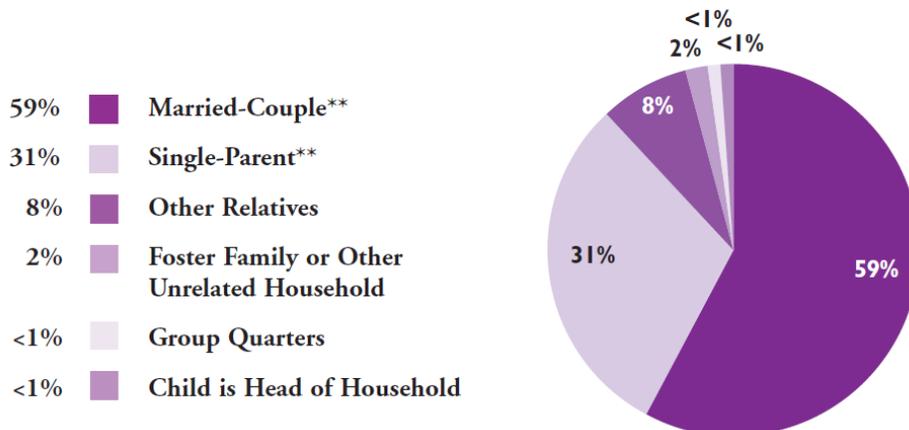
Equity is a way forward: Unacceptable disparities will continue to persist among children and families if equity and equitable policies and investments are removed.

New Rhode Island KIDS COUNT Factbook indicators

The 2025 Rhode Island KIDS COUNT Factbook includes three new indicators – Family Structure, Maternal Health, and Infant Health.

- **Family Structure (pages 12-13):** *Family Structure is the percentage of children under age 18 who live in different family structures.*
 - In the United States, one in four parents living with a child is unmarried (25%). This marks a dramatic change from 50 years ago, when fewer than one in 10 parents living with their children were unmarried (7%). The profile of unmarried parents has also shifted so that now 35% of all unmarried parents are living with a partner.
 - In addition, in the U.S. families are now four times more likely to live in multigenerational households than they were 50 years ago. Multigenerational households now account for 18% of the population.
 - Between 2019 and 2023, 4% of Rhode Island families lived in multigenerational households.
 - According to the 2020 Census, 7% of Hispanic families, 7% of Asian families, and 6% of Black families live in multigenerational households in Rhode Island, compared to 3% of white families. Among major racial and ethnic groups, multigenerational families are less likely to live in poverty.
 - Twelve percent of U.S. households say child care is a big factor in their living arrangements, with 9% of upper income adults considering it a factor, compared to 32% of lower-income adults.
 - In Rhode Island, children are almost twice as likely to live in married-couple households (59%) than in single-parent households (31%). An additional 8% of children live with a grandparent or another relative.

Children Under Age 18 by Family Structure Rhode Island, 2019-2023



- **Maternal Health (pages 62-65):** Maternal health before pregnancy (preconception), during pregnancy, and after birth (postpartum) impacts health outcomes for mothers and children.

- Currently, there is a maternal health crisis nationally and in Rhode Island. Beyond that, there are persistent racial and ethnic disparities that disproportionately impact health outcomes for Black, Indigenous, and Women of Color.
- Access to primary care for women of reproductive age is a vital component of successful pregnancy care.
 - In Rhode Island between 2019 and 2023, 16.0% of women who gave birth did not begin care until the second or third trimester, if at all.
- Perinatal mood and anxiety disorders are the most common complication of pregnancy and the first year postpartum.
- Untreated perinatal mood and anxiety disorders are estimated to cost Rhode Island \$9.7 million annually.
- Across the United States, homicide is one of the leading causes of pregnancy-associated death. Forty percent of pregnancy-associated homicides are related to intimate partner violence. In Rhode Island, about three quarters of women who had a well visit in the 12 months before pregnancy reported that their provider talked to them about intimate partner violence.
- Food and economic security in pregnancy are vital for maternal health. Women living in poverty are at higher risk for poor pregnancy outcomes, and pregnancy exacerbates income disparities that have far-reaching consequences for children and families.
 - In Rhode Island in 2023, nearly one in five women (19.7%) reported food or housing insecurity in the 12 months before birth.
- **Infant health (pages 66-69):** Infant health is the rate of preterm births, low birthweight infants, and infant mortality.
 - Children born preterm or with low birthweight may experience physical disabilities, learning difficulties, and mental or behavioral issues later in life.
 - Preterm birth and low birthweight contribute to infant mortality. Children born at very low birthweight are almost 100 times more likely to die before age one than children born at normal birthweight. Infant mortality rates are associated with maternal health, race, and ethnicity; quality of and access to medical care; socioeconomic conditions; and public health practices.

Preterm Birth, Low Birthweight, and Infant Mortality Rates in Rhode Island and the United States, 2023			
	Preterm Births	Low Birthweight	Infant Mortality Rate (Rate Per 1,000 Live Births)
RI	11%	7.7%	4.8
US	12%	8.6%	5.6
National Rank*	<i>7th</i>	<i>15th</i>	<i>14th</i>
New England Rank**	<i>4th</i>	<i>4th</i>	<i>4th</i>

- Social determinants (factors that influence health, such as economic well-being, education access, health care, community/environment, social context) are important to consider in preterm birth and low birth weight disparities. Stressors including income

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inequality, access to safe and affordable housing, toxic environmental exposures, and access to reproductive and health care, along with racism, discrimination, and associated social stressors are additional risk factors that disproportionately impact Black women and Women of Color.

Economic Well-Being

Children and families continue to experience homelessness:

- In Rhode Island in 2024, 479 families with 951 children stayed at an emergency homeless shelter, domestic violence shelter, transitional housing facility, or hotel paid for by DCYF.
- Children made up almost one fourth (22%) of the 4,349 people who used emergency homeless shelters, domestic violence shelters, and transitional housing in 2024.
- As of January 21, 2025, **95 families with 100 children reported that they had slept outside for at least one night in the previous month.**
- During the 2023-2024 school year, Rhode Island public school personnel identified 1,966 children as homeless.
 - Of these children, 65% (1,275) lived with other families (“doubled up”), 18% (345) lived in hotels or motels, 16% (313) lived in shelters, and 2% (33) were unsheltered.
 - **The number of students identified as homeless in Rhode Island has increased by 35% (505 students) from the 2021-2022 school year.**

Child support:

- As of December 1, 2024, there were 4,064 children enrolled in the RI Works cash assistance program who had an active case in the RI Office of Child Support Services system.
- In Rhode Island, only the first \$50 of child support paid on time each month is passed through to the custodial parent. The rest is retained as cost-recovery for cash assistance. The state and federal government retained \$6.9 million of child support money collected – resources that could have gone to poor families.

States can pass through up to \$100 for one child and \$200 for two or more children without having to repay the federal government its portion of child support payments. Colorado, Illinois, and Michigan pass through all current child support, and Maryland families receive up to \$100 for one child and up to \$200 for two or more children.

Cost of housing:

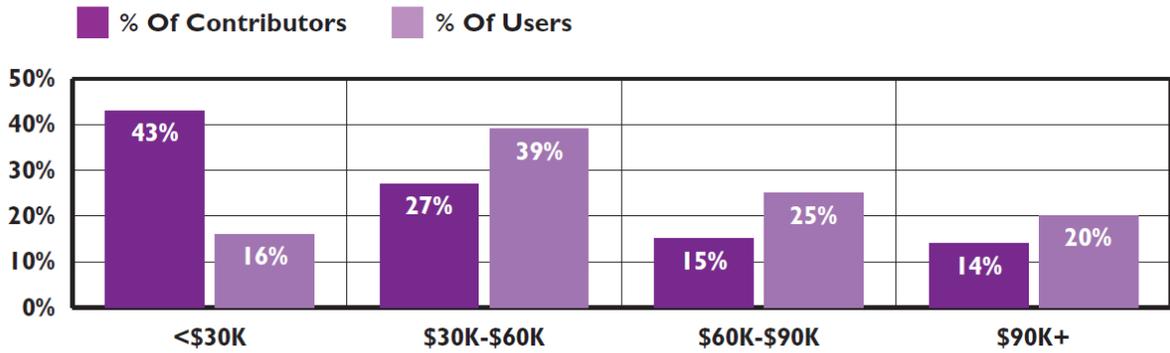
- **Rents have increased 17% from 2020 to 2024, even when adjusting for 2024 dollars.**
- Rhode Island law establishes a goal that at least 10% of every community’s housing stock qualify as Low- and Moderate-Income Housing (LMIH). Currently, only four of Rhode Island’s 39 cities and towns (Central Falls, Newport, Providence, and Woonsocket) meet that goal.
- In 2024, the Rhode Island General Assembly approved a package of bills designed to address the state’s housing crisis, including legislation related to zoning, permitting, planning, the sale of abandoned property, and accessory dwelling units.
- However, Rhode Island continues to heavily rely on federal funding to meet its housing needs. From FY 2022 to FY 2024, Rhode Island used \$332.2M in federal State Fiscal Recovery Funds to support the state’s efforts, but with these funds ending, the state will need to rely more heavily on funds from housing bonds, the state’s pilot low-income tax credit program, and other state sources to continue to meet the need.

Paid Family Leave:

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- Rhode Island's Temporary Caregiver Insurance (TCI) program, launched in 2014, provides up to seven weeks of partial wage replacement benefits and will provide eight starting in 2026.
- In 2024, 43% of individuals contributing to TCI earned less than \$30,000, yet only 16% of all approved TCI claims were for individuals with wages in this category.
- High-wage workers are much more likely to have access to paid family leave than low-wage workers and more likely to be able to benefit from a program that offers only partial wage replacement.

Approved Temporary Caregiver Insurance Claims Compared to Contributions by Wage Range, 2024



Health

- **Rhode Island has dropped from 2nd in the nation to 10th in the nation for children without health insurance.** In 2023, 3.3% of Rhode Island's children under age 19 were uninsured.
- **Family home visiting** is a prevention strategy used to support pregnant and parenting families with babies and young children to promote healthy child development. **Staffing and financing challenges reduce services for families.** The number of families in Rhode Island receiving rapid response and evidence-based home visiting services has continued to decline. In 2024, 1,970 families received at least one First Connections home visit, down 42% from 2021, and 827 families were participating in a long-term evidence-based home visiting program in Rhode Island, down 37% from 2021.
- **Mental health:**
 - Mental health in childhood and adolescence is defined as the achievement of expected developmental, cognitive, social, and emotional milestones and the ability to use effective coping skills. In SFY 2024, 1,294 children under age 19 enrolled in Medicaid/RIte Care were hospitalized due to a mental health related condition (up from 959 in SFY 2023), and 3,308 children had a mental health related emergency department visit (up from 2,598 in SFY 2023).
 - **Maternal mental health:** Untreated mental health disorders during pregnancy and after having a baby can lead to negative outcomes such as preterm birth, trouble bonding with infants, and difficulty breastfeeding.
 - In addition to the impacts on individual families, untreated perinatal mood and anxiety disorders are estimated to cost Rhode Island \$9.7 million annually.
 - Identification and treatment is crucial in managing mental health during pregnancy and postpartum.
 - Rhode Island's MomsPRN (psychiatry resource network) program is a statewide teleconsultation program that supports health care professionals in identifying and managing the mental health and substance use needs of pregnant and postpartum patients. Between 2019 and 2024, RI MomsPRN has helped over 2,500 perinatal patients.
- **Dental health:** Tooth decay is the most common chronic disease among children. Poor oral health has immediate and significant negative impacts on children's overall health, growth and development, school attendance, and academic achievement.
 - Fifty-five percent (73,482) of the children who were enrolled in RIte Care, RIte Share, or Medicaid fee-for service on June 30, 2024 received a dental service during State Fiscal Year 2024.
 - In Rhode Island, 47% of children under age 18 with Medicaid received a preventive dental visit in 2023, compared to 65% of children with private coverage.
 - In Rhode Island in 2023, 413 children and youth aged 21 or younger were treated for dental issues in emergency departments. This is an increase from 2022, when 341 children and youth were treated for dental issues in emergency departments.
 - In Rhode Island in 2023, 69 children and youth aged 21 or younger were hospitalized with a diagnosis that included a dental problem. That same year, 13 children and youth aged 21 or

younger were hospitalized with a dental problem as the primary reason for the hospitalization. This is slightly higher than the year prior.

- **Children affected by lead exposure:** Lead exposure is a preventable childhood disease. Even at very low levels, lead exposure can cause irreversible damage, including slowed growth and development, learning disabilities, behavioral problems, and neurological damage.
 - There is no safe lead level in children. In 2021, the Centers for Disease Control and Prevention lowered its blood reference value from 5 µg/dL to 3.5 µg/dL, aligning with the top 2.5% blood lead levels (BLLs) of children ages one to five. **This year’s Factbook provides the first data on children in each city and town affected by lead exposure based on this new standard.** This new lower reference value will allow parents and health officials to take corrective actions sooner for children with the highest elevated blood lead levels.
 - Children living in the four core cities (9.2%) were almost three times as likely as children in the remainder of the state (3.2%) to have confirmed elevated blood lead levels of ≥3.5 µg/dL.
- **Healthy Weight:** Previously called *Child Overweight and Obesity* in older *Factbooks*, Healthy weight is the percentage of children whose body mass index (BMI) meets the definition for healthy weight. While BMI is the most used metric to assess healthy weight, it is beginning to be understood as a flawed metric that does not appropriately measure individual risk on its own.

Healthy Weight Among Children Ages 6-17	
2022-2023	
RI	58%
US	59%
National Rank*	35 th
New England Rank**	6 th

- **Alcohol, Tobacco, and Substance Use:**
 - E-cigarettes and electronic vapor products (vapes/vaping) contain, among other chemicals, nicotine which is highly addictive and can harm brain development. Some e-cigarette pods have as much or more nicotine as a pack of cigarettes. Nationally in 2024, 8% of high school students reported current e-cigarette use. In Rhode Island in 2023, 17% of high school students reported the current use of e-cigarettes and 32% reported ever using e-cigarettes.
 - Cigarette taxes are a potential funding stream for state tobacco control programs, as well as a strategy for reducing consumption among kids and adults. The FY 2025 budget included a 25-cent tax increase on the price of cigarettes and a tax on the purchase of Electronic Nicotine Delivery Systems (ENDS), including vapes, and codified existing regulations prohibiting ENDS flavors, other than menthol.

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Current Substance Use, Rhode Island Middle School and High School Students, 2022-2024

	ALCOHOL USE*	CANNABIS USE* (EDIBLE)	CANNABIS USE* (SMOKING)	CIGARETTE USE*	E-CIGARETTE USE*	IN-HALENTS	PRESCRIPTION DRUG MISUSE**
Middle School Students, 2022	5.2%	NR	5.4%	1.8%	6.1%	3.1%	1.8%
Middle School Students, 2024	4.8%	2.4%	7.8%	2.0%	5.6%	3.5%	1.9%
High School Students, 2022	14.5%	NR	14.9%	3.5%	12.9%	2.1%	2.3%
High School Students, 2024	10.0%	3.5%	10.9%	2.8%	7.1%	2.0%	2.1%

- In 2024, 4.8% of Rhode Island middle school students reported current alcohol consumption (down from 5.2% in 2022), 5.6% reported current use of e-cigarettes (down from 6.1% in 2022), and 2.4% reported current edible cannabis use.
- In 2024, 7.8% of Rhode Island middle school students reported currently smoking cannabis (up from 5.4% in 2022).
- In 2024, 10.9% of Rhode Island high school students reported currently smoking cannabis (down from 14.9% in 2022).

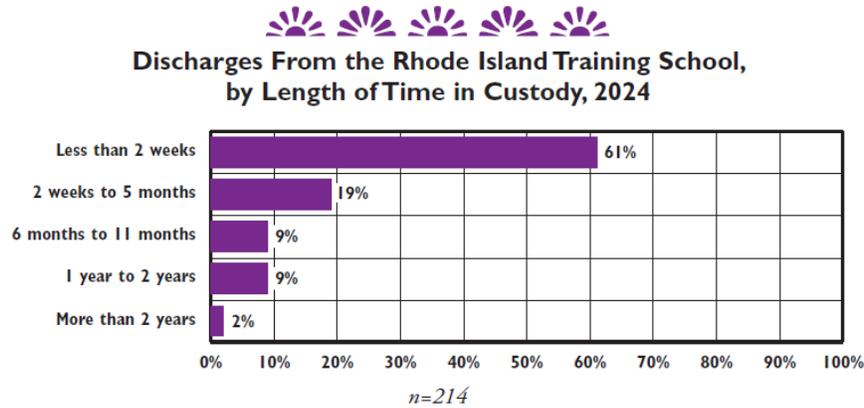
Safety

- According to the *2023 Rhode Island Youth Risk Behavior Survey*, 9% of Rhode Island high school students reported attempting suicide one or more times in the 12 months before the survey was administered. Rates were higher for Hispanic (12%) and Black (10%) youth than for white youth and higher for gay, lesbian, and bisexual youth (17%) and for other/questioning youth (20%) than for heterosexual youth (6%).
- In 2023 in Rhode Island, 209 teens ages 13 to 19 were hospitalized after a suicide attempt, a 37% decrease from 328 teens in 2020.
- In 2024, 263 young adults ages 18-24 stayed at an emergency shelter, or transitional housing facility in Rhode Island, including 162 unaccompanied young adults, 56 parenting young adults, and 53 young adults who were sheltered with their parents. In January 2025, outreach workers identified 52 young adults ages 18 to 24 who had slept outside or in their cars for at least one night during the previous 30 days, including 13 parenting young adults.
- Between 2019 and 2023 in Rhode Island, 16% (11) of the 69 injury deaths of children and youth under age 20 were the result of firearms. All the child deaths due to firearms were among youth over the age of 14. Between 2019 and 2023 in Rhode Island, fewer than five youth ages 15 to 19 committed suicide using a firearm.
- The American Academy of Pediatrics recommends public policies to protect children from gun injuries and violence. Among these recommended policies are bans on assault weapons and safe firearm storage. Rhode Island does not currently have a ban on assault weapons. During 2024, the Rhode Island General Assembly passed legislation that requires the safe storage of firearms.

Youth Justice

- In 2024 in Rhode Island, 49% of all cases referred to Family Court were diverted instead of proceeding to a formal court hearing, up from 35% in 2023.
- In 2024, 870 youth were referred to the Truancy Court by schools, a 32% decrease from 2023.
- Overwhelmingly, youth spend only a few weeks at the Training School.

Youth in the Justice System



- Of the 114 youth ages 13 to 18 who received educational services at the Training School during the 2023-2024 academic year, 40% (46) received special education services based on Individualized Education Programs (IEPs).
- The average age of youth at the Training School in 2024 was 16 years, however, 6% (12) of youth who passed through the Training School at any point in 2024 were under the age of 14. Internationally, the United Nations has advised countries to establish a minimum age of criminal responsibility of at least 14. In recent years, many states have taken measures to reassess both upper and lower age limits in their youth justice systems to align with advances in adolescent brain development research.

Child Welfare

- In 2018, Rhode Island established the Voluntary Extension of Care (VEC) program, allowing youth in foster care ages 18 to 21 the option of continuing to receive services. VEC helps older youth in care transition to adulthood by supporting them in setting their own goals for housing, education, employment, health care, social services, and social activities while providing guidance in decision-making and when challenges arise. The percentage of youth in VEC who are in full time postsecondary education increased from 16% in 2022 to 22% in 2023 and now 30% in 2024.
- The total DCYF caseload on December 1, 2024 also included 59 children in out-of-state placements/other agency custody compared to 70 children in out-of-state placements/other agency custody the previous year.

Education

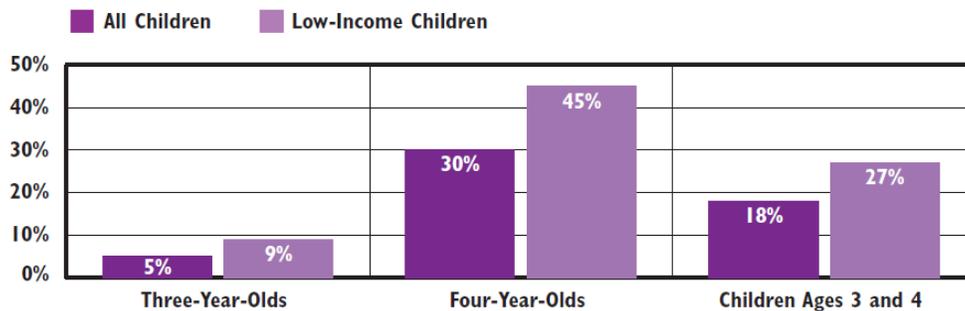
- New chart on the cost of child care in Rhode Island:

Median Annual Market Price for Full-Time Child Care, Rhode Island, 2024

PROGRAM TYPE	MEDIAN PRICE PER CHILD
Child Care Center (infant care)	\$16,770
Child Care Center (preschool care)	\$14,560
Family Child Care Home (infant care)	\$14,040
Family Child Care Home (preschool care)	\$12,870

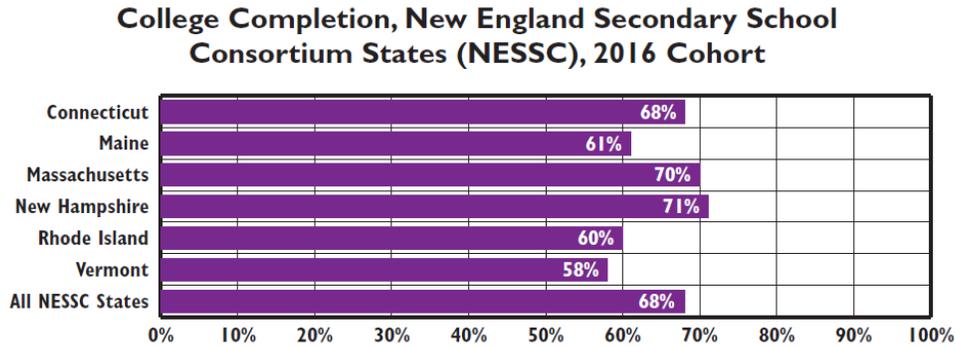
- All programs serving children participating in the Child Care Assistance Program and in RI Pre-K are required to have a BrightStars rating. All public schools that serve children ages three through five must apply for a BrightStars rating by June 2025. Since 2021, the percentage of programs with a high-quality rating has increased for early learning centers (from 25% to 26%), family child care homes (from 1% to 3%), and public schools serving preschoolers (from 31% to 42%).
- As of October 2024, there were 3,877 children ages three and four enrolled in Head Start, RI Pre-K, or both during the two years before kindergarten, up 12% from 3,477 in 2023.

Percentage of Children Ages 3 and 4 Enrolled in Head Start and/or RI Pre-K, Rhode Island, 2024-2025



- Preschool-age children in the four core cities were less likely to receive a developmental screening (33%) than children in the remainder of the state (40%). Children in the four core cities were less likely to be referred for evaluation and to be determined eligible for special education services than children in the remainder of the state.
- Gaining national attention, **Rhode Island was the first state to develop a real-time dashboard for tracking attendance in schools and identifying students who were on track to be chronically absent** after the COVID-19 pandemic.
- During the 2023-2024 school year in Rhode Island, 9% of teachers were chronically absent, down 28% since the 2021-2022 school year.

- During the 2023-2024 school year, kindergarteners received 219 disciplinary actions, including 182 out-of-school suspensions.
- During the 2023-2024 school year, the number of out-of-school suspensions for all students (9,208) was lower than in the 2018-2019 school year (9,981), showing a modest decline. More than 5,014 (54%) of out-of-school suspensions were for non-violent offenses.
- **Rhode Island experienced the highest growth rate of Multilingual Learner (MLL) students in the nation between 2010 and 2020.** By 2020, 12.2% of its student population were MLLs, ranking fifth highest among all states. Compared to New England states, Rhode Island has the largest percentage of MLL students.
 - In 2024, funding for Multilingual Learners was incorporated into the core funding formula. Additionally, the Rhode Island Department of Education updated the MLL regulations for the first time in 17 years to better align with federal standards.



- Education has a positive impact on the likelihood of finding and maintaining employment. Between 2019 and 2023, the unemployment rate for Rhode Island adults ages 25 to 64 with a bachelor's degree or higher was 2.8%, compared with 6.4% for high school graduates and 10.6% for those with less than a high school diploma.