DEFINITION

Racial and ethnic disparities is the gap that exists in outcomes for children of different racial and ethnic groups in Rhode Island. Child well-being outcome areas include economic wellbeing, health, safety, and education.

SIGNIFICANCE

Rhode Island's children are diverse in racial and ethnic background. In 2020 in Rhode Island, less than 1% of children under 18 were American Indian or Alaska Native, 3% were Asian, 6% were Black or African American, 27% were Hispanic or Latino, less than 1% were Native Hawaiian or Other Pacific Islander, 1% were Some other race, 8% were Two or more races, and 53% were white.¹

Children who live in poverty, especially those who experience deep poverty in early childhood, are more likely to have health, behavioral, educational, economic, and social problems.^{2,3}
Between 2017 and 2021, 15% of all Rhode Island children lived in poverty, 76% of whom were Children of Color.⁴

Black, Latino, and American Indian children are more likely to live in neighborhoods of concentrated poverty and face challenges above and beyond the burdens of individual poverty. In Rhode Island, 16% of Black children and 13% of Hispanic children live in concentrated poverty compared to only 1% of white

children.⁶ In 2020, more than half (59%) of Rhode Island's Children of Color lived in one of the four core cities (those cities with the highest percentages of children living in poverty), and more than three quarters of the children in Central Falls (90%) and Providence (85%) were Children of Color.⁷

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 American Indians 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. 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. 8,9,10

Long-standing disparities in wealth continue to persist between families in different racial and ethnic groups.¹¹ Children in immigrant families (defined as children living with at least one foreignborn parent) also face additional barriers. In 2021, 28% (58,000) of Rhode Island children were living in immigrant families. More than half (54%) of Rhode Island's Hispanic children live in an immigrant family.^{12,13}

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Root Causes of Racial and Ethnic Disparities in Child Well-being

- ◆ Economic Well-being: Historic policies such as the *Homestead Acts* and the *Federal Housing Act* built the foundation of the American middle class by facilitating homeownership; however, People of Color were excluded from many of these wealth-building opportunities due to discriminatory policies in housing and banking. ^{14,15} The results of this past discrimination and current systemic racism can be seen in current disparities in homeownership, an important component of wealth for many families in the United States and a tool to building intergenerational wealth. ¹⁶
- ♦ Health: Health care only accounts for 10-20% of an individual's overall health outcomes and is just one of the social determinants of health, which is defined as the conditions and environments where people are born, live, learn, work, and play that greatly impact health outcomes.¹¹ These social determinants of health, including economic stability, education access, neighborhood and the built environment, and social context account for over 80% of health outcomes. Inequities in these determinants along with pervasive racial bias and unequal treatment of Communities of Color from the medical system contribute to significant unintended outcomes and disparities.¹¹8,¹¹9</sup>
- ◆ Safety: Structural racism (e.g., policies that concentrate policing in Communities of Color), institutional racism (e.g., policies that disproportionately place Children of Color out of their homes), and racial bias and discrimination (e.g., beliefs held by workers about people from different racial or ethnic groups) all contribute to worse outcomes for Children of Color who come in contact with these systems. ^{20,21,22}
- ♦ Education: An increase in segregation of schools has resulted in students in schools with high concentrations of low-income students and Students of Color having unequal educational opportunities.²³ Additionally, students living in poverty often face a host of challenges outside the classroom that can negatively impact academic performance, including inadequate housing, less access to health care, lower parental educational levels, and fewer opportunities for enriching after-school and summer activities.²⁴,2⁵5



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

	ALL RACES	AMERICAN INDIAN/ ALASKA NATIVE	ASIAN	BLACK	HISPANIC	NATIVE HAWAIIAN OTHER PACIFIC ISLANDER	WHITE
Children in Poverty	15%	56%	12%**	25%	30%*	12%**	10%
Births to Mothers with <12 Years Education	11%	23%	7%	12%	25%	24%^	7%
Unemployment Rate	3.5%	NA	NA	5.0%	6.0%	NA	3.0%
Median Family Income	\$95,198	\$40,053	\$108,345	\$69,481	\$52,473	\$43,692	\$103,555
Homeownership	62%	22%	50%	34%	36%	14%	67%

Sources: Children in Poverty data are from the U.S. Census Bureau, American Community Survey, 2017-2021. Tables S1701, B17020A, B17020B, B17020C, B17020D & B17020L. **Data is for Asian/Pacific Islanders Maternal Education data are from the Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2017-2021 (race data is non-Hispanic). Unemployment Rate data are from the Bureau of Labor Statistics, Local Area Unemployment Statistics, 2022. Median Family Income data are from the U.S. Census Bureau, American Community Survey, 2017-2021, Tables B19113, B19113A, B19113B, B19113C, B19113D, B19113E & B19113I. Homeownership data are from the U.S. Census Bureau, American Community Survey, 2017-2021, Tables B25003, B25003A, B25003B, B25003C, B25003D, B25003E & B25003I. For U.S. Census Bureau data, Hispanics may be included in any of the race categories. All Census data refer only to those individuals who selected one race. NA indicates that the rate was suppressed because the number was too small to calculate a reliable rate.

- ♦ Between 2017 and 2021 in Rhode Island, 15% of all children, 56% of American Indian children, 30% of Hispanic children, 25% of Black children, 12% of Asian/Pacific Islander children, and 10% of white children lived in families with incomes below the federal poverty threshold.²6
- ♦ In 2022 in Rhode Island, the unemployment rate was 6.0% for Hispanic workers, 5.0% for Black workers, and 3.0% for white workers. Nationally, the unemployment rate was 6.1% for Black workers, 4.3% for Hispanic workers, and 3.2% for white workers.²⁷
- ◆ People of Color are overrepresented among low-income working families. In Rhode Island, 51% of Latino two-parent families earn less than the income required to meet their basic needs, compared to 19% of white two-parent families.²⁸
- ♦ In Rhode Island, white residents have a homeownership rate almost double the rate of Black and Latino residents, and higher than Asian residents.²⁹ About 40% of Black and Latino homeowners experience cost burdens and 17% of Black homeowners spend more than 50% of their income on housing.³⁰ Nationally, median Black and Latino households would require 242 and 94 years respectively to gain wealth equal to that of white families.³¹



Health Outcomes, by Race and Ethnicity, Rhode Island

	ALL RACES	AMERICAN INDIAN/ ALASKA NATIVE	ASIAN	BLACK	HISPANIC	NATIVE HAWAIIAN/ OTHER PACIFIC ISLANDER	WHITE
Children Without Health Insurance	2.5%	NA	2.0%	2.5%	3.7%	NA	1.8%
Women with Delayed or No Prenatal Care	15.9%	21.7%	17.9%	21.5%	18.4%	44.4%^	13.2%
Low Birthweight Infants	7.6%	10.5%	8.2%	11.3%	8.0%	*	6.6%
Infant Mortality (per 1,000 live births)	5.1	*	5.6^	10.6	6.2	0.0	2.9
Any Infant Breastfeeding	73%	62%	81%	64%	65%	71%	77%
Combined Overweight and Obesity	39%	NA	NA	46%	50%	NA	33%

Sources: All data are from the Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2017-2021 unless otherwise specified. Race and ethnicity is self-reported. Race data is non-Hispanic. Children Without Health Insurance data are from the U.S. Census Bureau, American Community Survey, 2021, Tables B27001, B27001B, B27001B B27001D & B27001I. For U.S. Census Bureau data, Hispanic also may be included in any of the race categories. For Combined Overweight and Obesity data are from Brown University School of Public Health analysis of BMI clinical and billing records of children ages two to 17 in Rhode Island from KIDSNET, Current Care, Blue Cross & Blue Shield of Rhode Island, Neighborhood Health Plan of Rhode Island, United Healthcare, and Tufts Health Plan collected by the Department of Health, 2022. NA data not available. *The data are statistically unreliable and rates are not reported and should not be calculated. ^The data are statistically unstable and rates or percentages should be interpreted with caution.

- ◆ Rhode Island ranks fourth in the nation for childen's health insurance coverage. However, Black and Hispanic children are more likely to be uninsured than white children.^{32,33}
- ◆ Although progress has been made on many health indicators across racial and ethnic populations, disparities still exist for a number of maternal and infant health outcomes in Rhode Island. Women of Color are more likely than white women to receive delayed or no prenatal care and have infants with low birth weight. The Black infant mortality is the highest of any racial and ethnic group even after controlling for socioeconomic factors.³4,35
- ♦ American Indian and Alaska Native and Hispanic children in Rhode Island are more likely to live in older housing (which increases risk for lead exposure, environmental allergens and dust).^{36,37} Black and Hispanic children have higher rates of asthma than non-Hispanic white children, and between 2016-2020 were more likely to visit the emergency room due to asthma.³⁸



Safety Outcomes, by Race and Ethnicity, Rhode Island

	ALL RACES	AMERICAN INDIAN/ ALASKA NATIVE	ASIAN	BLACK	HISPANIC	WHITE
Youth at the Training School (per 1,000 youth ages 13-18)	2.1	7.4	0.4	7.9	4.9	0.7
Children of Incarcerated Parents (per 1,000 children)	11.1	22.1	2.0	57.1	10.8	8.1
Children in Out-of-Home Placement (per 1,000 children)	8.1	7.4	1.7	14.8	8.2	7.2

Sources: Youth at the Training School data are from the Rhode Island Department of Children, Youth and Families, Rhode Island Training School, Calendar Year 2022. Children of Incarcerated Parents data are from the Rhode Island Department of Corrections, September 30, 2022 and reflect the race of the incarcerated parent (includes only the sentenced population). Children in Out-of-Home Placement data are from the Rhode Island Department of Children, Youth and Families, RICHIST Database, December 31, 2022. Population denominators used for Youth at the Training School are youth ages 13 to 18 by race from the U.S. Census Bureau, Census 2010, SF1. Population denominators used for Children of Incarcerated Parents and Children in Out-of-Home Placement are the populations under age 18 by race from the U.S. Census Bureau, Census 2020, P2,P4.

- ♦ Nationally, racial and ethnic disproportionality in the juvenile justice, adult corrections, and child welfare systems is well-documented with disproportionality occurring at multiple steps within each system.^{39,40}
- ♦ During 2022 in Rhode Island, Black youth were 11 times more likely to be at the Rhode Island Training School compared to white youth and were four times more likely compared to youth of all races. American Indian/Alaska Native youth were 10 times more likely and Hispanic youth were seven times more likely to be at the Training School compared to white youth. While Black youth have remained 11 times more likely to spend time at the Rhode Island Training School compared to white youth for the past three years, 2022 saw a considerable increase in the rate of Hispanic and American Indian/Alaska Native youth.⁴¹
- ♦ In Rhode Island on December 31, 2022, Black children were both more likely than white youth and youth of all races to be put in out-of-home placements through the child welfare system. Asian and white children were less likely to be placed out-of-home.⁴²



Education Outcomes, by Race and Ethnicity, Rhode Island

	ALL RACES	ASIAN+	BLACK	HISPANIC	NATIVE AMERICAN	WHITE
3rd Grade Students Meeting Expectations in Reading	37%	52%	22%	19%	12%	48%
3rd Grade Students Meeting Expectations in Math	35%	56%	23%	18%	14%	46%
Four-Year High School Graduation Rates	83%	92%	80%	77%	69%	87%
Immediate College Enrollment Rates	63%	72%	61%	51%	42%	68%
% of Adults Over Age 25 With a Bachelor's Degree or Higher	35%	55%	25%	16%	19%	37%

Sources: Third Grade Students Meeting Expectations in Reading and Math data are from the Rhode Island Department of Education, Rhode Island Comprehensive Assessment System (RICAS), 2022. Four-Year High School Graduation Rates data are from the Rhode Island Department of Education, Class of 2022. Immediate College Enrollment Rates data are from the Rhode Island Department of Education, Class of 2022. Immediate College Enrollment Rates data are from the Rhode Island Department of Education, Class of 2022. Adult Educational Attainment data are from the U.S. Census Bureau, American Community Survey, 2017-2021, Tables B15003, C15002A, C15002B, C15002C, C15002D & C15002I. All Census data refer only to those individuals who selected one race and Hispanic or Latino also may be included in any of the race categories. +Data for Asian and Pacific Islander students is not disaggregated by ethnic group. National research shows large academic disparities across Asian ethnic groups.

- ◆ Educators of Color benefit all students, especially Students of Color.⁴³ In October 2021, 47% of Rhode Island public school students identified as Students of Color while 88% of Rhode Island public school educators identified as white.⁴⁴
- ♦ In Rhode Island, Black and Hispanic children are more likely to attend school in the four core cities and less likely to meet expectations in reading and mathematics in third grade than white or Asian children.^{45,46}
- ♦ The students with the highest levels of chronic absence were also in the populations hardest hit by the COVID-19 pandemic. In Rhode Island during the 2021-2022 school year, Native American (51%), Hispanic (49%), and Black (39%) K-12 students had higher rates of chronic absence than Asian (27%) and white (27%) students.⁴⁷
- ♦ In Rhode Island, Native American, Hispanic, and Black students are less likely to graduate from high school within four years and are less likely to immediately enroll in college than white or Asian students. Gaps in college enrollment are particularly large for four-year college enrollment.⁴8



Rhode Island's Southeast Asian Children and Youth

- ◆ The Asian American community is diverse, the fastest-growing, and the most economically divided racial and ethnic group in the United States.⁴⁹ Southeast Asian children and youth identify with one or more ethnic groups originating from countries in Southeast Asia including Burma, Cambodia, the Philippines, Laos, Thailand, and Vietnam.⁵⁰
- ◆ Cambodians make up the largest Southeast Asian population in Rhode Island.

 Providence has the eighth highest Cambodian population (8,000) in the United States. 51,52
- ◆ The disparity across Asian subgroups can be attributed to differences in immigration origins, educational attainment, occupations, and generational wealth. The lack of disaggregated data for the Asian population contributes to the misperception that all Asian Americans are excelling, resulting in underrepresentation in equity initiatives, especially for Southeast Asians where the largest disparities are found.^{53,54}

Economic Well-Being

- ♦ Nationally, from 1970 to 2016, the gap in the standard of living between higher-income Asian households and lower-income Asian households has nearly doubled.⁵⁵
- ◆ Cambodian children in the U.S. and Rhode Island have higher poverty rates, lower median household incomes, and lower postsecondary attainment rates compared to all Asians. 56,57

Health

♦ Nationally, although the Asian population has the lowest infant mortality rate per 1,000 live births (3.39), there are significant differences within subgroups. The Filipino (4.52) and Vietnamese (3.62) infant mortality rates are significantly higher than Korean (2.43) and Chinese rates (1.96).⁵⁸

Education

- ♦ In 2017, The Rhode Island General Assembly passed the *All Students Count Act* which requires the Rhode Island Department of Education to collect and publicly report disaggregated education data on the many subgroups within the Asian American and Pacific Islander population and requires disaggregation of this data by gender, disability, and English proficiency.⁵⁹ Rhode Island was the third state in the country to pass this law.⁶⁰
- ♦ The Rhode Island Department of Education does not currently report disaggregated data for Asian students by ethnic group.

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