



# KIDS COUNT DATA BOOK



NYS TOUCHSTONES

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Charting the future working together

## STATE OF NEW YORK COUNCIL ON CHILDREN AND FAMILIES



Andrew M. Cuomo



Deborah A. Benson

### MISSION STATEMENT

*The Council is charged with acting as a neutral body to coordinate the state health, education, and human services systems to ensure that all children and families in New York State have the opportunity to reach their potential.*

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# NEW YORK STATE TOUCHSTONES / KIDS COUNT DATA BOOK 2011

## SHARED VISION

*All children, youth and families  
will be healthy and have the knowledge,  
skills and resources to succeed  
in a dynamic society.*

## NEW YORK KIDS COUNT

2011 Data Book

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New York State Touchstones / KIDS COUNT Data Book 2011  
has been printed on recycled paper.



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Andrew M. Cuomo  
Governor



Deborah A. Benson  
Executive Director

Dear Friends:

I am very pleased to present the New York State Touchstones / KIDS COUNT Data Book 2011. This year's edition of the Data Book provides a wide range of information related to the six key areas of child well-being through the lens of diversity and disparity. We have gathered data that highlight racial and ethnic differences as well as geographic and income variation.

The Touchstones framework is a tool to help guide state and local efforts. The common set of goals and objectives cuts across all service systems and allows individuals and organization with diverse missions to come together to improve conditions for children and families. Touchstones data can help focus planning and decision making by providing an overview of the well-being of children, youth, and families; comparing their current status to that of the past; describing changes over time; and providing benchmarks.

As we look toward the future, it is clear that the success of New York is dependent upon our ability to promote the healthy development of all children and youth so they can succeed in a dynamic society. The Council maintains its priority to provide you with quality data because we fully understand this information serves as a sound foundation for policies and programs that support children and their families.

Please be sure to inform your colleagues that the 2011 Data Book is available in PDF format on the Council website ([www.ccf.state.ny.us](http://www.ccf.state.ny.us)) and on the Kids' Well-being Indicators Clearinghouse website ([www.nyskwic.org](http://www.nyskwic.org)).

Thanks for your continued support.

Sincerely,

A handwritten signature in blue ink that reads "Deborah A. Benson".

Deborah A. Benson  
Executive Director

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# NYS TOUCHSTONES/KIDS COUNT

TOUCHSTONES OVERVIEW	ECONOMIC SECURITY	HEALTH	EDUCATION	CIVIC ENGAGEMENT	FAMILY	COMMUNITY
	Child Poverty Ages 0–17 years 2009 (percentage)	Infant Mortality 2007–2009 (rate/1,000)	Regent’s Diplomas 2009/10 (percentage)	Arrests for Driving while Intoxicated Ages 16–21 years 2009/10 (rate/10,000)	Youth in Foster Care Ages 0–21 years 2010 (rate/1,000)	Unemployment Ages 16 years & older 2010 (percentage)
New York State	19.3	5.4	83.1	36.3	4	8.6
New York City	26.7	5	72.9	10	5.9	9.5
Bronx County	39.4	6.3	65.4	4.4	N/A	12.8
Kings County	30.3	5.2	71.3	6.2	N/A	10.2
New York County	22.7	4.2	75.7	12.6	N/A	8
Queens County	17	4.5	75.9	17.8	N/A	8.5
Richmond County	14.5	3.7	79.4	10.4	N/A	8.7
Rest of State	13.7	5.8	87.9	52.1	2.5	7.9
Albany County	14.3	8.5	89.6	45.8	2.5	7.2
Allegany County	24	4.5	88	51.4	4.7	9.4
Broome County	20.1	11	90.4	45.6	5.9	8.8
Cattaraugus County	21.5	7.4	88	56.7	3.9	9.1
Cayuga County	17.9	5.7	88.4	42.2	4.4	8.3
Chautauqua County	25.4	7.8	88.4	68.3	2.8	8.8
Chemung County	23.3	7.9	74.7	56.8	3.8	8.5
Chenango County	22	4.3	86.3	55.3	2.3	9.1
Clinton County	17.9	5	83.1	117.2	2.7	10.2
Columbia County	15.6	7.4	89.5	95.4	9.2	7.6
Cortland County	18.7	6	86.4	62.8	10.5	9.1
Delaware County	24	3.6	78.5	66.3	4.9	8.7
Dutchess County	10.5	4.3	90.1	79.7	3.2	7.9
Erie County	18.4	7.6	89.7	44	3.2	8.2
Essex County	17.3	5.5	89.9	96.1	2.5	9.3
Franklin County	21.8	3.1	84.3	113.9	7.4	9
Fulton County	22.6	5	89.1	62.5	3.9	10.1
Genesee County	13.7	5.5	92.4	103.6	3.3	7.6
Greene County	16.6	0.7	83.7	122.1	4.9	8.6
Hamilton County	15.9	0	95.7	125	0.9	8.4
Herkimer County	20.1	8.4	81.7	118	4.3	8.4
Jefferson County	21.5	7.1	85	65.8	3.5	9.6
Lewis County	20.5	5.1	91.3	102.1	2.8	9.2
Livingston County	13	4.5	89.7	41.8	3	8.7
Madison County	16.6	3.7	88.7	37.4	2.6	8.4



<b>TOUCHSTONES OVERVIEW</b>	<b>ECONOMIC SECURITY</b>	<b>HEALTH</b>	<b>EDUCATION</b>	<b>CIVIC ENGAGEMENT</b>	<b>FAMILY</b>	<b>COMMUNITY</b>
	Child Poverty Ages 0–17 years 2009 (percentage)	Infant Mortality 2007–2009 (rate/1,000)	Regent’s Diplomas 2009/10 (percentage)	Arrests for Driving while Intoxicated Ages 16–21 years 2009/10 (rate/10,000)	Youth in Foster Care Ages 0–21 years 2010 (rate/1,000)	Unemployment Ages 16 years & older 2010 (percentage)
Monroe County	17.5	7.7	86.2	47.1	2.5	8
Montgomery County	25.4	5.9	82.8	66	4.5	9.8
Nassau County	6.4	4.7	92.4	36.7	0.9	7.1
Niagara County	16.8	7.5	91	52.2	3.2	9.1
Oneida County	21.2	5.9	84.5	53.3	4.9	7.8
Onondaga County	14.7	7.5	88.1	41.3	2.4	8
Ontario County	12.9	7.6	93.9	75.6	1.8	7.5
Orange County	14.5	5.4	84.2	51.1	3	8.3
Orleans County	18.5	5.4	88.7	95.6	1.5	9.9
Oswego County	19.5	6.2	87.7	66.9	1.4	10.5
Otsego County	20.7	3.8	89.9	80.6	2.6	7.7
Putnam County	4.8	4.5	88.7	68	0.7	6.9
Rensselaer County	13.2	6.5	89.8	71.7	3.8	7.8
Rockland County	17.8	3.9	89.1	43.5	0.7	7.1
Saratoga County	22.6	4.6	86.3	50.4	3.9	10.6
Schenectady County	8.8	3.5	92.6	45.7	1	6.8
Schoharie County	18.4	8.3	85.2	33.6	6.7	7.7
Schuyler County	16.5	5.6	84	107.8	5	9.4
Seneca County	19.8	5.8	76.8	59.1	2.5	8.4
St. Lawrence County	17	3.5	83.3	53.6	1.1	7.9
Steuben County	19.1	6.3	83.7	67.7	4.2	9.9
Suffolk County	6.9	4	90.1	43.5	1.4	7.6
Sullivan County	21.4	7.9	80.6	125.6	2.9	9.2
Tioga County	14.1	6.7	84	71.9	1.7	8.1
Tompkins County	14.8	2.5	90.2	26.1	5.2	6.1
Ulster County	15	5.4	86.6	124.4	3.1	8.2
Warren County	15.4	6.2	91.8	83.7	3.9	8.5
Washington County	15.9	6.2	88.3	61	4	7.8
Wayne County	14.3	5.9	88.9	51.8	1.2	8.8
Westchester County	11.4	5.2	77.7	39.4	2.2	7.2
Wyoming County	16	4.8	91.8	59.8	3.9	9.2
Yates County	23	6.3	90.3	52.9	2.8	6.7

DATA SOURCE: New York State Council on Children and Families, Kids’ Well-being Indicators Clearinghouse, 2010.



# DIVERSITY AND DISPARITY IN NEW YORK STATE: Introduction, Definitions, and Concepts

## INTRODUCTION

New York State has always had a reputation for being a diverse state, perhaps because of the rich history of Ellis Island as the immigrant gateway to the United States and the world stature of New York City. This diversity is evident in that New York has a higher percentage of children living in immigrant families – 33 percent compared with the national average of 23 percent (1). Of the 25 percent of children living in linguistically isolated families, 24 percent are living in immigrant families (1). Furthermore, there are over 160 languages spoken by children in New York public schools receiving limited English proficient (LEP) services to help improve their English reading and writing skills (2). The five major languages of LEP students are Spanish, Chinese, Arabic, Bengali, and Haitian-Creole. New York City has the majority (68%) of students enrolled in LEP services, representing 8.9 percent of the public school student population statewide. This unique perspective engenders a sense of pride among New Yorkers and an eagerness to promote opportunities for all New York residents.

The demographic shift in New York's diversity can be observed when we examine New York's population by age and minority membership. Figure 1 depicts the age distribution of New York's White and minority populations for 2001 and 2009. During this time period we can see that the predominantly White population depicted in 2001 was aging, and a younger, more diverse minority population was emerging, pointing to a future for New York that is even more diverse than its past.

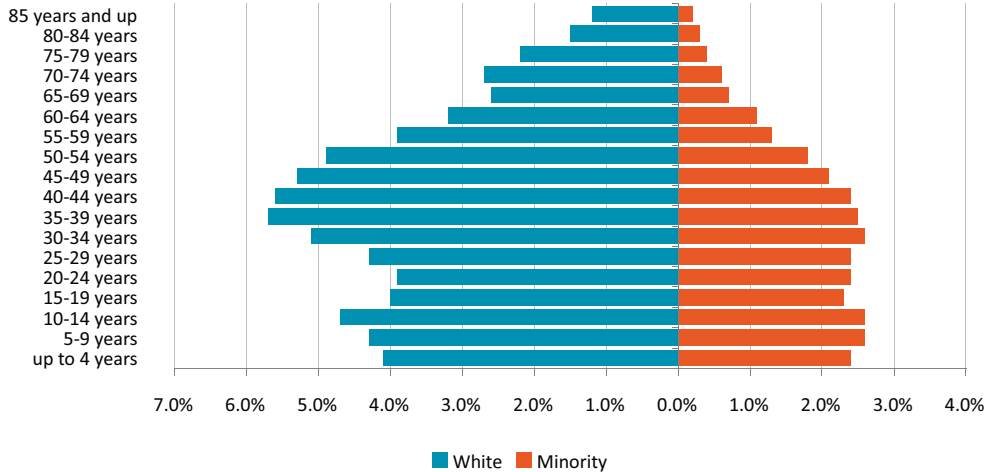


# NYS TOUCHSTONES/KIDS COUNT

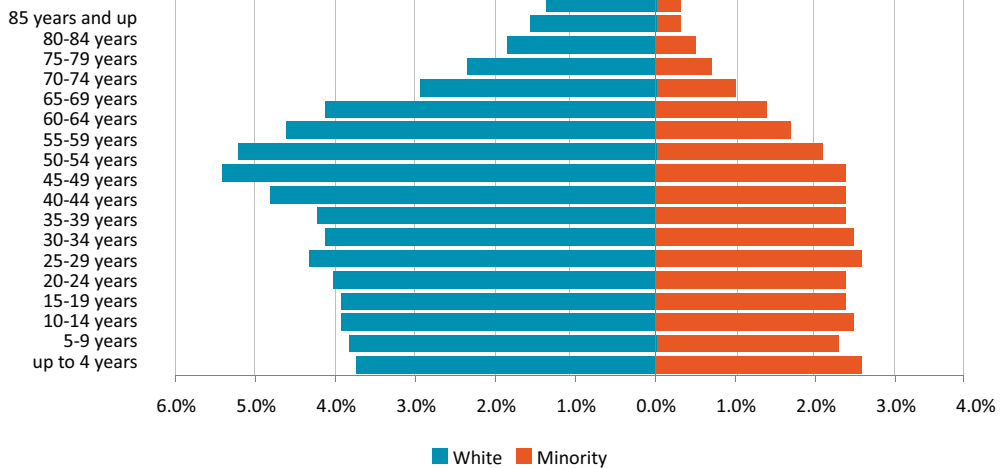
Figure 1.

Comparison of New York population by age and minority membership, 2001 and 2009

## New York State population, 2001



## New York State population, 2009



DATA SOURCE: Minnesota Population Center Integrated Public Use Microdata Series (IPUMS), American Community Survey, 2001 and 2009.

With the kaleidoscope of cultures, languages, and lifestyles comes the recognition that various forms of disparity are also present. Disparities can be measured by the percentage of childhood poverty in different counties or regions or the contrast between median household incomes of rural and urban counties. Differences in achievement across school districts result in achievement gaps that can be observed in proficiency test results and graduation rates. The differences in school success for racial and ethnic groups or for low- and high-income children have long-lasting consequences for children and their families with regard to college access, job readiness, and overall self-esteem (3, 4). Research suggests that school, family, and community factors collectively influence the academic achievement of students and contribute to the achievement gap (5, 6).

The foundation for good health starts with the availability of quality prenatal care and nutrition to women, which can be influenced by income and ability to seek proper care. Good health progresses into childhood with access to a medical home, timely immunizations, and good nutrition. Community disparities, such as nearby quality schools, risks in the environment, and available green space for children to play, can contribute to the educational and health differences observed among children. Often, an underlying factor of educational, health, and community disparity is disparity in income.

This Data Book highlights disparities that impact child outcomes. By looking more closely at these data and identifying where disparities occur, we can more effectively target resources.





## DEFINITIONS AND CONCEPTS USED IN THIS DATA BOOK

The following paragraphs describe the terms commonly associated with disparities and used in this Data Book.

***Achievement gap*** refers to the observed disparity on a number of educational measures between the performance of groups of students, especially groups defined by gender, race, ethnicity, and socioeconomic status. The achievement gap can be observed on a variety of measures, including standardized test scores, grade point average, dropout rates, and college-enrollment and college-completion rates.

The causes of gaps in student achievement between low-income minority students and middle-income White students have been ongoing since the publication of the report, “Equality of Educational Opportunity” (more widely known as the Coleman Report), commissioned by the U.S. Department of Education in 1966 (6). That research suggests that school, home, and community factors impact the academic achievement of students and contribute to the gap.

***Bridged-race coding***. In 2003, the National Center of Health Statistics (NCHS) revised the U.S. Standard Certificate of Live Birth. The NCHS revisions were implemented in New York State exclusive of the New York City (NYC) area (NYSENYC) beginning on January 1, 2004, in a web-based live-birth registration system. New York City (NYC) implemented the changes beginning on January 1, 2009 (7).

One major change associated with the adoption of the revised birth certificate is the way that variable race is reported. Before 2004, a mother was allowed to select only one race category (1990 Census scheme), even when she identified herself with more than one race due to her multiple race heritage.

Beginning in 2004 for births recorded in the NYSENYC area of the state and in 2009 for births recorded in NYC, the Census 2000 coding scheme for race has been used. With the Census 2000 scheme, the mother and the father are allowed to report more than one race from among 15 race categories. Under this system, a response of White and no other race means that the respondent does not identify herself as part of any other race but White, and a response of Black and no other race means that the respondent does not identify herself as part of any other race but Black. This coding scheme is distinguished from the previous scheme by the use of the labels “White alone” and “Black alone.” All other respondents are included in a race category, “other.”

To make the current year live birth and death tabulations by race comparable with the past, the NCHS has initiated a program of bridged-race coding. This method uses an algorithm derived from National Health Interview Survey in which the new race categories are converted into pre-Census 2000 categories (categories of birth tables of 2003 and earlier and categories of death tables of 2002 and earlier).

In New York State, the selection of race for the statistical reporting of live births is based upon the race of the mother only. There are several maternal and child health indicators that classify race as Black, non-Hispanic; White, non-Hispanic; Asian/Pacific Islander, non-Hispanic; and other, non-Hispanic.

**Disparity** refers to lack of equality among racial and ethnic groups in the likelihood of different life circumstances. For example, differences in the likelihood of being involved in a service system, or being poor and living in a low-income neighborhood, or being at risk of premature death.

**Disparity index** is the ratio of the rate of involvement in a given stage of the child welfare or the juvenile justice system per 1,000 children in the general population of African American children (or Hispanic children) relative to the rate for White children. For example, African American children are reported more often to child protective services than White children with a disparity index of 5.6 (8).

**Diversity** refers to the inclusion of or the composition of different groups, such as races and ethnicities in society, neighborhoods, or programs.

**Ethnicity** is a term that represents social groups with a shared history, sense of identity geography, and cultural roots that may occur despite racial differences. For New York State Department of Health data, ethnicity is based on the ethnicity of the mother. In New York State, vital events classified as Hispanic include Hispanic Whites, Hispanic Blacks, Hispanics of other Races, and Hispanics—race not stated.

**Equality** refers to the state of being equal: that all racial and ethnic groups are treated equality by government services, by law enforcement, by social workers, by news media, by mortgage brokers, and the like.

# NYS TOUCHSTONES/KIDS COUNT

**Health disparity** refers to the differences in health outcomes for the different race, gender, mobility, and age groups. Disparities can also exist by geography or by insurance coverage. Disparities examine how often disease strikes a group or area and how many people get sick or even die.

**Hispanic origin** refers to an ethnicity separate from race, because the federal government considers race and Hispanic origin to be two distinct constructs. Thus, Hispanics may be of any race. Hispanic, a self-designated classification, is defined as a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. The terms Hispanic and Latino are used interchangeably and refer to ethnicity. The term Latino appeared on the Census form for the first time in 2000 (9). Origin can be viewed as ancestry, nationality, or country of birth of the person or the person's parents or ancestors prior to their arrival in the United States.

**Income disparity** refers to the differences in income or financial situation for different race, gender, and age groups, as well as geographic or rural, suburban, and urban differences.

**Overrepresentation of minorities or disproportionate minority contact (DMC)** (also called **disproportionate representation of minorities**) in child welfare, foster care, or juvenile justice systems describes the situation when a minority group represents a small percentage of the overall population (e.g., 15%), but when counted in a system of care (e.g., foster care admissions or child welfare cases), the percentage is more than the minority group's representation in society (e.g., 34%). Disproportionate contact refers to the interactions members of a minority group have with the foster care or juvenile justice systems when compared with White peers the same age and gender. Contact can be measured at different stages of the justice process: referral to child protective services, admission to foster care, being stopped by police or arrested, being referred to probation or court, or being remanded to a juvenile facility.

**Race or race alone**, in an effort to better reflect the country's growing diversity, the 2000 Census gave respondents the options of self-selecting one or more race categories to indicate their racial identities (9). Respondents indicating only one race are referred to as a race alone population, or the group that reported only one race category. Six categories make up this population: White; Black or African American; American Indian or Alaskan Native; Asian; Native Hawaiian and other Pacific Islander; and some other race. The 2010 Census uses these same race and ethnicity categories in the short form. The American Community Survey, which has replaced the long-form decennial Census, uses these categories also (10). The current categories are White, non-Hispanic; Black or African American, non-Hispanic; American Indian or Alaskan Native, non-Hispanic; and Asian and other Pacific Islander, non-Hispanic. Instead of race alone, the common usage is now race, non-Hispanic.



## RACE CATEGORIES

***White, non-Hispanic; or White alone*** refers to people having origins in the peoples of Europe, Russia (Caucasian), Northern Africa, or the Middle East. It includes people who indicated their race or races as “White” or wrote in entries such as Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish.

***African American or Black, non-Hispanic; African American alone; or Black alone*** refers to people having origins in the Black racial groups of Africa. It includes people who indicated their race or races as “Black, African American or Negro” or wrote in entries such as African American, Afro American, Nigerian, or Haitian.

***American Indian and Alaskan Native, non-Hispanic; American Indian alone; or Alaskan Native alone*** refers to people having origins in the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment. It includes people who indicated their race as “American Indian or Alaskan Native” or wrote in the name of their principal or federally recognized or enrolled tribe, such as Rosebud Sioux, Navajo, or Chippewa.

**Note:** In New York, American Indians can be enrolled in federally recognized tribes (also known as Indian Nations) or tribes that have recognition from New York State.



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***Asian American alone*** refers to people having origins in any of the original peoples of the Far East, Southeast Asian, or the Indian subcontinent. It includes people who indicated their race or races as “Asian Indian,” “Chinese,” “Japanese,” “Filipino,” “Korean,” “Vietnamese,” “or “other Asian,” or who wrote in entries such as Burmese, Hmong, Pakistani, or Thai.

**Note:** In New York State, the Asian American and Hawaiian Native and other Pacific Islander race categories usually are combined, called Asian and other Pacific Islander, non-Hispanic.

***Hawaiian Native or Native Hawaiian and other Pacific Islander, non-Hispanic; Hawaiian Native alone; Native Hawaiian alone; or other Pacific Islander alone*** refers to peoples having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. It includes people who indicated their race or races as “Native Hawaiian,” “Guamanian,” “Samoan,” or other Pacific Islander,” or who wrote in entries such as Tahitian, Mariana Islander, or Chuukese.

***Two or more races, biracial, or multiracial*** denotes a person of more than one racial background; the term “two or more races” was used on the Census 2000 form.

**Note:** In New York State, this category is included in the total, but depending on sample size, it may not be delineated as its own category.

***Some other race*** was included in the Census 2000 for respondents who were unable to identify with the five race categories of the Office of Management and Budget. Respondents who provided write-in entries such as Moroccan, South African, Belizean, or a Hispanic origin (e.g., Mexican, Puerto Rican, or Cuban) were included under some other race category. The American Community Survey includes some other race category, but most common analyses do not delineate it with the other racial categories though they include some other race category in the total count (10).

**Note:** In New York State, depending on sample size, this category is defined as other, non-Hispanic, or included in the total, but not delineated as its own category.



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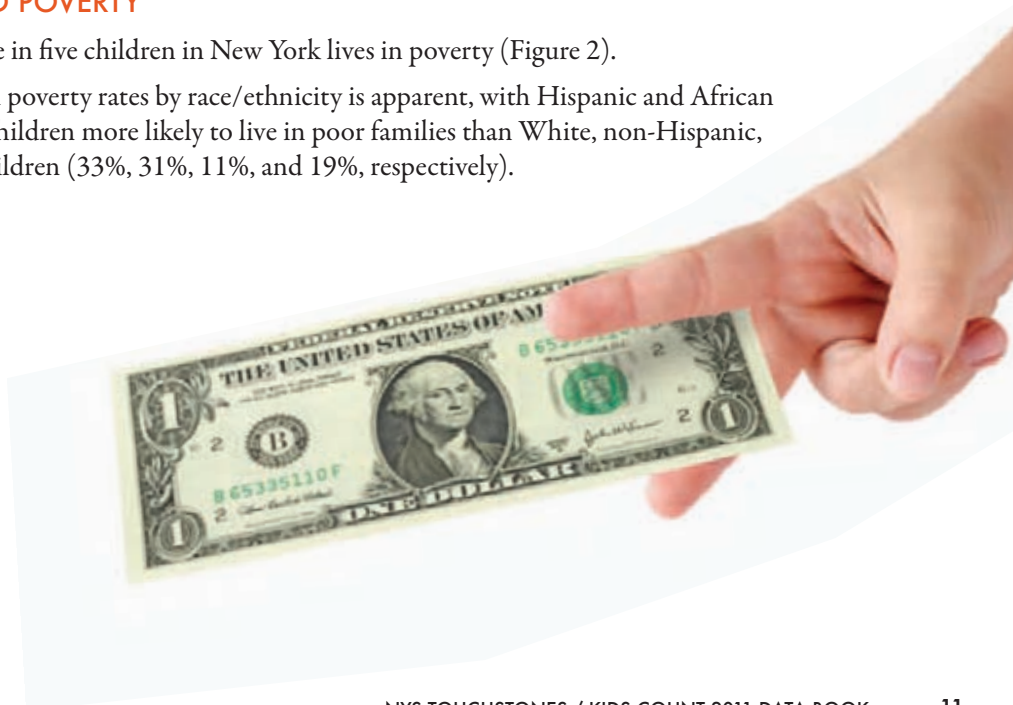
## ECONOMIC SECURITY

The Touchstones Economic Security section focuses on two goals: (1) children and youth are raised in families with sufficient resources to meet their basic needs and (2) children are prepared to succeed in their eventual self-sufficiency. These complementary goals are essential because of the ample research that shows that poverty in early childhood negatively impacts children’s learning and health (1). Living in a poor neighborhood increases the likelihood of exposure to violence and pollution and having a longer commute for healthy food choices (2, 3, 4). Underlying the differences in educational, health, and community is disparity in income. Higher family income allows for the opportunity to live near quality schools and in a safe neighborhood with abundant green space for children to play.

As one of the social determinants of health, income is inextricably tied to the degree to which an individual or family achieves self-sufficiency and optimal health. Adequate income affords us shelter, food, and access to health care as well as the creature comforts we desire. When children are properly sheltered and fed, they perform better in school and work (5). Families without an income or with insufficient income struggle to provide basic daily necessities. The children in these poor families are at risk for performing poorly in school due to absences, poor concentration from hunger, or concerns about the safety of family members. Undermining the American dream, racial disparities in income—specifically childhood poverty—persist into adulthood and continue to impact health outcomes and limit educational and employment opportunities (1).

### CHILDHOOD POVERTY

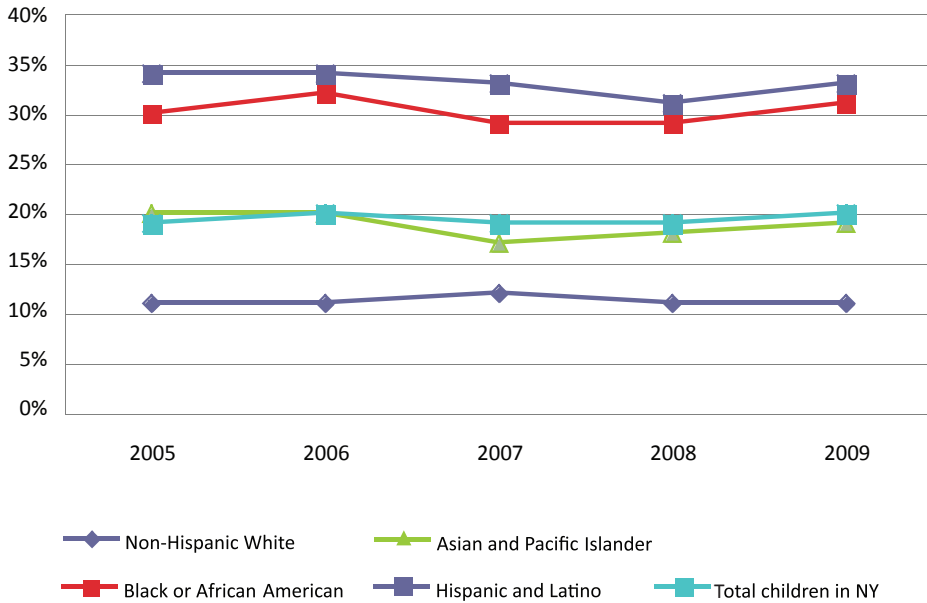
- Overall, one in five children in New York lives in poverty (Figure 2).
- Disparity in poverty rates by race/ethnicity is apparent, with Hispanic and African American children more likely to live in poor families than White, non-Hispanic, or Asian children (33%, 31%, 11%, and 19%, respectively).



# NYS TOUCHSTONES/KIDS COUNT

Figure 2.

Percent of children living in poverty by race and ethnicity, 2005–2009.



DATA SOURCE: Population Reference Bureau; analysis of data from the U.S. Census Bureau, American Community Survey 2005, 2006, 2007, 2008, and 2009.

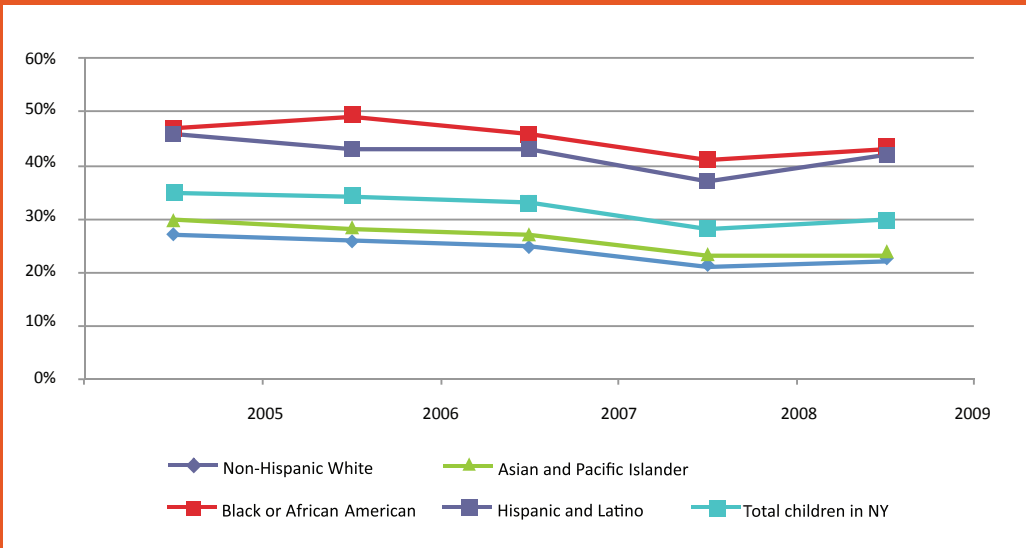
## PARENTAL EMPLOYMENT

Parental employment is a key factor in parents' ability to provide basic needs for their families (e.g., shelter, food, clothes, and transportation). The indicator, children living in families where no parent has regular, full-time work, estimates how many children are impacted by the recent upward trend in unemployment; these families do not have the economic assets to build a solid foundation for growth and development for their children.

- In 2009, almost one in three children in New York (30%) were living in families where no parent had full-time employment.
- Hispanic and African American children were almost twice as likely to live in families where no parent had full-time employment (42% and 43%, respectively) compared to White non-Hispanic or Asian children (22% and 23%, respectively) (Figure 3).

Figure 3.

Percent of children living in families where no parent has full-time employment, 2005–2009.



DATA SOURCE: KIDS COUNT Data Center website (accessed June 2011), Population Reference Bureau, analysis of data from the U.S. Census Bureau, Census 2000 Supplementary Survey, 2001 Supplementary Survey, and 2002 through 2009 American Community Survey.

### SAFETY NET PARTICIPATION

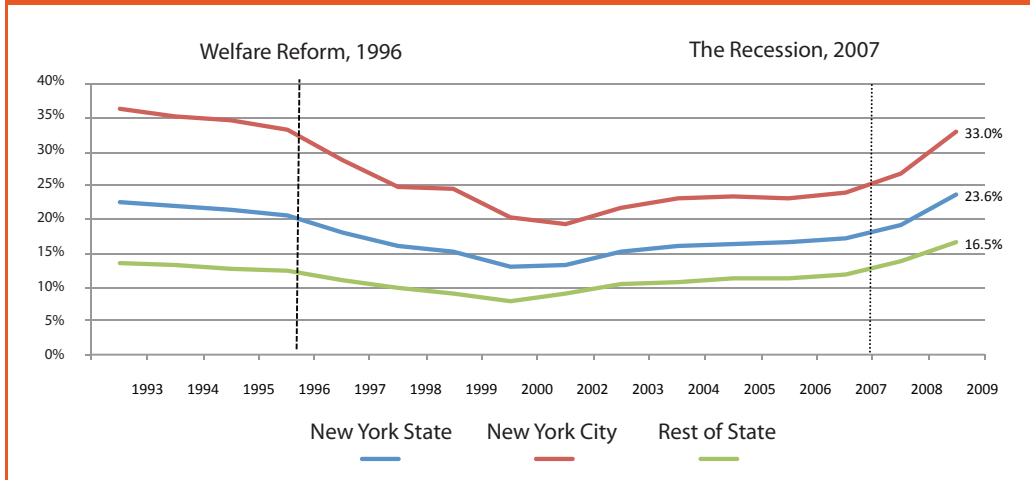
Safety net programs such as the Supplemental Food Nutrition Program (SNAP) and cash assistance help low-income families make ends meet each month. These are means-tested programs that require families to prove their eligibility and often have time limits on how long families may receive assistance. Figure 4 depicts SNAP participation, which reflects a gradual decline in benefit usage in the 1990s, which is most commonly associated with welfare reform legislation and economic growth, but a decline was observed in New York prior to that significant reform.

- The SNAP participation rates dipped at the turn of the century and began a gradual climb until 2007, with a steep increase in participation for children in the last few years. Economic experts have attributed this rise in SNAP participation among children to the recession in the latter part of the decade (6).
- The SNAP participation rate was almost twice as high in NYC as in the rest of state (33% vs. 16.5%) in 2009.

# NYS TOUCHSTONES/KIDS COUNT

Figure 4.

Percent of children participating in the supplemental nutrition assistance program, 1993–2009.



DATA SOURCE: New York State Council on Children and Families, Kids' Well-being Indicators Clearinghouse. Data were provided by the New York State Office on Temporary and Disability Assistance.

The rates of children receiving public assistance declined steadily since the early 1990s, and that trend continued into the 21st century.

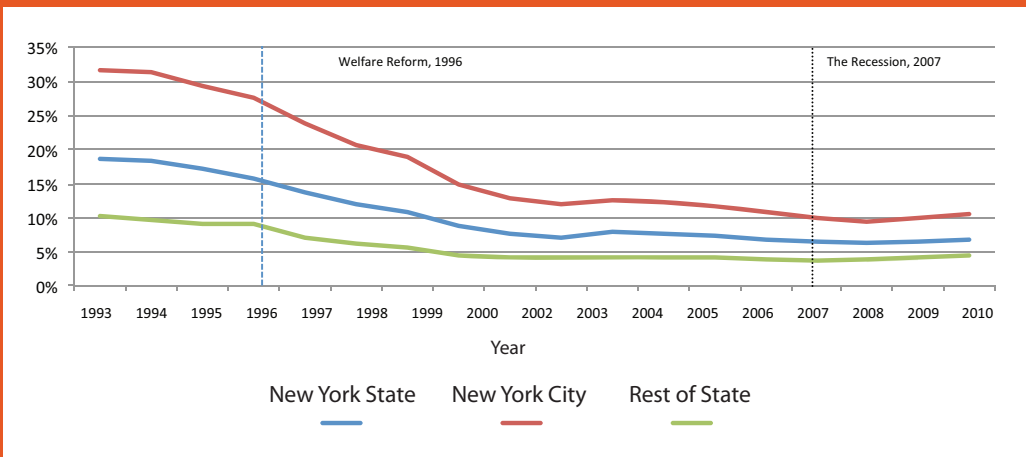
- The number and percent of children receiving public assistance declined considerably from 2000 through 2009. By the end of 2009, 6.6 percent of all children received public assistance, which reflects about a 65 percent change since 1993 (Figure 5).
- The decline in the public assistance participation rate was greater in NYC than in the rest of state; however, the percent of children receiving public assistance was almost 2.4 times higher in NYC (9.9%) than in the rest of state (4.2%) in 2009.







**Figure 5.**  
Percent of children receiving public assistance in New York, 1993-2009.



**DATA SOURCE:** New York State Council on Children and Families, Kids' Well-being Indicators Clearinghouse. Data were provided by the New York State Office on Temporary and Disability Assistance.

### FEDERAL AND STATE POLICIES

In the current economic climate, it is important to acknowledge the policies that have helped children and families who are still struggling with poverty exacerbated by parental unemployment, foreclosures, and high food prices. The American Recovery and Reinvestment Act of 2009 (ARRA) increased the amount children and families could receive from SNAP and extended the time limit on unemployment insurance. Child care subsidies and transportation assistance to work were also increased from the federal funding to states to address needs of families with young children and individuals traveling for work.

# NYS TOUCHSTONES/KIDS COUNT

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## PHYSICAL AND EMOTIONAL HEALTH

There is current research showing that early childhood experiences impact our well-being in adulthood, especially our health status (1). Health disparities examine differences in health outcomes for the different races, gender, mobility, and age groups, but disparities also can exist by geography or by insurance coverage. Health disparities are a particular type of health difference that is closely linked with social or economic disadvantage. Epidemiologists and health researchers examine how often disease strikes a particular age or racial group or geographic area and how many people get sick (morbidity) or even die (mortality).

The U.S. Department of Health and Human Services, Office on Minority Health, defines health disparities in terms of health outcomes that adversely affect groups of people who have systematically experienced greater social and/or economic obstacles to health and/or a clean environment based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation; geographic location; or other characteristics historically linked to discrimination or exclusion (2).

### YEARS OF POTENTIAL LIFE LOST (YPLL) AND PREMATURE DEATH

Years of potential life lost (YPLL) measures the years a person would have lived if that person had not died prematurely. For example, if a person dies at age 55, then 20 years are added to the YPLL measure for that racial or ethnic group; however, if a child in that racial or ethnic group dies at age 5, then 70 years are added to YPLL measure. This measure can be important when describing the social and economic losses associated with these years of life lost due to premature death. Premature death is a death before 75 years of age for both males and females. This measure is a simple count of the number of deaths before the age of 75 in a certain race or ethnic group divided by the number of people in the population. Table 1 depicts YPLL and premature death by race and ethnicity.

	Non-Hispanic			Hispanic	Total
	White	Black	Asian/ Pacific Islander		
Years of Potential Life Lost per 100,000, age-adjusted	5,063	9,035	2,328	5,066	5,570
Percent of premature deaths (<75 Years)	33.8%	60.7%	49.6%	60.5%	40.0%

**DATA SOURCE:** New York State Department of Health, Public Health Information Group, December 2010.

# NYS TOUCHSTONES/KIDS COUNT



African Americans have the highest YPLL rate compared with any other racial or ethnic group in New York.

- African Americans in New York had 9,035 years of potential life lost per 100,000. This is 61.6% higher than the New York overall YPLL rate of 5,570 per 100,000.
- The YPLL rate for Asian Americans was the lowest in New York: 2,328 per 100,000.

African American and Hispanic premature death rates are almost identical.

- Premature death rates for African Americans (60.7%) and for Hispanics (60.5%) are the highest in New York State and almost double the White rate (33.8%).
- The premature death rate for Asian Americans is 49.6 percent; slightly higher than the New York State premature death rate of 40 percent.

Community Health Indicators by Race/Ethnicity (CHIRE) that correspond with the Prevention Agenda are new and significant additions to the Community Health Assessment Clearinghouse on the New York State Department of Health (DOH) website (3). As part of the overall effort to improve minority health in New York State, public health law requires DOH to produce a biennial minority health report, The New York State Minority Health Surveillance Report-County Edition, which is the most recent analysis prepared and distributed in response to this charge (4, 5).

### THE HISPANIC PARADOX

The Hispanic paradox refers to the occurrence of good birth outcomes and increased rates of breastfeeding among new mothers who are poor and monolingual Spanish-speaking women (6). The paradox refers to the expectation that financially poor pregnant women who are monolingual or limited English speakers would not receive adequate prenatal care or have positive birth outcomes given that poverty and language isolation are risk factors for poor health outcomes. However, the positive birth outcomes are a welcome strength for Hispanic women, their families, and their medical providers. It bodes well not only for their children's health now but also for their children's health in adulthood (7).

In New York, 63.6 percent of Hispanic pregnant women received early prenatal care compared with the overall New York rate of 72.0 percent. However, when low-birth-weight rates are examined, the Hispanic low-birth-weight rate is similar to the overall state rate (7.9% and 8.2% respectively) (3). Not every county experiences the Hispanic paradox, as can be seen in Table 2, which shows the percentages of births where the mother received prenatal care in the first trimester and low-birth-weight infants by race and ethnicity for each county in New York.



# NYS TOUCHSTONES/KIDS COUNT

**Table 2. Selected Maternal and Infant Health Indicators by Race and Ethnicity, 2006–2008**

Births with early (1st trimester) prenatal care						Low-birth-weight births (<2.5 Kg)					
Region/ county	White, non- Hispanic	Black, non- Hispanic	Asian/PI, non- Hispanic	Hispanic	Total	Region/ county	White non- Hispanic	Black, non- Hispanic	Asian/PI, non- Hispanic	Hispanic	Total
<b>STATE</b>	81.1%	63.5%	70.8%	65.9%	73.4%	<b>STATE</b>	6.9%	12.8%	7.8%	7.8%	8.2%
<b>NYC</b>	81.9%	64.7%	69.7%	68.3%	71.5%	<b>NYC</b>	6.8%	12.6%	7.7%	8.0%	8.7%
<b>Bronx</b>	77.3%	66.5%	73.1%	69.2%	69.0%	<b>Bronx</b>	7.1%	12.4%	10.7%	9.0%	10.0%
<b>Kings</b>	78.3%	63.8%	69.6%	68.6%	70.8%	<b>Kings</b>	6.0%	12.7%	6.6%	7.8%	8.5%
<b>New York</b>	88.3%	66.6%	76.1%	72.8%	78.9%	<b>New York</b>	7.9%	12.4%	6.6%	8.7%	8.5%
<b>Queens</b>	81.0%	62.9%	66.6%	63.7%	68.1%	<b>Queens</b>	6.7%	12.6%	8.5%	6.8%	8.3%
<b>Richmond</b>	85.4%	68.2%	75.0%	72.2%	79.3%	<b>Richmond</b>	7.1%	12.2%	8.3%	8.2%	8.1%
<b>Rest of state</b>	80.8%	60.9%	74.9%	61.0%	75.3%	<b>ROS</b>	7.0%	13.2%	8.0%	7.4%	7.8%
<b>Albany</b>	84.5%	59.2%	75.9%	63.9%	77.5%	<b>Albany</b>	6.6%	13.0%	6.6%	11.0%	8.2%
<b>Allegany</b>	80.6%	100.0~	70.0~	63.2~	80.5%	<b>Allegany</b>	7.2%	0.0~	0.0~	0.0~	7.0%
<b>Broome</b>	78.3%	61.5%	64.6%	67.2%	76.2%	<b>Broome</b>	7.5%	13.4%	7.5~	8.9%	8.2%
<b>Cattaraugus</b>	73.9%	57.7~	60.9%	70.6%	73.2%	<b>Cattaraugus</b>	7.4%	10.7~	6.4~	9.3~	7.3%
<b>Cayuga</b>	78.7%	55.6%	72.2~	67.2%	77.5%	<b>Cayuga</b>	6.9%	15.6~	0.0~	6.1~	7.0%
<b>Chautauqua</b>	71.8%	58.7%	75.9%	62.3%	70.7%	<b>Chautauqua</b>	7.6%	13.4~	10.0~	13.3%	8.2%
<b>Chemung</b>	82.9%	78.8%	78.1%	71.4%	82.4%	<b>Chemung</b>	8.5%	11.3~	0.0~	7.6~	8.6%
<b>Chenango</b>	82.7%	83.3~	80.0~	64.0~	82.5%	<b>Chenango</b>	6.7%	s	s	s	6.7%
<b>Clinton</b>	87.8%	76.9~	73.3~	77.8%	87.3%	<b>Clinton</b>	6.9%	s	0.0~	8.3~	6.8%
<b>Columbia</b>	80.3%	64.7%	82.5%	59.8%	77.7%	<b>Columbia</b>	8.1%	11.7~	s	3.3~	7.8%
<b>Cortland</b>	83.9%	61.5~	68.8~	60.0~	83.1%	<b>Cortland</b>	7.8%	s	s	s	7.7%
<b>Delaware</b>	79.6%	46.2~	100.0~	58.7%	78.3%	<b>Delaware</b>	6.8%	0.0~	s	10.2~	7.0%
<b>Dutchess</b>	86.1%	71.6%	80.1%	74.7%	82.6%	<b>Dutchess</b>	7.0%	10.4%	7.4%	6.9%	7.3%
<b>Erie</b>	78.0%	57.5%	67.5%	66.4%	72.9%	<b>Erie</b>	6.9%	13.3%	6.5%	9.6%	8.3%
<b>Essex</b>	75.6%	s	62.5~	61.5~	75.1%	<b>Essex</b>	8.1%	s	0.0~	s	8.2%
<b>Franklin</b>	68.8%	s	78.3%	52.4~	68.6%	<b>Franklin</b>	7.0%	0.0~	s	s	6.8%
<b>Fulton</b>	80.7%	75.0~	75.0~	64.4%	80.1%	<b>Fulton</b>	8.2%	s	0.0~	13.7~	8.4%
<b>Genesee</b>	74.7%	53.8~	51.9~	58.3%	73.4%	<b>Genesee</b>	6.3%	14.7~	s	4.8~	6.3%
<b>Greene</b>	78.5%	50.0~	53.3~	67.6%	77.0%	<b>Greene</b>	9.8%	10.3~	0.0~	5.3~	9.5%
<b>Hamilton</b>	75.6%	s	62.5~	61.5~	75.1%	<b>Hamilton</b>	8.1%	s	0.0~	s	8.2%
<b>Herkimer</b>	75.8%	50.0~	58.3~	52.1%	74.8%	<b>Herkimer</b>	6.5%	s	s	5.9~	6.8%
<b>Jefferson</b>	73.9%	72.1%	67.7%	71.4%	73.3%	<b>Jefferson</b>	6.6%	14.2%	4.9~	6.8%	7.1%
<b>Lewis</b>	76.4%	100.0~	s	66.7~	76.1%	<b>Lewis</b>	6.0%	0.0~	0.0~	0.0~	6.1%
<b>Livingston</b>	80.4%	50.0~	68.4~	61.5%	79.3%	<b>Livingston</b>	6.3%	0.0~	0.0~	s	6.1%
<b>Madison</b>	81.7%	50.0~	77.3~	71.4~	81.4%	<b>Madison</b>	6.8%	s	s	s	6.9%
<b>Monroe</b>	83.9%	59.0%	77.0%	69.3%	76.7%	<b>Monroe</b>	6.3%	13.6%	4.8%	9.0%	8.2%



# PHYSICAL & EMOTIONAL HEALTH

Births with early (1st trimester) prenatal care						Low-birth-weight births (<2.5 Kg)					
Region/ county	White, non- Hispanic	Black, non- Hispanic	Asian/PI, non- Hispanic	Hispanic	Total	Region/ county	White non- Hispanic	Black, non- Hispanic	Asian/PI, non- Hispanic	Hispanic	Total
Montgomery	79.4%	57.9%~	86.7%~	48.0%	72.9%	Montgomery	6.6%	13.6%~	0.0%~	9.8%	7.3%
Nassau	91.2%	70.1%	81.2%	66.8%	81.9%	Nassau	7.2%	12.7%	9.0%	7.1%	8.0%
Niagara	76.2%	65.0%	69.2%	66.3%	74.4%	Niagara	7.0%	14.4%	5.6%~	7.9%~	7.7%
Oneida	74.9%	46.3%	47.4%	55.0%	70.0%	Oneida	7.9%	16.2%	7.6%~	7.6%	8.5%
Onondaga	83.1%	55.2%	74.0%	65.2%	76.5%	Onondaga	6.9%	13.2%	4.2%	7.6%	7.9%
Ontario	80.8%	59.4%	73.3%	71.5%	79.5%	Ontario	6.1%	16.4%~	8.9%~	5.4%~	6.3%
Orange	70.1%	57.3%	66.4%	59.1%	65.9%	Orange	6.0%	12.3%	8.9%	7.4%	7.0%
Orleans	78.4%	59.5%	50.0%~	56.5%	76.4%	Orleans	7.2%	13.6%~	s	5.2%~	7.3%
Oswego	76.1%	48.1%~	72.7%~	66.3%	75.4%	Oswego	6.8%	18.5%~	0.0%~	7.5%~	6.9%
Otsego	82.3%	79.3%	83.3%~	83.7%	82.0%	Otsego	6.6%	16.7%~	s	10.2%~	6.9%
Putnam	86.2%	72.7%	85.0%	70.7%	82.9%	Putnam	8.5%	8.6%~	8.8%~	6.6%	8.3%
Rensselaer	82.2%	61.7%	74.1%	61.4%	78.4%	Rensselaer	6.5%	14.6%	5.1%~	7.1%	7.2%
Rockland	70.1%	57.6%	67.6%	57.2%	65.4%	Rockland	5.8%	10.8%	10.4%	6.2%	6.6%
St Lawrence	78.3%	61.5%~	78.4%	71.7%	77.8%	St Lawrence	7.3%	s	11.8%~	s	7.3%
Saratoga	81.7%	64.2%	79.4%	74.6%	81.1%	Saratoga	6.4%	12.5%~	7.0%~	9.3%	6.5%
Schenectady	81.6%	58.6%	74.4%	62.0%	75.6%	Schenectady	7.4%	14.4%	10.8%	7.4%	8.8%
Schoharie	82.7%	s	77.8%~	73.9%~	82.1%	Schoharie	7.5%	s	s	0.0%~	7.3%
Schuyler	78.4%	s	s	83.3%~	78.8%	Schuyler	7.5%	0.0%~	0.0%~	0.0%~	7.4%
Seneca	69.2%	71.4%~	77.8%~	63.0%~	69.1%	Seneca	5.6%	0.0%~	0.0%~	s	5.5%
Steuben	79.0%	70.0%	81.1%	83.3%	78.9%	Steuben	7.5%	s	s	12.9%~	7.4%
Suffolk	84.6%	58.1%	72.6%	53.0%	72.8%	Suffolk	7.2%	13.1%	9.5%	6.9%	7.7%
Sullivan	64.3%	57.5%	52.9%~	56.0%	61.5%	Sullivan	8.0%	14.1%	13.9%~	10.0%	9.1%
Tioga	79.5%	100.0~	80.0%~	62.5%~	79.2%	Tioga	8.7%	0.0%~	s	0.0%~	8.6%
Tompkins	82.7%	63.9%	75.7%	74.2%	80.6%	Tompkins	6.7%	5.6%~	4.0%~	9.8%~	6.6%
Ulster	80.3%	61.5%	77.1%	66.6%	77.3%	Ulster	7.1%	11.2%	7.3%~	8.6%	7.5%
Warren	58.7%	50.0%~	85.0%~	59.3%~	58.8%	Warren	6.9%	33.3%~	0.0%~	21.4%~	7.1%
Washington	62.5%	50.0%~	53.8%~	51.7%~	62.5%	Washington	7.1%	0.0%~	s	s	7.0%
Wayne	75.1%	57.8%	60.9%~	47.4%	72.7%	Wayne	6.8%	10.3%~	s	7.0%~	6.9%
Westchester	85.4%	62.1%	76.1%	61.4%	72.6%	Westchester	7.6%	13.8%	9.7%	7.6%	8.6%
Wyoming	81.4%	s	75.0%~	64.7%	80.8%	Wyoming	4.9%	0.0%~	0.0%~	s	4.9%
Yates	54.9%	s	100.0~	70.0%~	55.3%	Yates	4.8%	0.0%~	0.0%~	0.0%~	4.7%

~ Fewer than 20 events in the numerator; therefore the rate is unstable.

s - Total suppressed for confidentiality.

DATA SOURCE: New York State Department of Health, Bureau of Biometrics and Health Statistics, Vital Records.

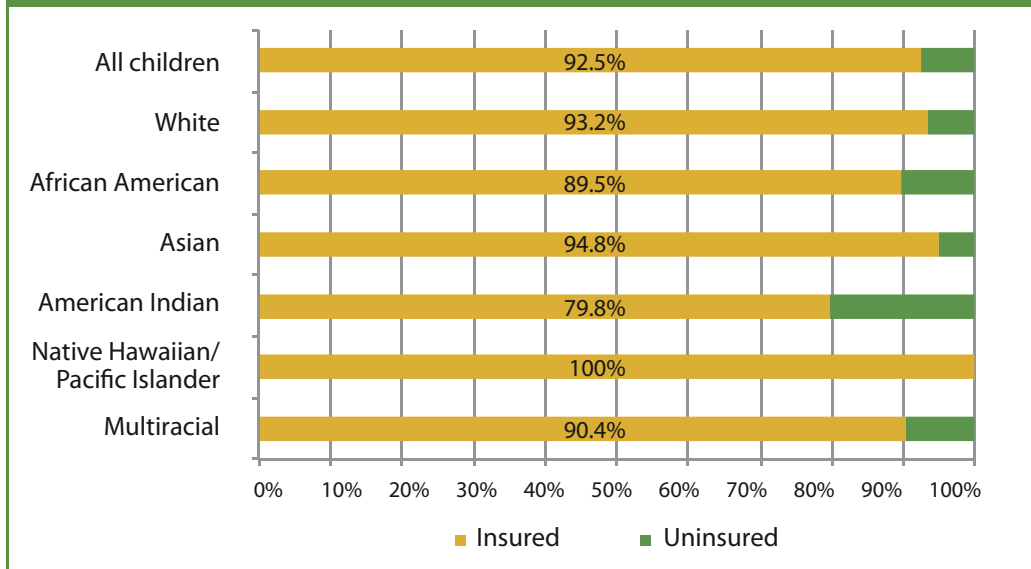
# NYS TOUCHSTONES/KIDS COUNT

## INSURANCE COVERAGE

One indicator that attempts to assess access to health care is insurance coverage. The Patient Protection and Affordability Care Act of 2010 (ACA) stipulates that each individual, regardless of age or income, be covered by health insurance by 2014 (8). In New York, the Medicaid Redesign activities include a global Medicaid cap for state expenditures with no limits on eligibility or benefits. Primary care medical homes are a priority component of the Medicaid Redesign in New York State (9).

- In New York, 92.5 percent of children under 18 are insured.
- African American and American Indian children have the lowest coverage rates in New York (Figure 6).

**Figure 6.**  
Health insurance coverage of children under 18 years by race, 2009.

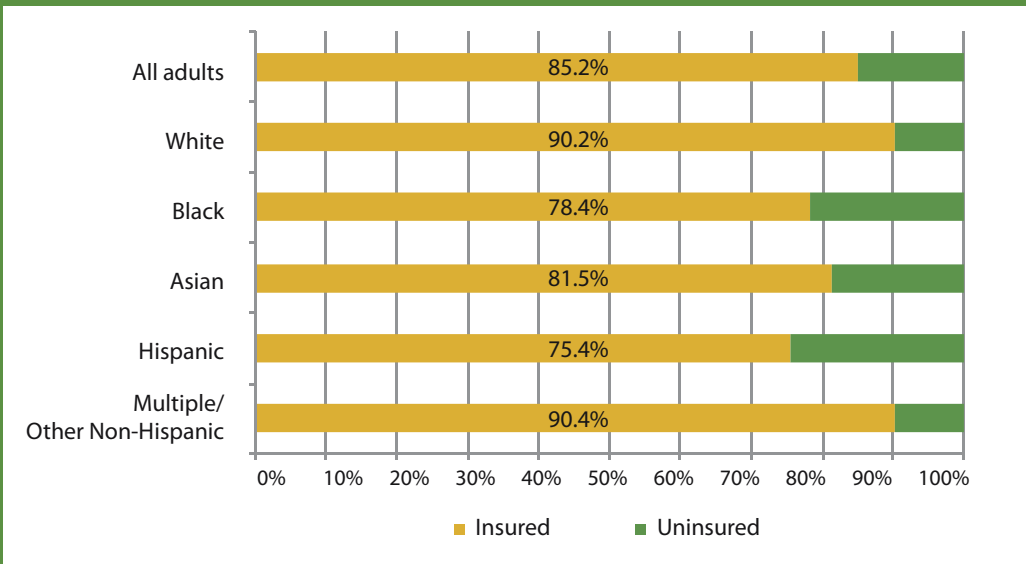


DATA SOURCE: U.S. Census Bureau, Current Population Survey, Annual Social and Economic Supplement, 2010.

- In New York, 85.2 percent of adults are insured.
- Adults who identify as multiracial, non-Hispanic are insured at a similar rate to White, non-Hispanic adults (90.4% and 90.2%).
- African American, Hispanic, and Asian American adults have the highest rates of uninsured (Figure 7).

Figure 7.

Percent of adults with insurance coverage by race and ethnicity, 2009.



DATA SOURCE: Current Population Survey Annual Social and Economic Supplement (CPS), 2010, <http://www.shadac.org/datacenter/tables/tables/id/3a925d13-19e5-4377-a8a3-9fc04c570717>.

### STATE AND FEDERAL POLICIES

Currently, New York State is undertaking a monumental redesign of the publicly sponsored health insurance program, Medicaid. The Medicaid Redesign Team has taken public comments from community members, patients, doctors, and insurance stakeholders. The four major components of Phase 1 of the New York Medicaid Redesign are (1) global spending cap, (2) care management for all, (3) major expansion of primary care medical homes, and (4) the creation of a medical indemnity fund (9). Together, these components will save millions of dollars without limiting eligibility or benefits.

When the ACA is fully implemented, almost every man, woman, and child in the United States will be covered by health insurance. Children with preexisting conditions will be covered and cannot be denied future coverage based on their health problems. Young adults until age 26 years can remain on their parent’s coverage if enrolled in school or working. That each person has insurance coverage has great potential for our ability to address children’s needs and illnesses in a timely manner. Also, with insurance coverage, the number of uninsured will decrease dramatically and the costs of health care can be better distributed equitably, by discontinuing the trend of the insured subsidizing the uninsured. New York State has led the way in expanding coverage to low-income populations such as uninsured adults and pregnant women; the ACA regulations and funding will help continue that New York tradition.

# NYS TOUCHSTONES/KIDS COUNT

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## EDUCATION

Education beyond high school is essential in the 21st century. Yet, this goal is becoming more difficult for low- and middle- income students as the costs for tuition and supplies rise each year. Recent news has highlighted tuition increases at state and private colleges and universities across the country. Another factor that impedes educational attainment is academic preparedness for postsecondary education. A national report maintains that while 70% of high school students graduate, only 32% of the graduating seniors are college ready (1). The combination of economic factors and academic skills needed to attend and excel in college means that postsecondary education may be attainable for fewer students.

The term *achievement gap* refers to the observed disparity of a number of educational measures between the performance of groups of students, especially groups defined by gender, race, and ethnicity, and socioeconomic status. The achievement gap can be observed on a variety of measures, including standardized test scores, grade point average, dropout rates, and college-enrollment and completion rates.

Research into the causes of gaps in student achievement between low-income minority students and middle-income White students has been ongoing since the publication of the Coleman Report, which was commissioned by the U.S. Department of Education in 1966 (2). Since that time there has been a growing base of research that suggests that school, home, and community factors impact the academic achievement of students and contribute to the gap.



# NYS TOUCHSTONES/KIDS COUNT

## HEADS OF HOUSEHOLD EDUCATION LEVELS

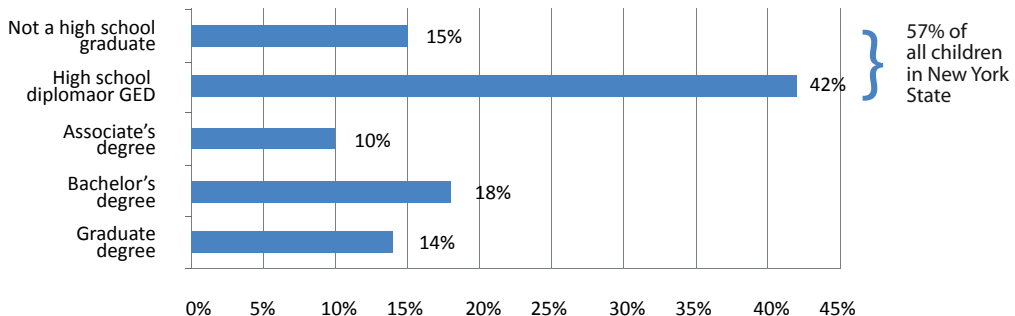
One glaring childhood disparity is the percentage of children whose parents (heads of household) have a high school diploma, general education diploma (GED), or less educational attainment. Parents' ability to help their children with homework and other educational situations is limited or supported by their own education attainment and experiences. Research shows that a preschooler living with parents who have a college degree hear over 30 million more spoken words by the time they reach kindergarten than a child whose parents have a high school education or less (3).

In New York, almost three out of five children live with parents who have achieved a high school diploma or less (Figure 8).

- The majority (57%) of New York's children live with parents who have a high school diploma, GED, or less, compared with 42 percent of children who live with parents who have a college degree.

Figure 8.

Educational attainment of heads of households with children, 2009



DATA SOURCE: U.S. Census, American Community Survey, 2009.

## STUDENT AND TEACHER DIVERSITY

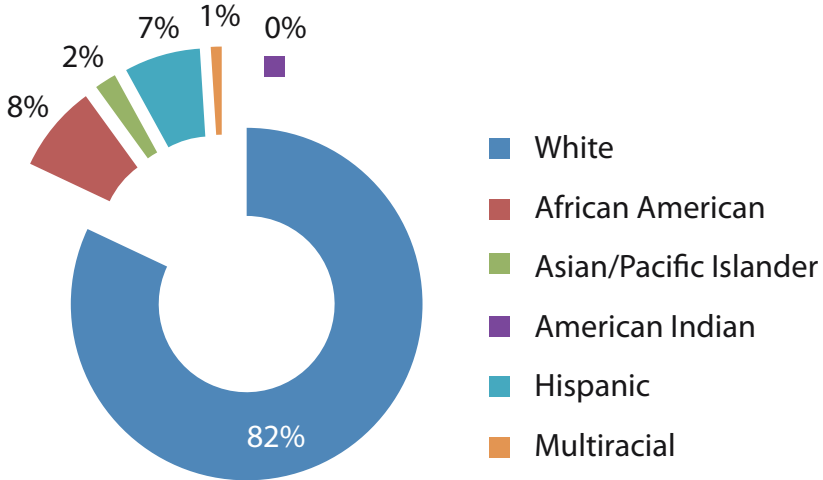
The racial and ethnic background of New York's public school students and teachers are seen in Figures 9 and 10.

- White, non-Hispanic teachers make up 82 percent of the teaching staff compared with 51 percent of students.



Figure 9.

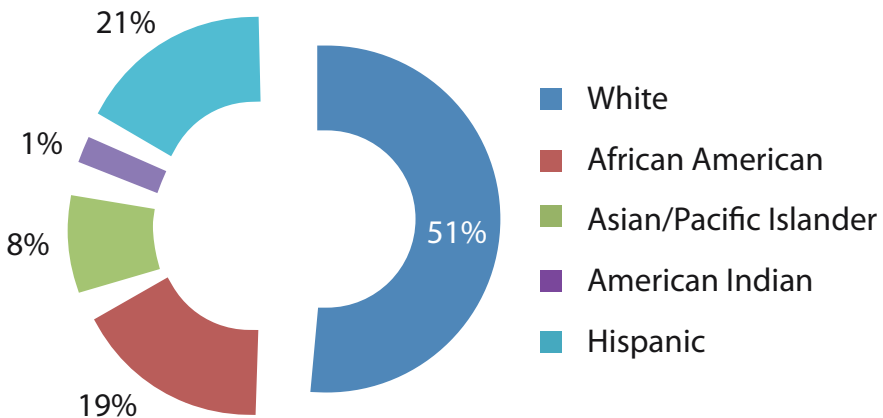
Racial and ethnic background of public school teachers in New York, 2010/2011



DATA SOURCE: New York State Education Department, Office of Information and Reporting Services.

Figure 10.

Racial and ethnic background of public school students in New York, 2008/2009



DATA SOURCE: Common Core of Data, 2008/2009 school year (nonadjudicated).

# NYS TOUCHSTONES/KIDS COUNT

## ADVANCED PLACEMENT® (AP®) PROGRAM

The College Board's Advanced Placement (AP) program offers high school students the opportunity to study college-level topics while still in high school. The AP courses are offered at each district's discretion based on staff availability, financial considerations, and student interest. Research has shown that high school students who score a 3 or more on one AP exam typically experience more success in college than their peers who do not take AP courses (4). During the 2009/2010 school year, almost a quarter (24.6%) of seniors completed high school with at least one successful AP experience in New York State as compared with 16.9 percent nationwide. New York was second only to Maryland (26.4%) in seniors achieving at least one successful AP exam. This AP experience in New York is a 5.6 percentage decade-long improvement from school year 1999/2000 (4).

While the overall picture in New York regarding AP courses is favorable, one must consider the extent to which African American, Hispanic, and American Indian students are able to access AP courses and succeed on AP exams. In other words, does the percentage of African American, Hispanic, and American Indian students taking successful AP exams equal or approach the percentage of African Americans, Hispanics, and American Indians students in the New York public school system?

### According to the College Board:

- African Americans in New York made up 15.5 percent of the 2010 graduating class but only 4.1 percent of the seniors with at least one successful AP experience. The College Board gives New York a grade of 26.5 out of 100 percent for equity and excellence for African American students.
- Hispanics in New York made up 14.1 percent of the graduating class 2010 but only 11.3 percent of the seniors with at least one successful AP experience. The College Board gives New York a grade of 80.1 percent for equity and excellence for Hispanic students.
- American Indians in New York made up 0.5 percent of the graduating class 2010 and 0.2 percent of the seniors with at least one successful AP experience. The College Board gives New York a grade of 40.0 percent for equity and excellence for American Indians students.

## COHORT GRADUATION RATES

The cohort graduation rate is used to determine how many ninth graders graduate from high school within four years. The cohort is named by the year the graduating class of students started ninth grade. The four-year cohort that graduated this past June in 2011 is referred to as the cohort 2007, which is the year the graduating students were freshman in high school. Statewide, 73.4 percent of the students in cohort 2007 had graduated after four years. This rate represents an increase from the 66 percent graduation rate for students in cohort 2001 (5).

The four-year graduation rate of African American students increased from 45 to 57.7 percent between 2005 and 2010. The four-year graduation rate for Hispanic students increased from 42 to 57.3 percent during the same period. Also, more Hispanic and African American students are staying in school. The achievement gap between African American and Hispanic students with their White peers was 26 and 27 percent, respectively. However, work continues to close the gap completely.

According to a recent report on the costs and benefits of quality education for all children, New York State would save \$650 million dollars with a ten percentage point gain in one cohort graduation rate (6).

### STRATEGIES AND POLICIES

The federal No Child Left Behind (NCLB) Act requires states to disaggregate student achievement data by racial subgroups of students, including African American and Hispanic students, so that performance gains for all children can be tracked. There are incentives and penalties built into NCLB for gains and losses for state and local school administrations.

On August 24, 2010, the U.S. Education Department announced that New York State was awarded \$696,646,000 as a winner in the second round of the federal Race to the Top (RTTT). Although a different tactic than NCLB, RTTT funding also has incentives and flexibility written into it for state and local school administrators. At this time, New York State will compete for additional monies through the RTTT Early Learning Challenge Fund,



# NYS TOUCHSTONES/KIDS COUNT

which will be administered jointly by the U.S. Departments of Education and Health and Human Services. It is expected that this will be awarded by December 31, 2011.

The New York State Early Childhood Advisory Council, with a full complement of partners, is working on several initiatives to increase the quality of early learning programs in New York State. One initiative involves aligning the state's developmental guidelines and standards to help ensure that all children who attend any early care and education setting in the state will be taught by responsive and knowledgeable teachers in stimulating learning environments that support and build upon each child's development. This huge undertaking encompasses Head Start programs, Universal Prekindergarten, child care, and nursery school programs throughout New York State.

From early childhood through high school graduation, the school system is where children and youth spend their days, using their new skills in mathematics, language arts, and science and preparing for college and the job market. Research notes that combining literacy, both language and financial, with workforce development training has proven successful with disconnected youth, who are most at risk for dropping out of high school and not finding sustainable employment (7,8). New York has prioritized high school dropout prevention among the new RTTT funding strategies.



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## KIDS COUNT DATA CENTER

<http://datacenter.kidscount.org>

The following data are now available by Congressional District through the KIDS COUNT Data Center. Be sure to visit the site at <http://datacenter.kidscount.org/> to learn more about the Congressional Districts in New York State. You can also access the data from the mobile site.

### DEMOGRAPHICS

- Child poverty by nativity

### ECONOMIC WELL-BEING

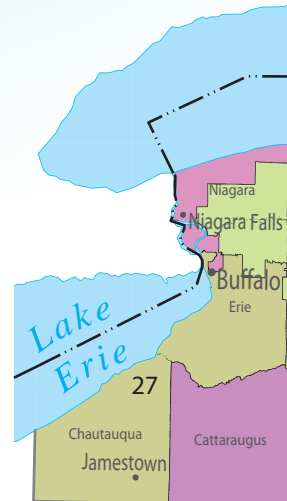
- Child poverty (100% of federal poverty level [FPL])
- Population in poverty
- Children in extreme poverty (50% FPL)
- Children below 150% of poverty
- Children below poverty by age group
- Persons 18–24 in poverty
- Single-parent families with related children that are below poverty
- Married-couple families with related children that are below poverty
- Families with related children that are below poverty
- Children in poverty (100% FPL) by race
- Children under 6 with no parent in the labor force
- Children under 6 with all available parents in labor force
- Unemployed teens age 16–19

### EDUCATION

- Teens who are high school dropouts
- Teens not attending school and not working
- Children that speak a language other than English
- Children that have difficulty speaking English

### FAMILY STRUCTURE

- Children in single-parent families
- Children living with cohabitating domestic partners
- Child population by household type





# MAP OF CONGRESSIONAL DISTRICTS (CIRCA 2010).



DATA SOURCE: National Atlas of the United States, August 10, 2011, <http://nationalatlas.gov>.



## CIVIC ENGAGEMENT

The Civic Engagement section is meant to highlight the degree to which families and communities are preparing our youth for the challenges ahead in adulthood, as well as the extent to which youth are partaking in experiences and building skills that are integral to a successful transition to adulthood. At one end of the civic engagement continuum is volunteerism, which is seen as a win-win for the person volunteering and the organization, because of the work accomplished and the positive community involvement. At the opposite end of that continuum is involvement in the juvenile justice system.

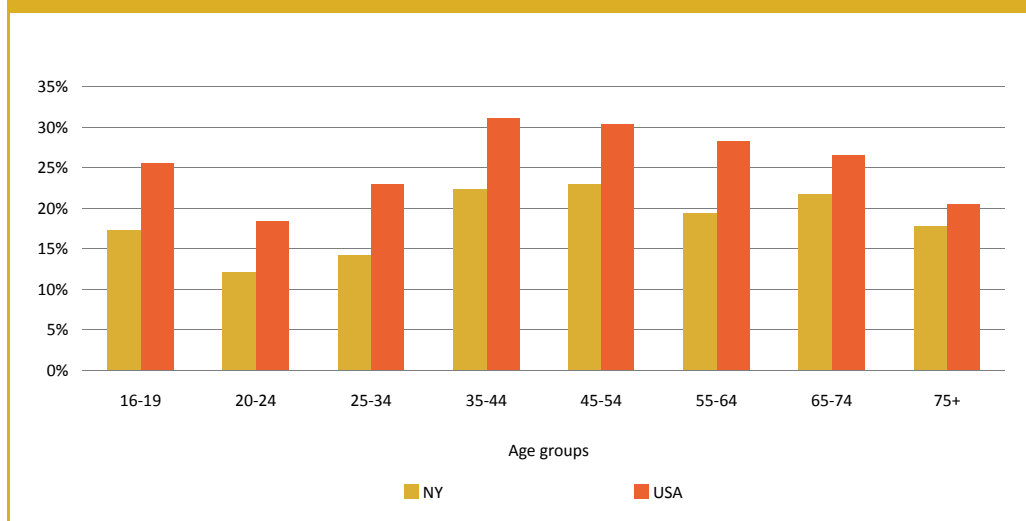
### NEW YORK VOLUNTEER RATE

Volunteering can be one of the first ways children and youth contribute to their community and experience civic engagement with parents, peers and neighbors. In a nationwide comparison of volunteer rates, New York ranked last or 50th with an overall volunteer rate of 19 percent (1). Figure 11 shows volunteer rates for age groups in New York and nationwide.

- There is no age group in New York that volunteers more than the national average for their peers.
- In New York, 17.3 percent of youth 16–19 years old are volunteering compared with 25.5 percent nationwide.
- In New York, 19.4 percent of adults 55–64 years old are volunteering, while 28.3 percent are volunteering nationwide.

Figure 11.

Volunteer rates by age in New York State and the United States, 2009



DATA SOURCE: National Corporation of National and Community Service, 2007–09.  
Data from <http://www.volunteeringinamerica.gov/factors.cfm?state=NY>.

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Volunteers can be helpful to many civic and social services in the community, providing important contributions. In return, volunteers know that they are contributing to the betterment of society by participating in these activities. The New York Civic Health Index 2010 found that although the percentage of New Yorkers who volunteered for an organization is lower than the national average (19.3% vs. 28.3%), a larger percentage (42.3%) had donated money or items to help meet unmet needs in the community (2).

New York State also has a strong commitment to short-term intensive community volunteerism, such as the Martin Luther King Jr. Service Day, held each year in January, Earth Day in April, and the September 11th Service and Remembrance Day. Factors that positively influence volunteering are homeownership, education level, and a large number of nonprofit agencies in the community. Conversely, a longer commute time and communities with high foreclosure, unemployment, and poverty rates impact negatively on the commitment to volunteering.

Recognizing that New Yorkers do have civic pride and a sense of caring for their neighbors and community, the New York State Commission on National and Community Service offers grants and ongoing support to local community- and faith-based agencies, educational institutions, and local government to increase and sustain volunteerism. In 2011, the State Commission awarded \$16.9 million in AmeriCorps grants and \$750,000 in Volunteer Generation Fund grants to strengthen the impact of more than 45 organizations across New York State in tackling the most pressing challenges facing New York's communities (3).

New York State does not have a community service requirement for high school graduation, but in recent years several legislative initiatives have attempted to address this gap for youth by proposing that students in high school or college complete a certain amount of community service.

## DISPROPORTIONATE MINORITY CONTACT (DMC) IN THE JUVENILE JUSTICE SYSTEM

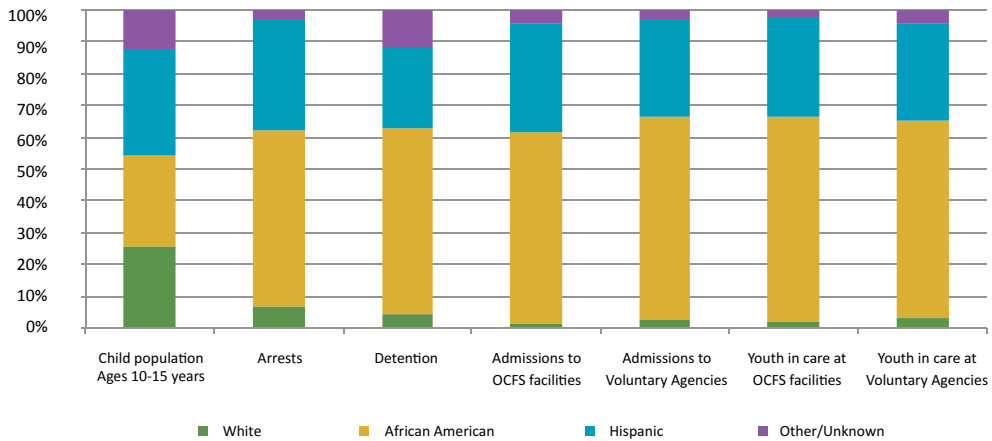
Racial inequities and the disproportionate number of minority youth in the juvenile justice system have been documented for an extensive period of time (4). DMC refers to the interactions members of minority groups have with the juvenile justice system that when compared with White peers of the same age and gender. Contact can be measured at different stages of the justice process: arrest, detention, admission to care, and being in care. A report developed by the New York State Office of Children and Family Services (OCFS), *Disproportionate Minority Representation in Child Welfare and Juvenile Justice Systems*, highlighted several decision points in the child welfare and juvenile justice system where DMC was observed (5). Overall, the disparity rates for African American youth are more pronounced than for Hispanic youth. This pattern is particularly evident in NYC than rest of state (5). Figures 12 and 13 show regional percentages of youth by race and ethnic categories engaged in the juvenile justice system at various points in the system.

Overall, African American and Hispanic youth experience high rates of disparity at every stage of the juvenile justice process, both in NYC and rest of state. This is evident when examining the disparity index, which represents the ratio of the rate per 1,000 African American youth compared to the rate per 1,000 White youth for a decision point in the juvenile justice system.

- In NYC, the disparity index of African American youth at arrest was 7.3 compared to White youth while the disparity index for admissions to OCFS facilities was 40.3. In other words, an African American youth is 7.3 more times likely to be arrested and 40.3 more times likely to be admitted to an OCFS facility than a White youth in NYC.
- Hispanic youth in NYC had a disparity index of 3.9 for arrests and 19.6 for admissions to OCFS facilities.
- Figure 12 depicts the portion of the general population of children and youth ages 10 through 15 years in NYC by race/ethnicity followed by the portion of children and youth in the same age group as they are involved in various levels of the juvenile justice system.

**Figure 12.**

**Distribution of racial and ethnic categories of youth in the juvenile justice system: New York City**



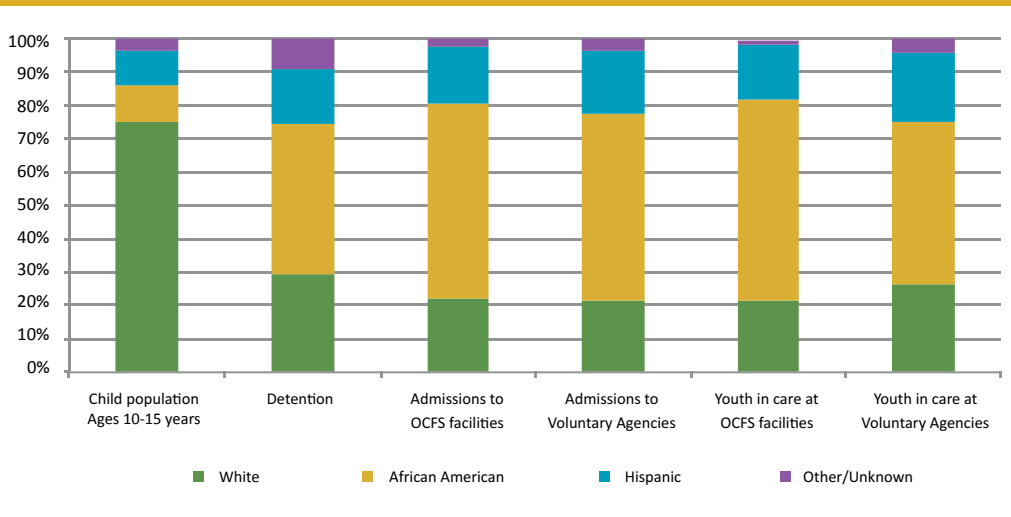
**DATA SOURCE:** Disproportionate Minority Representation in Child Welfare and Juvenile Justice Systems, by V. Dorabawila & S. Mitchell-Herzfeld, 2011, New York State OCFS report.

# NYS TOUCHSTONES/KIDS COUNT

- In the region outside of NYC, which is referred to as rest of state, the disparity index of African American youth was 18.5 compared with White youth for admission to an OCFS facility.
- Hispanic youth in rest of state had a disparity index of 5.6 for admission to an OCFS facility. The youth arrest data are not captured in the same way by jurisdictions outside of NYC.
- Figure 13 depicts the portion of the general population of children and youth ages 10 through 15 years in the rest of state by race/ethnicity followed by the portion of children and youth in the same age group as they are involved in various levels of the juvenile justice system.

**Figure 13.**

## Distribution of racial and ethnic categories of youth in the juvenile justice system: Rest of State



**DATA SOURCE:** Disproportionate Minority Representation in Child Welfare and Juvenile Justice Systems, by V. Dorabawila & S. Mitchell-Herzfeld, 2011, New York State OCFS report.

## DETENTION REFORM IN NEW YORK STATE

The 2011–2012 state budget included provisions specifically designed to discourage the unnecessary or inappropriate use of juvenile detention and expanded funding for effective alternatives to detention programming and services (6). Accordingly, OCFS, the state agency responsible for detention facilities, has made comprehensive, statewide detention reform a priority. OCFS encourages counties to use this funding to focus on programs that limit pretrial detention for court-involved youth. Also, state funding is going toward programs and strategies that decrease disproportionate minority contact.

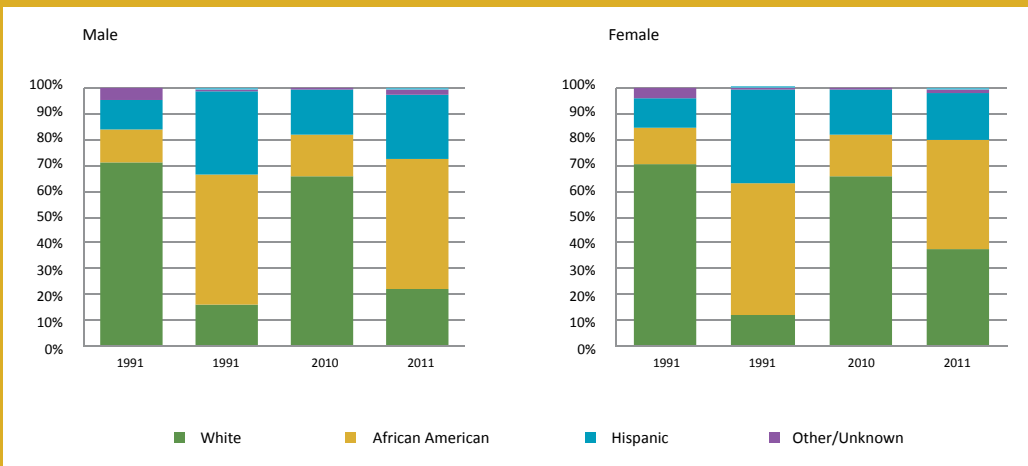
**DISPROPORTIONATE MINORITY CONTACT (DMC)  
OF ADULTS IN THE PRISON SYSTEM**

Disproportionate minority contact is a topic of interest to the state prison system also. The Rockefeller Drug Laws, enacted in 1973, mandated minimum prison terms for the possession or sale of relatively small amounts of drugs. While intended to target major drug dealers, most of the people incarcerated under these laws were convicted of low-level, nonviolent offenses, and many of them had no prior criminal record. Across New York State, the Rockefeller Drug Laws created racial disparities and exacted an enormous financial toll. In 2009, the state implemented two important drug law reforms: an elimination of mandatory minimum sentences and a restoration of judges’ authority to send many drug offenders to treatment programs instead of prison. The Rockefeller Drug Laws Reform Act of 2009 also expanded in-prison treatment and re-entry services so that people who want and need help can access it; also, it allowed for approximately 1,500 people serving excessive sentences for low-level nonviolent drug offenses to apply for resentencing (7).

Figure 14 shows the distribution of racial and ethnic categories of males and females in New York State prisons. The racial and ethnic categories within the criminal justice system use four race/ethnicity categories: White, African American, Hispanic, and other. The “other” category includes individuals who identify as Asian Americans and American Indians (“unknown” largely includes those inmates who do not specify their racial and ethnic backgrounds) (8).

**Figure 14.**

**Distribution of racial and ethnic categories in general population and New York State Department of Correctional Services by gender**



**DATA SOURCE:** New York State Department of Corrections and Community Services. 1991 data is from calendar year January–December 1991, and 2011 data are 12 months of data ending 6/4/2011. 1991 population data are from U.S. Census, CDC (Centers for Disease Control and Prevention) Wonder, NCHS bridged-race July 1 estimates. 2010 Population data are from the U.S. Census 2010 preliminary SPF1.

# NYS TOUCHSTONES/KIDS COUNT

Early in 2011, the Division of Parole was merged with the Department of Correctional Services, creating the New York State Department of Corrections and Community Supervision for an estimated \$17 million savings in fiscal year 2011–12 (9). A primary goal of the new agency will be to create a more seamless, more comprehensive operation through a continuum of care from the moment an offender enters the correctional system until he or she successfully completes the required period of community supervision. Over the past few years there has been a positive recognition of the concepts of re-entry and transitional services on the part of the public, community service providers, and the religious communities. Providing the community-based services for a successful re-entry into civil society is essential to rebuilding one's life and a meaningful connection to family, friends, and one's community.

Also enacted in early 2011 was the state's prison closure plan, which includes the closure of four male minimum security facilities: Buffalo Work Release (Erie County), Camp Georgetown (Madison County), Summit Shock (Schoharie County), and Fulton Work Release (Bronx County), and three male medium security facilities: Arthur Kill (Richmond County/Staten Island), Mid-Orange (Orange County), and Oneida (Oneida County). Approximately 3,800 unneeded and unused beds will be eliminated, saving \$72 million in fiscal year 2011–12 and \$112 million in fiscal year 2012–13. Communities affected by the closures will be able to seek economic development assistance from the state, which includes money from a \$50 million fund as well as additional tax credits to help end the reliance on prisons as a major source of employment and economic sustainability (9).

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## FAMILY

The Touchstones Family Life Area focuses on how families provide children with safe, stable, and nurturing environments as well as factors, both positive and negative that can impact families' well-being. This section highlights the diversity and disparity of New York families. A description is provided of those who are new to New York, including children in immigrant families, migrant farm workers, and the Amish. These groups bring with them the strong cultural bonds they share within their families and communities. Also, an examination of the disparity in the child welfare system is included.

### DIVERSITY: WHO ARE NEW YORK'S NEW ARRIVALS?

New York State has always had a reputation for being a diverse state, perhaps because of the rich history of Ellis Island as the immigrant gateway to America and the world stature of New York City. New York has one of the longest borders, with Canada along the St. Lawrence waterway and the Great Lakes—Lake Ontario and Lake Erie.

New York has a higher percentage of children living in immigrant families than the national average: 33 percent of New York's children live in immigrant families compared with the



## NYS TOUCHSTONES/KIDS COUNT

national average of 24 percent (1). Of the 25 percent of children living in linguistically isolated families, 24 percent are living in immigrant families (1). The diversity of New York's children is also noted in our schools where over 160 languages are spoken by children in New York public schools who are receiving Limited English Proficient (LEP) services to help improve their English reading and writing skills (2). The five major languages of LEP students are Spanish, Chinese, Arabic, Bengali, and Haitian-Creole. New York City has the majority (68%) of students in LEP. This constitutes 8.9 percent of the public school student population statewide.

Local public libraries are valuable resources for adult English language learners interested in gaining a range of skills. Through New York State's Adult Literacy Library Services, libraries receive grants to support programs that assist adults who wish to build skills and enhance their opportunities for employment. For example, English for speakers of other languages programs teach citizenship preparation and provide instruction in the English language and conversation skills. Additionally, these funds support programs that help adults who read below the sixth-grade level, adults with learning disabilities, and adults preparing for the general equivalency diploma (GED). Programs help adults build the skills needed for job preparations and employment, use of computers, as well as traditional literacy skills (3).

***Migrant farm workers:*** Approximately 47,000 migrant farm workers and their family members come to New York State each year to plant, cultivate, harvest, and pack fruits,



vegetables, and nuts (4). Many are U.S. citizens or permanent residents of the U.S. and travel around to follow different crops or to work in the fishing, meat packing or dairy industries. The federal Head Start and Early Head Start administration has tailored services for migrant and seasonal agricultural worker families that include child care, enhanced screening and referral, and parent education. There are 12 Migrant and Seasonal Head Start (MSHS) programs in New York State that served over 600 children in the federal fiscal year of 2007–08 (5).

Most of the children served in the fiscal year 2007–08 were Hispanic and almost 95 percent (94.9%) lived in homes where the primary language was a language other than English. Nearly 9 out of 10 children had access to dental care by the end of the year and fully 100 percent of children age 3 years and older had a professional dental exam. Additionally, 100 percent of children enrolled in MSHS had health insurance and were up-to-date with their immunizations. Thirteen percent of children in MSHS were identified as having a disability. Families with children enrolled in MSHS took part in English as a second language literacy training and parenting education. Many families received additional support services. Also, Fifteen percent of the MSHS staff and 45 percent of the volunteers were current or former MSHS parents (5).

**The Amish:** Another form of the word migrant is migration, which involves families moving from state to state. The Amish have developed communities within 28 states, usually organized around a church and pastor. Recent migration trends point to an influx of 231 Amish families into New York State, where they are finding fertile farmland and traditional rural communities conducive to their traditions (6). Amish families offer their children much strength, such as a strong belief in community and reliance on others, a strong sense of faith, and marketable agricultural skills and knowledge. Amish children grow up within these tight-knit communities attending Amish one-room schoolhouses or rural public schools, although not many Amish families in New York choose the latter option. As adults, the Amish children determine for themselves to leave or join the Amish life; this adult Baptism distinguishes the Amish from other Christian sects (7).

## DISPARITY: OVERREPRESENTATION OF MINORITIES IN THE CHILD WELFARE SYSTEM

Overrepresentation of minorities or the disproportionate representation of minorities in child welfare or foster care systems describes the situation when a minority group represents a small percentage of the overall population (e.g., 15%) but when counted in the system of care (e.g., foster care admissions or child welfare cases), the percentage is more than the minority group's representation in society (e.g., 34%). Policy researchers have coined the term disparity index to measure these differences.

The OCFS report *Disproportionate Minority Representation in Child Welfare and Juvenile Justice Systems* examined the degree of disparity that occurs at several decision points in

# NYS TOUCHSTONES/KIDS COUNT



the New York State child welfare system (8). The decision points examined were reports to the statewide child registry (SCR), commonly known as the child abuse hotline; indicated reports, which indicate abuse or neglect by caregiver; admission to foster care; and placement in foster care.

Compared with White children, African American children in New York City were 5.3 times more likely to be involved in an SCR report, 6.8 times more likely to be involved in an indicated report, 13.6 times more likely to be admitted to foster care, and 13.1 times more likely to be in foster care. Hispanic children were 1.4 times more likely to be involved in an SCR report, 1.6 times more likely to be involved in an indicated report, and 1.2 times more likely to enter or be in foster care. For the foster care decision points, the disparity index was close to the value of one, which suggests the disparity between Hispanic and White children was very low.

Although the disparity index for Hispanic children was high (4.5) and similar to African American children at the decision point regarding involvement in SCR reports, the rate of disparity for Hispanic children was relatively constant for the other decision points. The Hispanic disparity index was 5.6 for involvement in indicated reports, 6.8 for foster care entries and 5.8 for children in foster care.

Overall, the disparity indices were consistently lower in the rest of state than in NYC for both African American and Hispanic children. In rest of state, compared with White children, African American children were 2.1 more likely to be involved in an SCR report, 2.2 more likely to be involved in an indicated report, 4.2 times more likely to be admitted to foster care, and 4.2 more likely to be in foster care.

## POLICY ISSUES

The Family Assessment Report (FAR) allows caseworkers to investigate a subset of child abuse or maltreatment reports and offer timely, immediate supports and referrals that could help families, as opposed to filing an indicated report of child abuse or neglect (9). Similar in theory to family preservation or child abuse prevention programs in which some families need assistance in short doses to maintain functioning, FAR allows a family to secure help and support without rising to the level of court intervention. In New York, several counties have implemented FAR interventions, and more are expected to begin programs during the next year. FAR was expanded statewide so that counties can opt in to offer FAR through Chapter 25 of the Laws of 2011.

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## COMMUNITY

The Touchstones Community section focuses on environmental health, such as air and water quality, as well as whether communities are able to provide children, youth, and their families with resources to help them meet their needs for physical, social, moral, and emotional growth. Access to high-quality food choices, unemployment rates, environmental hazards, and affordability are all factors that influence a child's growth and a community's safety and affordability. The Community section provides a broad overview of these varied indicators in New York State.

### ACCESS TO HEALTHY FOOD CHOICES

Access to good nutrition is an important component of ensuring a child's overall growth. The extent to which high-quality food is available in communities depends on the types of food outlets (e.g., grocery stores, convenience stores, farmers' markets, fast-food outlets) and their proximity to homes. In New York, access to grocery stores within one mile of one's home is rare for members of low-income families living in low-income neighborhoods. A majority of counties, 46 out of 62, have more than 10 percent of low-income households residing more than one mile from a grocery store, with the highest rates in Hamilton and Allegany counties (33 and 31% respectively) (1).

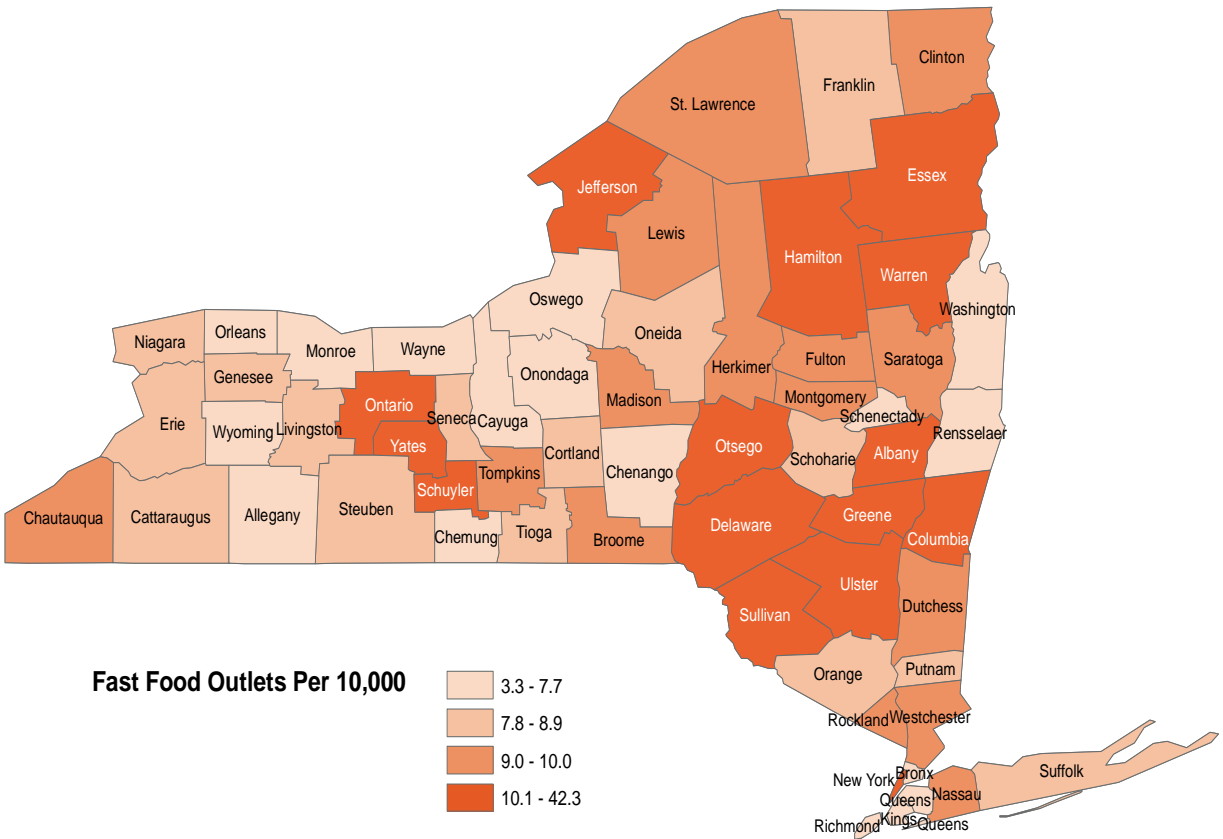


# NYS TOUCHSTONES/KIDS COUNT

Fast-food outlets, known for unhealthy food and inexpensive food options, make fast food a common choice among people with minimal money and/or minimal time. Figure 15 displays the proportion of fast-food outlets per 10,000 people for the counties in New York State.

**Figure 15.**

**Fast-food outlets per 10,000 population in New York State counties.**



**DATA SOURCE:** USDA (U.S. Department of Agriculture) Economic Research Service (ERS) Food Environment Atlas, 2011. <http://maps.ers.usda.gov/FoodAtlas/>

Fast-food outlets have come under criticism from parents and nutrition advocates for the nutritional content and oversized portions, leading one famous fast-food entity to reduce the size of its portions and include an apple in its offering (2). Neighborhood zoning is one way communities can restrict or promote fast-food outlets.

### MEDIAN COUNTY INCOME, HOUSEHOLD INCOME, AND HOME VALUES

The affordability of each community, as measured by home prices and household income vary geographically and by the industries in each region. Median household income has been utilized to distinguish a community's financial environment. Median household incomes are used because medians reduce the impact of outliers.

In Table 3, counties are ranked from the largest to smallest difference between the county median income and the lowest median income of the racial and ethnic groups (column g) (3). For example, Genesee County has the largest disparity (\$38,900) between its county median income of \$48,197 and the median income of Hispanics, \$32,158, who make up the racial/ethnic group in the county with the lowest median income (3). The largest income disparity among racial/ethnic groups (\$93,270) occurs in Warren County between Asian Americans (\$127,632) and Hispanics (\$34,362). New York County (Manhattan) has the second highest income disparity (\$70,319) between Whites earning (\$98,655) and Hispanics (\$28,336). Some counties have a county median income that is lower than the median incomes for all of the racial and ethnic groups, which may be a sign of income equity, as in the counties of Hamilton, Schuyler, and Clinton.



# NYS TOUCHSTONES/KIDS COUNT

**Table 3. Ranked Disparity: Median Household Income in the Past 12 Months  
(in 2009 inflation-adjusted dollars)**

County (a)	County median income (b)	African American (c)	Asian (c)	Hispanic (d)	White, non- Hispanic (e)	Difference in median income between highest and lowest race/ethnic groups (f)	Difference in median income between county median and median of lowest race/ ethnic group (g)	County median home value (h)
Genesee County	\$48,197	\$29,479	\$9,297	\$32,158	\$49,301	\$38,900	\$40,004	\$95,500
New York County	\$66,818	\$30,604	\$56,213	\$28,336	\$98,655	\$38,482	\$70,319	\$767,200
Richmond County	\$71,206	\$39,202	\$74,504	\$55,810	\$77,450	\$32,004	\$38,248	\$461,400
Westchester County	\$79,585	\$49,574	\$113,587	\$47,699	\$96,339	\$31,886	\$65,888	\$571,700
Allegany County	\$40,917	\$9,959	\$57,500	\$53,426	\$41,133	\$30,958	\$47,541	\$62,500
Ontario County	\$55,300	\$25,170	\$46,071	\$24,444	\$56,575	\$30,856	\$32,131	\$118,600
Essex County	\$44,930	\$14,167	\$48,750	\$33,000	\$45,139	\$30,763	\$34,583	\$131,300
Columbia County	\$54,573	\$34,961	\$30,417	\$24,464	\$55,882	\$30,109	\$31,418	\$201,200
Rensselaer County	\$54,221	\$25,860	\$51,176	\$27,431	\$57,072	\$28,361	\$31,212	\$151,100
Schoharie County	\$49,695	\$21,406	#	\$37,250	\$50,250	\$28,291	\$28,844	\$120,600
Livingston County	\$51,698	\$40,694	\$81,500	\$24,034	\$52,423	\$27,664	\$57,466	\$105,600
Schenectady County	\$54,468	\$33,300	\$67,873	\$26,881	\$57,370	\$27,587	\$40,992	\$145,000
Fulton County	\$41,425	\$46,111	\$22,379	\$14,590	\$41,800	\$26,835	\$31,521	\$86,700
Chautauqua County	\$40,179	\$31,811	\$38,914	\$13,621	\$41,885	\$26,558	\$28,264	\$75,900
Orleans County	\$46,418	\$20,111	\$31,250	\$34,678	\$48,326	\$26,307	\$28,215	\$81,700
Wayne County	\$52,351	\$26,350	\$48,750	\$34,831	\$53,697	\$26,001	\$27,347	\$100,100
Cayuga County	\$47,414	\$22,188	\$35,714	\$25,987	\$47,987	\$25,226	\$25,799	\$93,100
Onondaga County	\$50,129	\$25,184	\$55,020	\$25,659	\$54,122	\$24,945	\$29,836	\$114,100
Oneida County	\$45,433	\$20,505	\$37,679	\$29,367	\$47,093	\$24,928	\$26,588	\$91,500
Monroe County	\$51,105	\$27,122	\$56,250	\$29,658	\$56,733	\$23,983	\$29,611	\$122,700
Erie County	\$46,609	\$25,569	\$48,816	\$22,991	\$51,935	\$23,618	\$28,944	\$107,900
Ulster County	\$57,485	\$34,123	\$62,964	\$48,813	\$59,742	\$23,362	\$28,841	\$237,400
Nassau County	\$92,450	\$77,860	\$109,451	\$69,152	\$96,432	\$23,298	\$40,299	\$493,400
Niagara County	\$45,749	\$22,853	\$43,828	\$27,177	\$48,157	\$22,896	\$25,304	\$93,300
Albany County	\$55,350	\$33,039	\$71,354	\$41,297	\$59,882	\$22,311	\$38,315	\$178,700
Seneca County	\$45,571	\$24,063	\$61,250	\$24,112	\$46,125	\$21,508	\$37,187	\$86,100
Dutchess County	\$68,472	\$47,265	\$96,699	\$50,580	\$71,117	\$21,207	\$49,434	\$328,100
Tompkins County	\$46,506	\$30,918	\$25,325	\$38,003	\$50,634	\$21,181	\$25,309	\$147,900
Lewis County	\$41,719	\$30,455	\$21,923	\$38,417	\$41,936	\$19,796	\$20,013	\$86,100
Greene County	\$46,213	\$32,308	\$26,442	\$28,077	\$48,080	\$19,771	\$21,638	\$172,600
Madison County	\$51,670	\$40,662	\$32,500	\$38,864	\$52,152	\$19,170	\$19,652	\$98,500
Franklin County	\$40,587	\$23,359	\$21,419	\$22,404	\$41,089	\$19,168	\$19,670	\$76,600

County (a)	County median income (b)	African American (c)	Asian (c)	Hispanic (d)	White, non-Hispanic (e)	Difference in median income between highest and lowest race/ethnic groups (f)	Difference in median income between county median and median of lowest race/ethnic group (g)	County median home value (h)
Washington County	\$46,886	\$28,194	\$31,801	\$71,207	\$47,072	\$18,692	\$43,013	\$116,400
Oswego County	\$45,071	\$37,065	\$26,528	\$54,969	\$45,255	\$18,543	\$28,441	\$81,000
Cattaraugus County	\$41,482	\$37,604	\$66,316	\$23,500	\$41,641	\$17,982	\$44,816	\$73,800
Rockland County	\$82,368	\$64,445	\$106,998	\$64,968	\$86,055	\$17,923	\$42,553	\$491,100
Saratoga County	\$64,705	\$47,111	\$84,868	\$61,336	\$64,900	\$17,594	\$37,757	\$197,000
Broome County	\$43,467	\$27,016	\$35,913	\$29,973	\$44,708	\$16,451	\$17,692	\$91,800
Suffolk County	\$84,530	\$70,565	\$91,877	\$68,388	\$87,782	\$16,142	\$23,489	\$436,200
Warren County	\$50,168	\$41,875	\$127,632	\$34,362	\$50,410	\$15,806	\$93,270	\$159,700
Montgomery County	\$42,716	\$42,407	\$27,167	\$29,867	\$44,728	\$15,549	\$17,561	\$87,900
Otsego County	\$44,057	\$48,397	\$31,250	\$48,036	\$43,918	\$12,807	\$17,147	\$121,900
Jefferson County	\$43,447	\$47,654	\$43,867	\$30,662	\$43,920	\$12,785	\$16,992	\$96,300
Chemung County	\$42,420	\$32,367	\$79,500	\$30,268	\$43,078	\$12,152	\$39,888	\$78,300
Wyoming County	\$48,943	\$56,000	\$38,750	\$38,074	\$49,346	\$10,869	\$17,926	\$89,900
Orange County	\$69,255	\$58,734	\$98,453	\$62,688	\$70,771	\$10,521	\$39,719	\$311,700
Cortland County	\$44,853	\$33,929	\$69,130	\$36,750	\$44,975	\$10,374	\$35,201	\$89,100
Kings County	\$42,894	\$39,009	\$45,366	\$32,308	\$52,368	\$9,740	\$20,060	\$533,900
Chenango County	\$43,991	\$44,545	\$70,156	\$34,631	\$44,158	\$9,360	\$35,525	\$81,500
Herkimer County	\$42,048	\$51,328	\$96,281	\$32,959	\$42,384	\$9,089	\$63,322	\$82,600
Steuben County	\$42,812	\$40,219	\$104,688	\$34,922	\$42,821	\$7,890	\$69,766	\$77,900
Sullivan County	\$48,586	\$40,898	\$82,500	\$42,042	\$49,957	\$7,688	\$41,602	\$171,800
Delaware County	\$41,656	\$34,479	\$70,673	\$39,219	\$41,775	\$7,177	\$36,194	\$124,500
Bronx County	\$33,794	\$35,866	\$48,466	\$27,331	\$49,488	\$6,463	\$22,157	\$358,700
Yates County	\$44,947	#	\$70,833	\$38,750	\$45,260	\$6,197	\$32,083	\$104,200
Queens County	\$54,870	\$56,607	\$54,725	\$48,940	\$58,878	\$5,930	\$9,938	\$465,200
St. Lawrence County	\$41,670	\$63,750	\$36,786	\$60,833	\$41,817	\$4,885	\$26,964	\$72,900
Tioga County	\$51,011	\$65,405	\$61,417	\$47,891	\$51,176	\$3,120	\$17,514	\$89,200
Putnam County	\$88,036	\$97,424	\$92,500	\$86,612	\$88,697	\$1,424	\$10,812	\$424,400
Clinton County	\$47,786	\$56,250	\$58,250	\$58,929	\$47,804	(\$18)	\$11,125	\$108,800
Schuyler County	\$44,575	\$53,333	#	\$67,386	\$44,762	(\$187)	\$22,624	n/a
Hamilton County	\$45,242	#	#	#	\$46,169	(\$927)	^	n/a

#: No data available for this racial/ethnic group, or numbers were too small for analysis.

^ No disparity calculated due to small numbers.

Data source: U.S. Census Bureau, 2005–2009 American Community Survey 5-Year Estimates

# NYS TOUCHSTONES/KIDS COUNT

The median home value column (column i) was added to gauge how affordable home ownership might be for a family with the county median income to purchase a home in their county. The Bronx has the 10th highest median home values in the state, with the lowest median income overall. It would be difficult for a family earning the median county income of \$33,794 to buy a home priced \$358,700, the median home value in the Bronx. The county with the second lowest median income was Chautauqua, with a median home value of \$75,900—a more affordable home purchase for the median income of \$40,179. Within the top 10 counties with the lowest median income, only the Bronx and Delaware County have median home values over \$100,000.

## UNEMPLOYMENT BY RACE AND ETHNICITY

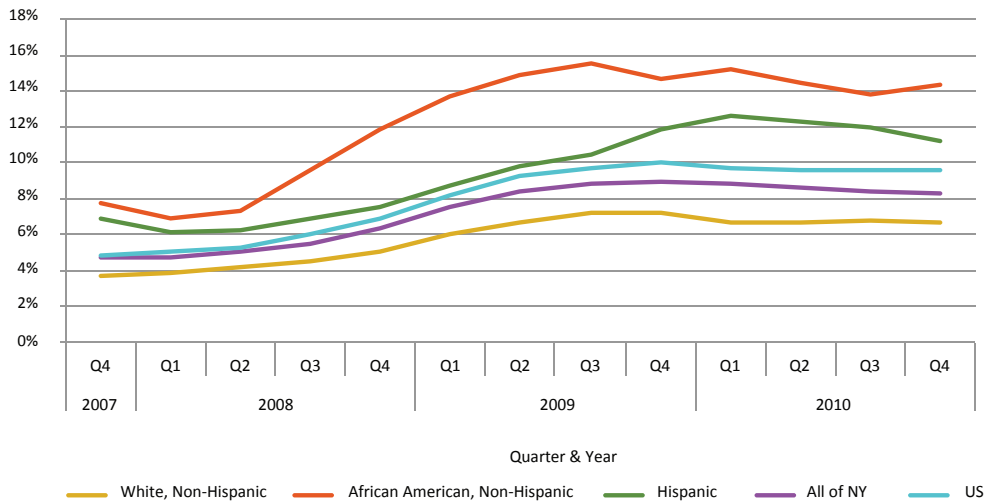
Over the past 3 years, the unemployment rate has risen for workers of every race and ethnicity. High rates of unemployment, especially prolonged unemployment, impact community economics, family finances and mobility, and individual stress levels (4).

- African American and Hispanic workers have unemployment rates of 14.4 percent and 12 percent respectively.
- These two unemployment rates reflect a disparity when compared to the unemployment rate of 6.7 percent for White workers.
- Figure 16 displays the unemployment rates in New York State for the last quarter of 2007, viewed as the initial point of the 2007 recession, through the last quarter of 2010. The unemployment are twice as high for African American and Hispanic workers than White workers.



Figure 16.

## Quarterly unemployment in New York and the United States, 2007–2010



**DATA SOURCE:** Depressed States: Unemployment Rate Near 20 Percent for Some Groups (Economic Policy Institute Issue Brief No. 299), by A. Austin, April 20, 2011. Washington, DC: Economic Policy Institute.

Children in families suffering from parental unemployment are at risk for missing school, changing schools, and increased familial stress due to financial situations (5). State and federal policies have stressed decreasing spending while at the same time focusing on economic opportunities for businesses that will provide new jobs in our communities. For example, workforce training for green jobs, both high-tech and low-tech, is increasingly important for opportunity and growth during this economic period. Clean, green energy options such as wind and solar panel farms, watershed protection, and the advanced nanotechnology field offer many options for high school graduates as well as the college educated.

## RADON

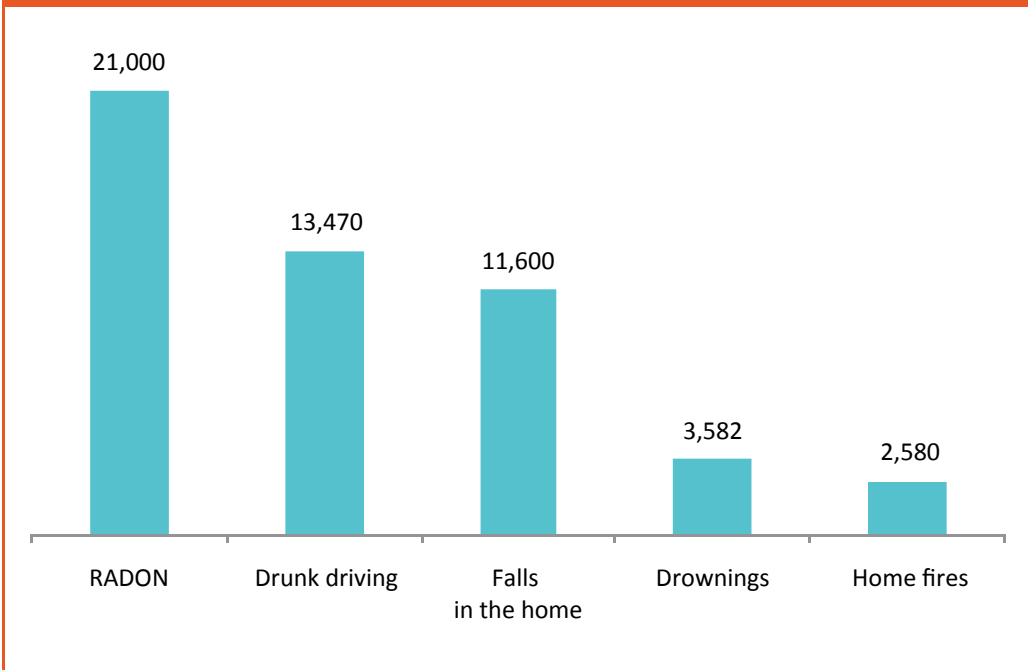
Whether a neighborhood has fresh air or pollution, clear streams or milky runoff, and public green space for playgrounds or unsafe abandoned lots tells visitors and residents a lot about the community's overall health. Positively or negatively, the outside natural environment and the constructed or built environment can impact our health as much as our own biology (e.g., genetics) and our own behavior (e.g., smoking, regular exercise). Children are affected by environmental aspects of our communities due to their growing bodies and their smaller stature since they are closer to the ground, increasing their exposure to ground level toxins.





Research has shown that exposure to radon gas, a known carcinogen, is the second leading cause of lung cancer. However, radon is the number one cause of lung cancer among nonsmokers, according to (EPA estimates (6). On January 13, 2005, Dr. Richard H. Carmona, the U.S. Surgeon General, issued a national health advisory on radon. In 2006, the CDC ranked radon related lung cancer deaths as the number one cause of death in front of drunk driving, falls in the home, and drowning (Figure 18).

**Figure 18.**  
Number of deaths per year by cause of death, 2006



**DATA SOURCE:** Radon is estimated to cause about 21,000 lung cancer deaths per year, according to EPA's 2003 Assessment of Risks from Radon in Homes (EPA 402-R-03-003). The numbers of deaths from other causes are taken from the Centers for Disease Control and Prevention's 2005–2006 National Center for Injury Prevention and Control Report and 2006 National Safety Council Reports.

Currently, there is no research that indicates that children are more at risk than adults for radon exposure, although there is growing evidence that a certain synergy exists between smoking and radon exposure that leads to a higher risk for lung cancer (7). However, there is a gap in the research about any connection between exposure to secondhand smoke and exposure to radon for members of a smoker's family. Secondhand smoke affects children in

# NYS TOUCHSTONES/KIDS COUNT

microclimates, such as in cars and their homes, as their bodies' defenses are still forming and they tend to breathe faster than adults. Secondhand smoke is the third leading cause of lung cancer (7).

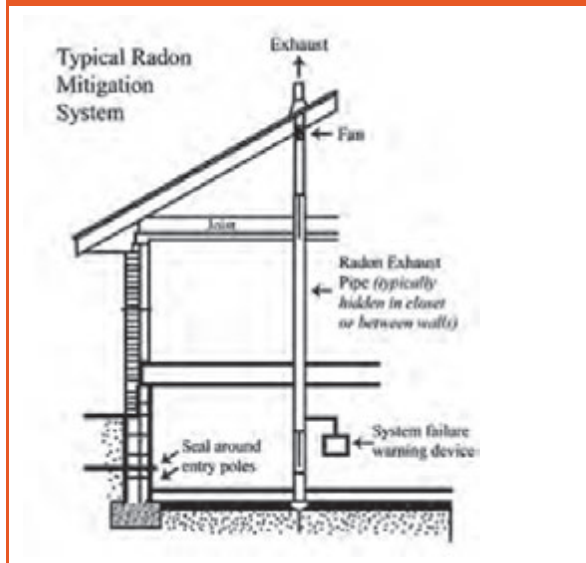
Many children spend much of their day inside licensed child care settings and school buildings, which are regulated for structural and procedural protection for health and safety. The regulations of the Commissioner of Education § 155.5 (m) require that school districts must take responsibility to be aware of the geological potential for high levels of radon and to test and mitigate as appropriate (8). The Office of Child and Family Services that oversees

child care regulation requires testing of child care space if the facility is in one of New York State's radon zones (9). If testing reveals high radon levels (4 pCi/L or above), remediation is required at the child care facility.

Homeowners, schools, child care, and youth centers can make improvements to their homes and facilities if radon is present in more than recommended amounts by installing a pipe or vent from underneath the basement or concrete slab that vents to the roof, essentially allowing the radon gas to flow out of the earthen ground and up to the air above the structure, never coming inside the house, school, or child care setting (Figure 19).

Figure 19.

Example of a Radon mitigation system.



DATA SOURCE: U.S. Department of Health and Human Services, Environmental Protection Agency.

## POLICY ISSUES

Regarding the issues presented in this section:

- Emergency Unemployment Compensation (EUC) was extended until January 3, 2012, by the Tax Relief, Unemployment Insurance Reauthorization, and Job Creation Act of 2010 (P.L. 111-312). EUC is a 100 percent federally funded program that provides benefits to individuals who have exhausted regular state benefits. The EUC program was created on June 30, 2008, and has been modified several times. This enactment does not provide additional weeks of benefits to individuals who had already exhausted all entitlements under previous law.

- Children’s environmental health concerns are important given the exponential growth of a young child’s body and the amount of time a child’s spend in schools and child care setting throughout his or her childhood. Radon awareness in certain geographic areas of New York can warrant mitigation and these jobs are possible career pathways in the construction field.

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# NYS TOUCHSTONES/KIDS COUNT

For more information about New York and our data partners, visit the following sites:

Governor

<http://www.governor.ny.gov/>

NYS Office of Temporary and Disability Assistance

<http://otda.ny.gov/>

New York State

<http://www.ny.gov/>

NYS Commission on Quality of Care and Advocacy for Persons with Disabilities

<http://cqc.ny.gov/>

Council on Children and Families

<http://www.ccf.state.ny.us/index.htm>

Office of Probation and Correctional Alternatives, NYS Division of Criminal Justice Services

<http://www.dpca.state.ny.us/index.htm>

NYS Office of Aging

<http://www.aging.ny.gov/>

NYS Education Department

<http://www.nysed.gov/>

NYS Office of Alcoholism and Substance Abuse Services

[www.oasas.state.ny.us](http://www.oasas.state.ny.us)

NYS Division of Criminal Justice Services

<http://criminaljustice.state.ny.us/>

NYS Office of Children and Family Services

[www.ocfs.state.ny.us](http://www.ocfs.state.ny.us)

NYS Office for People with Developmental Disabilities

<http://www.opwdd.ny.gov/>

NYS Department of Health

<http://www.nyhealth.gov/>

NYS Department of Labor

<http://www.labor.ny.gov/home>



# NYS TOUCHSTONES/KIDS COUNT





NEW YORK STATE

# Kids' Well-being Indicators Clearinghouse

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