

Children's Cabinet

April 30, 2019

Agenda

- Welcome & Introductions
- 2019 *RI Kids Count Factbook* – Key Highlights
- Third Grade Reading Action Plan Update
- Whole Family Approach to Jobs Discussion
- Public Comment & Discussion

Welcome, Introductions, and Announcements

- Introductions
- Adoption of Minutes
- Welcome Commissioner Angélica Infante-Green!

2019 RI KIDS COUNT Factbook **Highlights & Key Takeaways**



2019 Rhode Island Kids Count Factbook



Family and Community

The Diversity of Rhode Island's Children

- According to the 2010 Census, 72% of Rhode Island children were White, 8% were Black, 3% were Asian, less than 1% were Native American, 9% identified as Some other race, and 7% identified as Two or more races.
- In 2010, 21% of RI children identified as Hispanic. Hispanic children are also included in the race calculations above.
- Between 2013 and 2017, 23% of Rhode Island children between the ages of five and 17 spoke a language other than English at home.
- Between 2013 and 2017, there were 8,981 foreign-born children.
- 26% of children in Rhode Island live in immigrant families (living in a family with at least one parent who is foreign born).



Economic Well-Being

Slight Decline in Child Poverty: 1 in 6 Children Still Living in Poverty

Children in Poverty				
	2014	2015	2016	2017
RI	19.8%	19.4%	17.0%	16.6%
US	21.7%	20.7%	19.5%	18.4%
National Rank*				<i>24th</i>
New England Rank**				<i>6th</i>

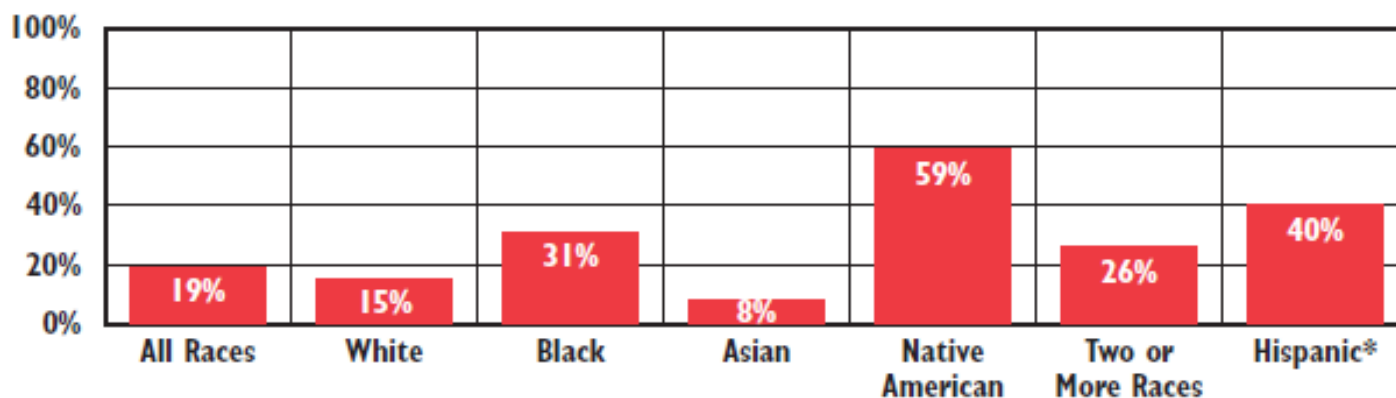
**1st is best; 50th is worst*

***1st is best; 6th is worst*

- In 2017, about 1 in 6 children in Rhode Island (33,858) lived in poverty.
- In 2018, the federal poverty threshold was \$20,231 for a family of three with two children.

Poverty by Race/Ethnicity

Children in Poverty, by Race and Ethnicity, Rhode Island, 2013-2017



Source: U.S. Census Bureau, American Community Survey, 2013-2017. Tables S1701, B17020A, B17020B, B17020C, B17020D, B17020G and B17020I. *Hispanic children may be included in any race category.

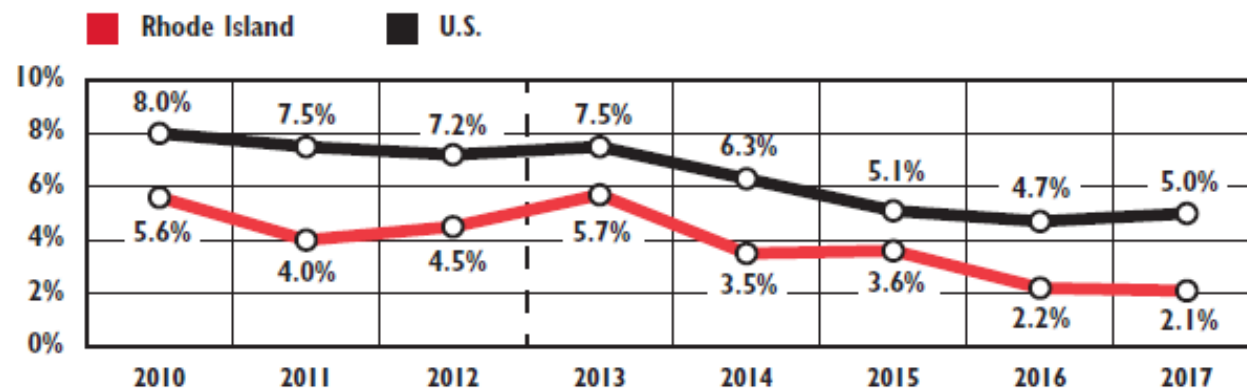
- 64% of poor children in Rhode Island between 2013 and 2017 lived in the four core cities of Central Falls, Pawtucket, Providence, and Woonsocket.
- Children under age 6 are at higher risk of living in poverty than any other age group.



Health

Children's Health Insurance

Children Without Health Insurance, Rhode Island and U.S. , 2010-2017

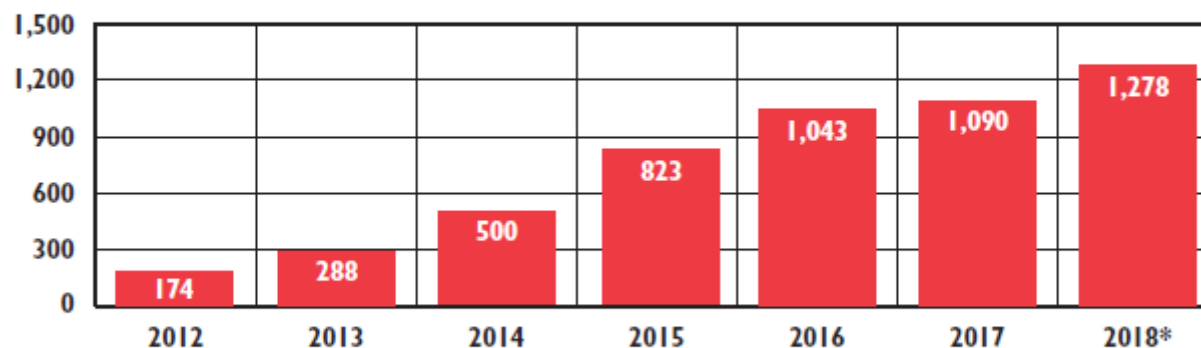


Source: U.S. Census Bureau, American Community Survey, 2012 & 2017. Table CP03. Data from 2010 to 2012 are for children under 18 years of age and data from 2013 to 2017 are for children under 19 years of age due to a change in the 2017 American Community Survey. Prior Factbooks are not comparable.

- In 2017, 2.1% of Rhode Island's children under age 19 were uninsured. Rhode Island ranks 3rd best in the U.S. with 97.9% of children having health insurance. Over half (59%) of children in Rhode Island are covered by private health insurance, most of which is obtained through their parents' employers.
- Approximately 70% of the estimated 6,725 uninsured children under age 18 in Rhode Island between 2013 and 2017 were eligible for Rite Care coverage based on family income but were not enrolled.

Evidence-Based Family Home Visiting

Families Enrolled in Evidence-Based Family Home Visiting Coordinated by the Rhode Island Department of Health, Rhode Island, 2012-2018

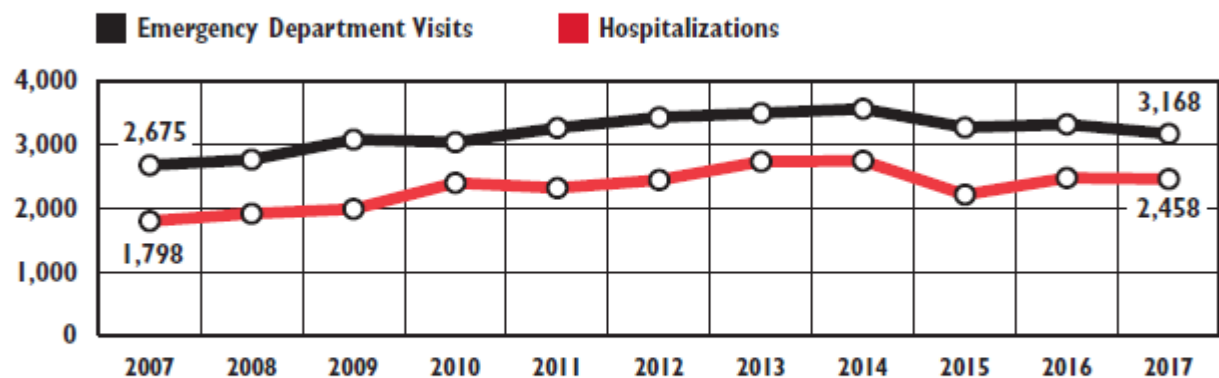


Source: Rhode Island Department of Health, Family Home Visiting, Family Visiting Database, October 2012-2018. *Beginning in 2018, enrolled families includes all families participating in Parents as Teachers programs, including those without MIECHV funding.

- Family home visiting programs are designed to reach young children and their families at home, providing parenting education to foster healthy, safe, and stimulating environments for young children.
- As of October 2018, 62% of the 1,278 families enrolled in evidence-based home visiting in Rhode Island lived in one of the four core cities.
- Early Head Start is also recognized as an evidence-based family home visiting program serving 656 pregnant women and children in Rhode Island.

Children's Mental Health

**Emergency Care for Primary Diagnosis of Mental Disorder,
Children Under Age 18, Rhode Island, 2007-2017***



Source: Rhode Island Department of Health, Hospital Discharge Database, 2007-2017. *Data are for emergency department visits and hospitalizations, not children. Children may visit emergency department or be hospitalized more than once. Trend line is comparable to Factbooks since 2012. Note: Effective October 1, 2015, the International Classification of Disease (ICD) codes changed from the 9th classification to the 10th classification, which may impact comparability across the years.

- In 2017, there were 3,168 emergency department visits and 2,458 hospitalizations of Rhode Island children with a primary diagnosis of a mental disorder. Between 2007 and 2017, emergency department visits increased 18% and hospitalizations increased 37%.

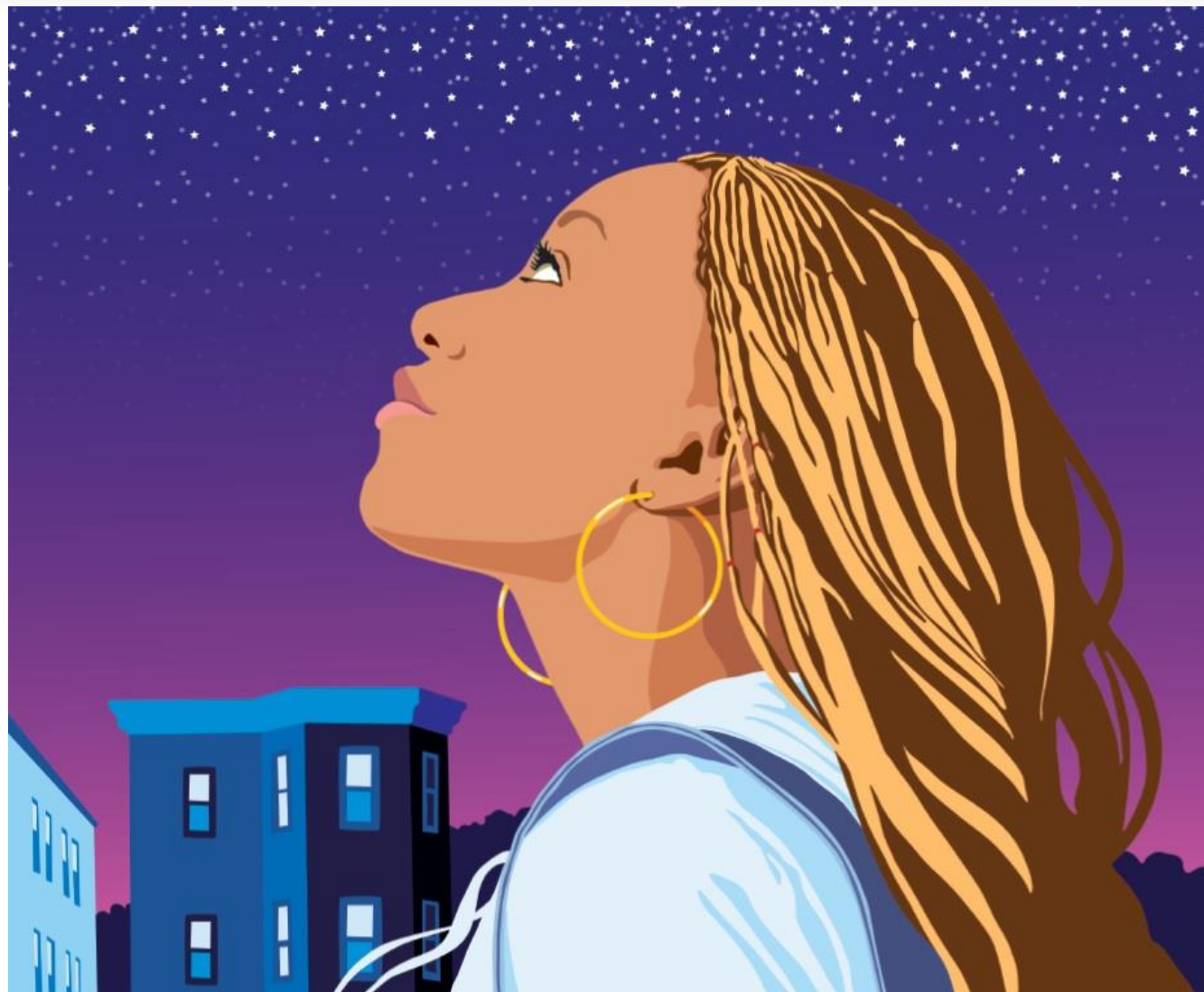
Alcohol, Drug, and Tobacco Use – High School Students

**Current Substance Use, Rhode Island High School Students
by Select Subgroups, 2017**

	ALCOHOL USE*	E-CIGARETTE USE*	CIGARETTE USE*	MARIJUANA USE*	PRESCRIPTION DRUG MISUSE**
Female	26%	17%	5%	23%	3%
Male	20%	22%	7%	23%	4%
Black, Non-Hispanic	19%	12%	1%	27%	4%
White, Non-Hispanic	25%	23%	7%	22%	3%
All other races, Non-Hispanic	NA	16%	1%	19%	2%
Multiple races, Non-Hispanic	29%	20%	6%	38%	1%
Hispanic	20%	16%	6%	23%	4%
9th Grade	16%	17%	6%	15%	4%
10th Grade	20%	21%	5%	20%	5%
11th Grade	26%	22%	4%	26%	3%
12th Grade	33%	21%	9%	33%	2%
<i>All Students</i>	<i>23%</i>	<i>20%</i>	<i>6%</i>	<i>23%</i>	<i>4%</i>

Source: 2017 Rhode Island Youth Risk Behavior Survey, Rhode Island Department of Health, Center for Health Data and Analysis. *Current use is defined as students who answered yes to using respective substances in the 30 days prior to the survey. **Prescription drug misuse is defined as those without a doctor's prescription. NA is not available due to small sample size.

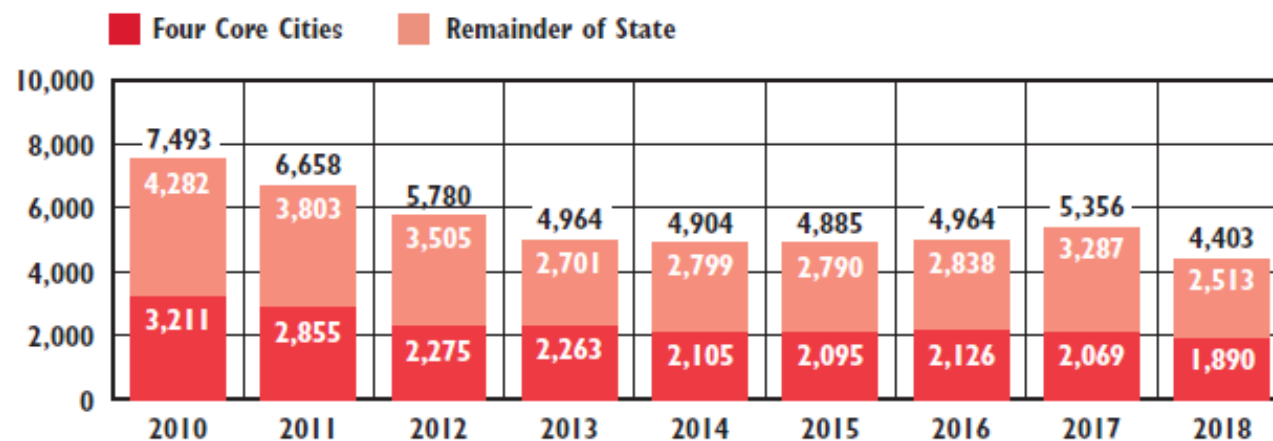
- Among Rhode Island high school students in 2017, 23% reported current (i.e. in the past 30 days) alcohol consumption, 23% reported current marijuana use, 20% reported current use of e-cigarettes, 11% reported current binge drinking, 6% reported current cigarette use, and 4% reported current prescription drug misuse.



Safety

Youth Referred to Family Court

Juvenile Wayward/Delinquent Offenses Referred to Rhode Island Family Court, 2010- 2018



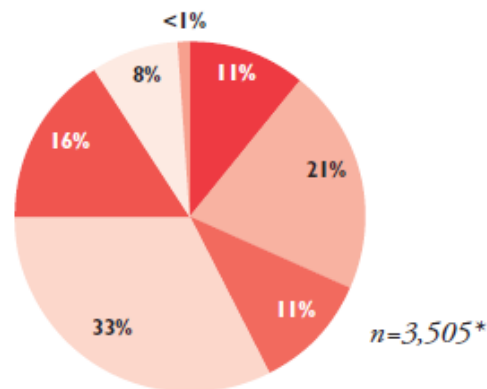
- During 2018 in Rhode Island, 2,565 children and youth were referred to Family Court for 4,403 wayward and delinquent offenses.
- In 2018, 10% of offenses referred to Family Court involved youth ages 12 or younger, 43% youth ages 13 to 15, 46% youth ages 16 to 17, and 1% of unknown age.
- 41% of offenses involved White youth, 25% Black youth, 15% Hispanic youth, 1% Asian youth, and 18% of offenses involved youth of Some other race or an unknown race.

Child Abuse and Neglect

Child Abuse and Neglect, Rhode Island, 2018

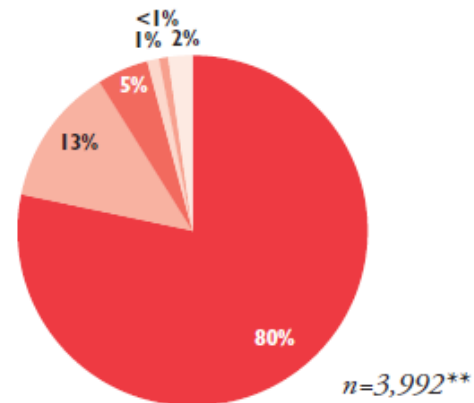
By Age of Victim*

11% (372)	Under Age 1
21% (742)	Ages 1 to 3
11% (395)	Ages 4 to 5
33% (1,148)	Ages 6 to 11
16% (550)	Ages 12 to 15
8% (297)	Ages 16 and Older
<1% (1)	Unknown



By Type of Neglect/Abuse**

80% (3,186)	Neglect
13% (501)	Physical Abuse
5% (185)	Sexual Abuse
1% (42)	Medical Neglect
<1% (14)	Emotional Abuse
2% (64)	Other



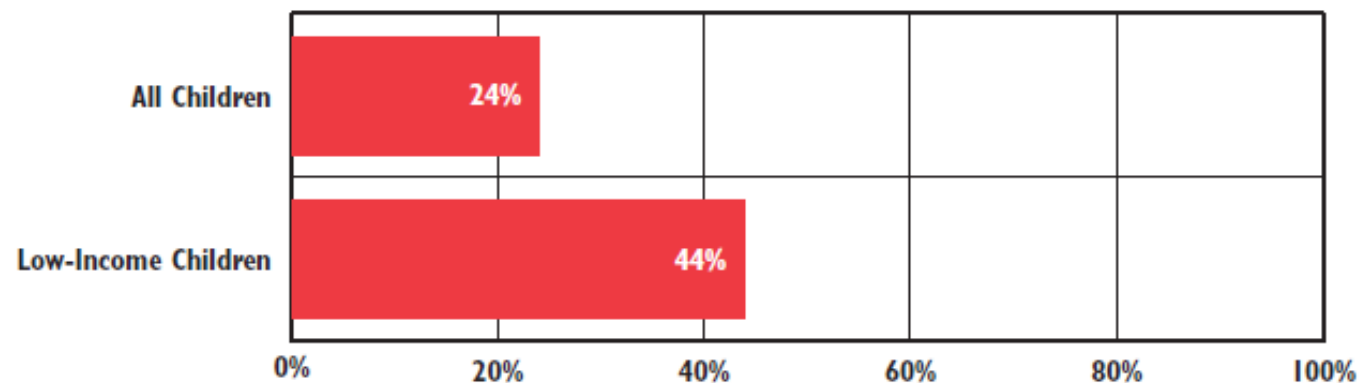
- The rate of child abuse and neglect per 1,000 children under age 18 was almost two times higher in the four core cities (21.5 per 1,000 children) than in the remainder of the state (11.2 per 1,000 children).



Education

Head Start or State Pre-K

**Percentage of Children Enrolled in Head Start or State Pre-K
the Year before Kindergarten, Rhode Island 2018-2019**



Source: Rhode Island KIDS COUNT calculations using October 2018 enrollment in Head Start and State Pre-K as numerator and October 2018 enrollment in public kindergarten as denominator with low-income population estimated using the % of children receiving free or reduced-price lunch.

- As of the 2018-2019 school year, there were 2,359 children enrolled in either Head Start or State Pre-K during the year before kindergarten, approximately 24% of all children and 44% of low-income children. Fifty-four percent of these children were enrolled in Head Start and 46% were enrolled in State Pre-K.

Math Skills

- In Rhode Island in 2018, 35% of third graders and 23% of eighth graders met expectations in math on the *RICAS*.
- There are large disparities by race/ethnicity, income, disability, and English Learner status.

Third- & Eighth- Grade Students Meeting Expectations on the *RICAS* Math Assessment, Rhode Island, 2018

SUBGROUP	THIRD GRADE	EIGHTH GRADE
Male Students	37%	22%
Female Students	34%	24%
*English Learners	13%	<5%
Non-English Learners	39%	25%
*Students With Disabilities	9%	<5%
Students Without Disabilities	40%	26%
Low-Income Students	22%	9%
Higher-Income Students	50%	35%
White Students	45%	31%
Asian Students	49%	35%
Black Students	21%	8%
Hispanic Students	22%	8%
Native American Students	15%	7%
ALL STUDENTS	35%	23%

Source: Rhode Island Department of Education, *Rhode Island Comprehensive Assessment System (RICAS)*, 2018. Low-income status is determined by eligibility for the free or reduced-price lunch program. *Data is reported as <5% when more than 95% of students did not meet expectations.

High School Graduation Rate

**Rhode Island Four-Year High School Graduation and Dropout Rates,
by Student Subgroup, Class of 2018**

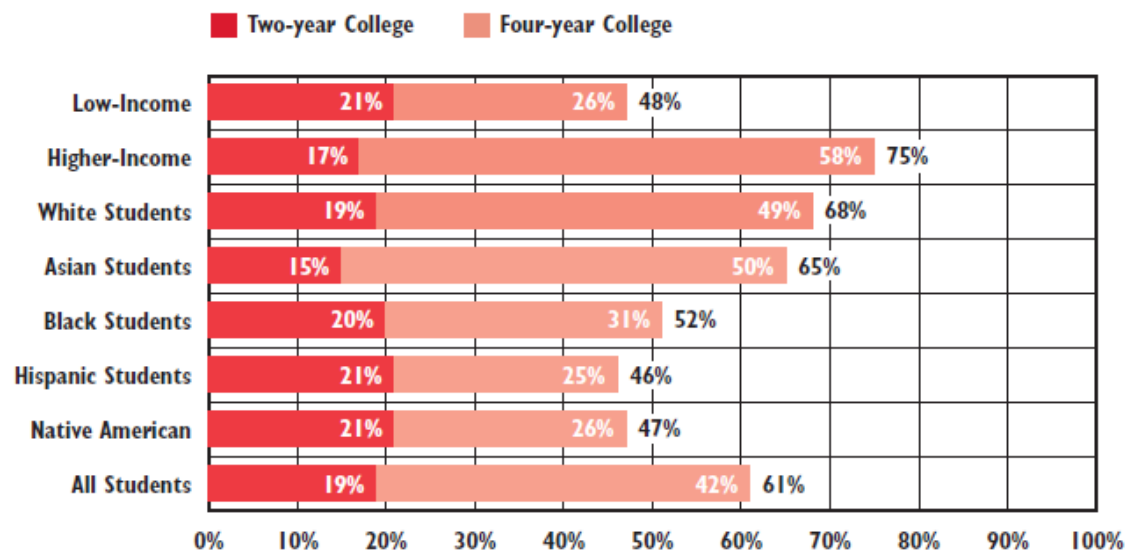
	COHORT SIZE	DROPOUT RATE	% COMPLETED GED	% OF STUDENTS STILL IN SCHOOL	FOUR-YEAR GRADUATION RATE
Female Students	5,037	7%	2%	4%	88%
Male Students	5,497	10%	2%	7%	81%
English Learners	968	20%	1%	7%	72%
Students With Disabilities	1,672	16%	2%	20%	62%
Students Without Disabilities	8,862	7%	2%	3%	88%
Low-Income Students	5,891	13%	2%	8%	77%
Higher-Income Students	4,643	3%	1%	3%	93%
White Students	6,270	6%	2%	4%	87%
Asian Students	308	4%	2%	3%	92%
Black Students	915	9%	1%	8%	83%
Hispanic Students	2,638	13%	2%	8%	77%
Native American	78	22%	0%	9%	69%
ALL STUDENTS	10,534	9%	2%	6%	84%

Source: Rhode Island Department of Education, Class of 2018. Percentages may not sum to 100% due to rounding.

- The Rhode Island four-year graduation rate for the Class of 2018 was 84%, up from 70% for the Class of 2008. There are disparities by race/ethnicity, income, disability, and English Learner status.

College Preparation and Access

Immediate College Enrollment by Family Income, Race, Ethnicity, and Type of College, Class of 2017, Rhode Island



Source: Rhode Island Department of Education, Class of 2017. Percentages may not sum exactly due to rounding.

- 61% of Rhode Island students who graduated from high school in the Class of 2017 enrolled in college immediately.
- There are large gaps in college access, particularly four-year college enrollment, between low- and higher-income students as well as by race and ethnicity.



Rhode Island KIDS COUNT
One Union Station
Providence, RI 02903

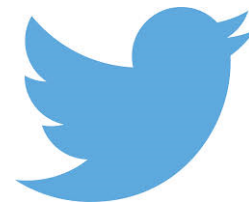
(401) 351-9400

www.rikidscount.org
rikids@rikidscount.org

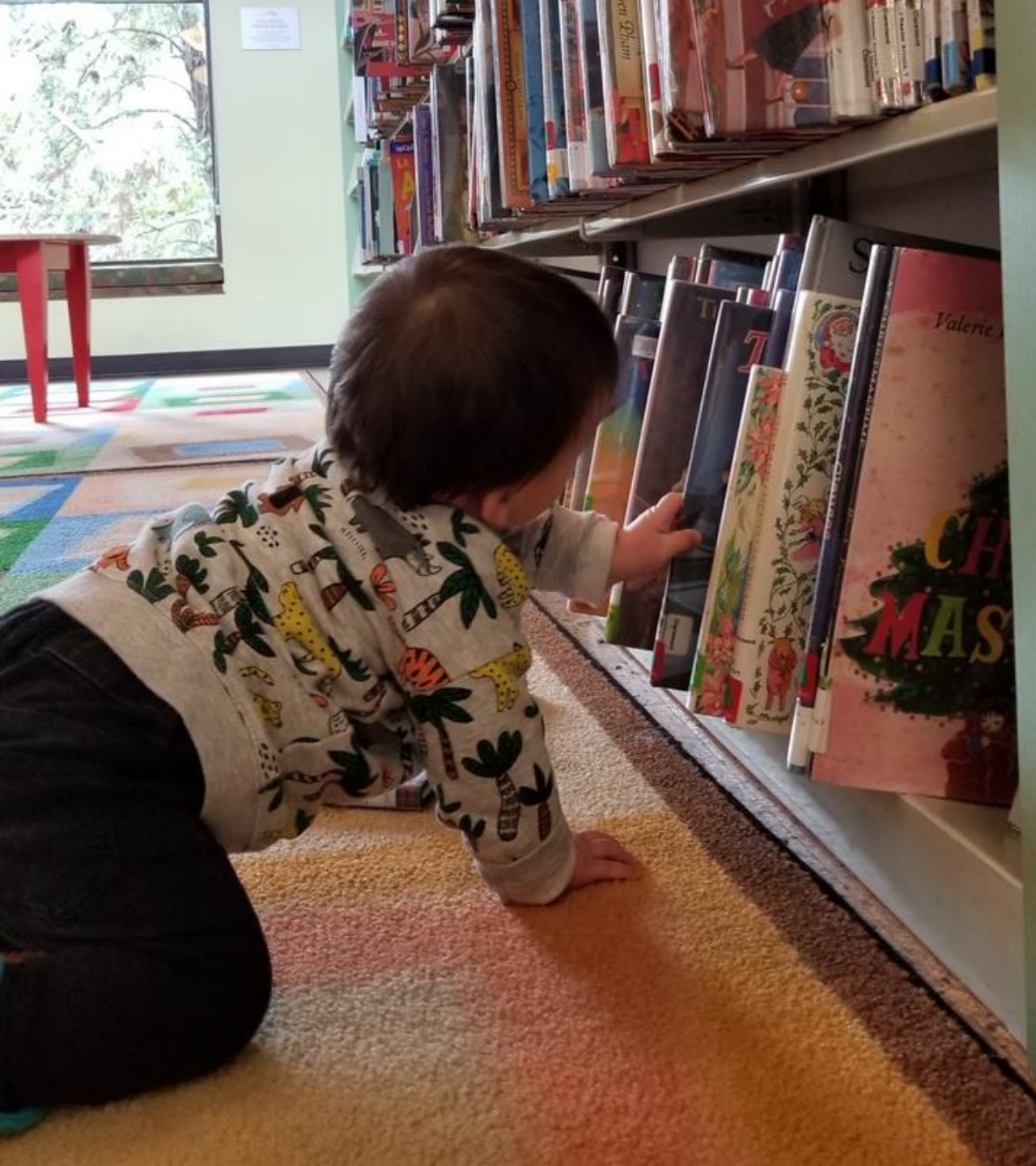
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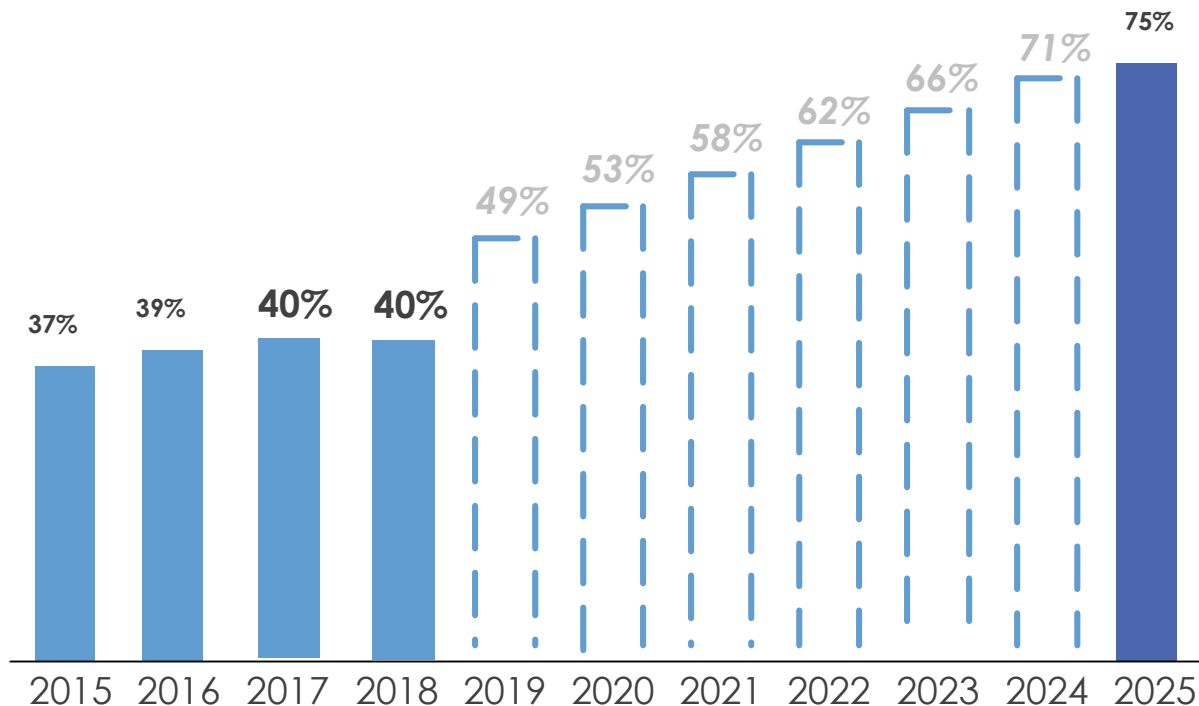


ACTION PLAN UPDATE

FISCAL YEAR 2019

Just over one-third of Rhode Island third graders are reading on grade level

Governor Raimondo has set a goal to double state-wide third-grade reading proficiency in eight years



In 2018, RI began using a new test – the RI Comprehensive Assessment System (RICAS). The goal will be reviewed in context of this new exam.

While closing significant achievement gaps

RI Third Graders Meeting Expectations on the RICAS 3rd Grade ELA Exam

Subgroup	2017-18
Students with Disabilities	9.4%
Multi Language Learners	13%
Hispanic Students	25%
Low-Income Students	26%
Black Students	26.3%
All Students	40.3%

By 2025, 75% of third-graders in Rhode Island will be reading at grade level

Governor Raimondo's Third Grade Reading Action Plan focuses on four specific and complementary strategies aimed at doubling the state's third grade reading proficiency level in eight years:



School Readiness: Ensure all children are ready to learn in school by *addressing health determinants and providing access to high quality early learning.*



School Success: Provide all children with high-quality literacy instruction in and out of school.



Safety Net Services: Effectively serve young children at high-risk with state-wide screening, referral and response system.



Community Engagement: Engage family and community members with a year-round campaign to prepare their children for school and for success in school.

Continuum

School Readiness (early health and learning) → School Success (engaging literacy instruction)

Safety Net Services (Timely screening, referral and response)

Robust Family and Community Engagement

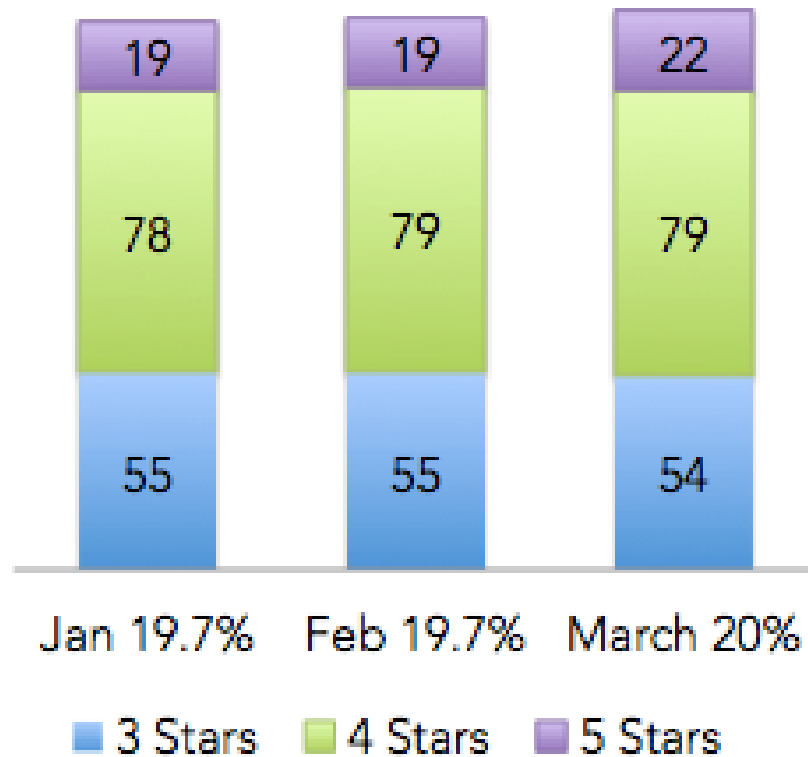
SCHOOL READINESS: Expand access to high-quality child care



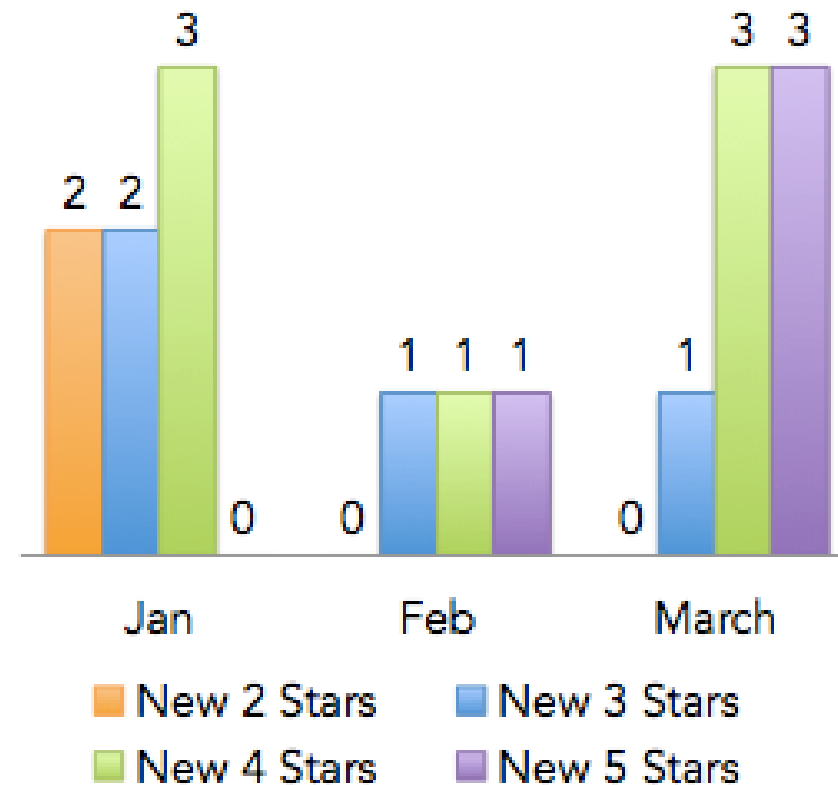
Objective #8	Baseline	End of FY18	FY19 Target	2025 Target
Ensure low-income children (ages 0-5) have access to high-quality child care	7.6%	11.2%	15%	25%

Progress on Quality in 2019

Providers with BrightStars Rating of 3-5 Stars



Providers with Increased BrightStars Rating by Month



SCHOOL SUCCESS: Increase Early Literacy Instructional Time



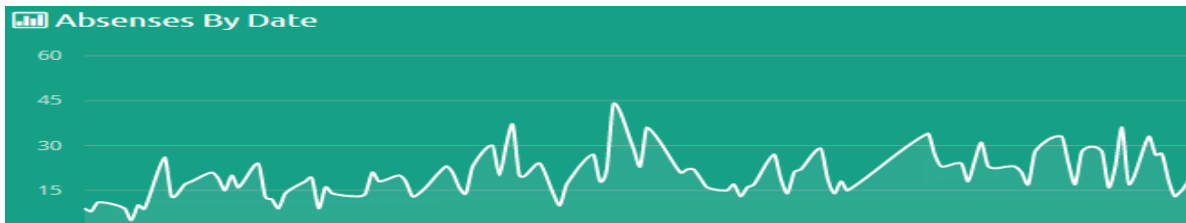
Objective	Baseline	End of FY18	FY19 Target	2025 Target
Reduce chronic absenteeism in early grades (PK-3) by 1/3	14%	14%	12%	10%

Progress on Chronic Absenteeism

RIDE Leaderboard – Elementary Schools

Rank	School Name	Grade Level	Enrolled	#	%	District
1	Nayatt School (01104)	E	331	3	0.9%	Barrington
2	Garvin Memorial (08108)	E	382	7	1.8%	Cumberland
3	Fogarty Memorial (13103)	E	313	6	1.9%	Glocester

School View



Statewide Data – Elementary Schools All Grades

Measurement	Percent On Track to Be Chronically Absent
Average	11.4%
Median	9.2%
Lowest	0.9%
Highest	47.9%

Data as of 4/23/19

SAFETY NET SERVICES: Respond to the needs of high-risk children



Objective	Baseline	End of FY18	FY19 Target	2025 Target
Ensure all children have access to affordable health insurance coverage and are accessing it	97%	97%	97%	99%

First 1,000 Days of RItE Care

- Advisory Committee led by Rhode Island KIDS COUNT
- Charged with developing a set of priorities for the Medicaid Program

Aligning Early Childhood and Medicaid

- Drive performance improvement on Early and Periodic Screening, Diagnosis and Treatment (EPSDT) benefit
- Strengthen bilateral connection between publicly-funded health services and early childhood resources
- Actively identify and outreach children with lapses in primary care who are at heightened risk of maltreatment

Key Partners:

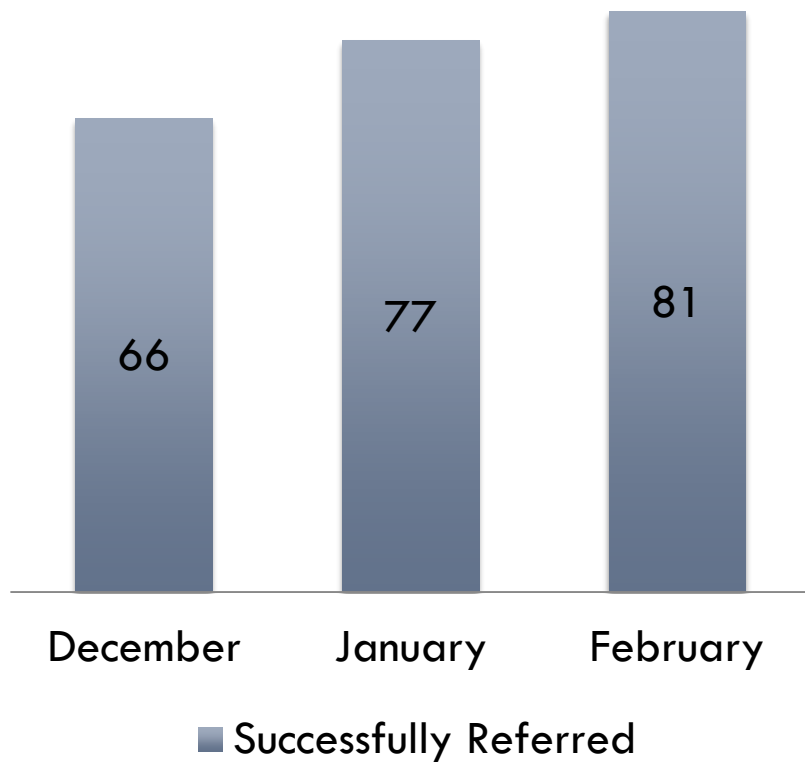


SAFETY NET SERVICES: Respond to the needs of high-risk children

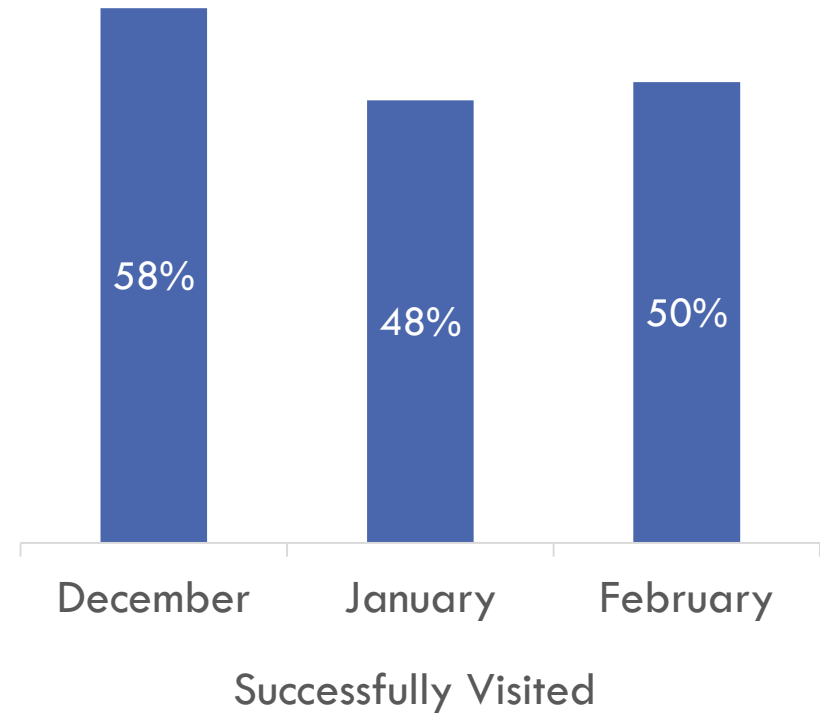


Objective #2	Baseline	End of FY18	FY19 Target	2025 Target
Ensure vulnerable infants and toddlers get engaged in appropriate evidence based services (NAS, DCYF)	67%	72%	75%	95%

Total First Connections referrals from DCYF



Percent of referred Families Visited by First Connections






COMMUNITY ENGAGEMENT: Increase public awareness

Objective

Engage ALL Rhode Islanders, especially parents, teachers, students and community members, in improving third-grade reading scores.


Parent Engagement: XPRIZE Initiative

- Adult education improves reading scores for both parents and children.
- XPRIZE provides free access to four apps that develop English language, math, and reading skills.
- If participants log in at least three times this summer, access will last through August 2020.
- The more people who join, the higher chance RI will win prize money!



MOVE FORWARD WITH MOBILE LEARNING

Codex: Lost Words of Atlantis Learning Upgrade Cell-Ed Amrita Learning



<https://www.innovate.ri.gov/rixprize>

Whole Family Approach to Jobs Initiative: *Helping Parents Work and Children Thrive*



NATIONAL CONFERENCE *of* STATE LEGISLATURES

The Forum for America's Ideas




ADMINISTRATION FOR
CHILDREN & FAMILIES



Our Children’s Cabinet Shared Vision for Youth recognizes that children need economically stable homes to thrive.

<i>Desired Outcome Areas</i>	Early Childhood (0-8)	Middle Childhood (9-14)	Young Adulthood (16-24)
Physically Healthy & Safe	Young children develop appropriately by receiving high-quality early healthcare services.	Adolescents and young adults develop appropriately by receiving regular, coordinated healthcare, avoiding abuse of substances, and accessing reproductive health services.	
	Children live in safe and healthy living environments.		
Behaviorally Able & Emotionally Hopeful	Children with (or at risk of) mental and behavioral health issues receive appropriate treatment and make successful transitions.		
Academically Empowered & Career Ready	Children are ready for elementary school and have access to high-quality early learning and developmental programs.		Adolescents and young adults access, afford, and complete college.
		Adolescents and young adults prepare for and thrive in appropriate, in-demand jobs.	
	Children regularly attend, actively participate, and progress appropriately in school.		
Socially, Civically, & Culturally Engaged		Children and adolescents avoid justice system involvement.	
	Children and youth engage positively with each other and their communities, and access sports, after-school and community-based programming.		
Supported by Stable Families & Communities	Children and families are supported by stable wages and housing.		
	Families with children maintain stability and meet basic needs during periods of household unemployment or under-employment.		

While we have made substantial progress in reducing unemployment in RI – and have more RI-ers employed than ever before – the percent of children in poverty remains high.



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

	WHITE	HISPANIC	BLACK	ASIAN	NATIVE AMERICAN	ALL RACES
Children in Poverty	14%	38%	29%	9%	64%	19%
Births to Mothers with <12 Years Education	6%	25%	13%	7%	23%	11%
Unemployment Rate	3.7%	7.2%	6.3%	NA	NA	4.1%
Median Family Income	\$85,409	\$37,585	\$46,968	\$80,024	\$29,009	\$79,043
Homeownership	65%	28%	31%	49%	19%	60%

Source: 2019 KIDS COUNT Factbook

This dichotomy between high employment and children living in poverty is not unique to Rhode Island and is driven by national trends.

Child poverty increased in the past 35 years primarily because of the following trends:

1. Decreased real value of wages earned by lower educated workers
2. Income-transfer programs (welfare/TANF) support has decreased in real value
3. Increased numbers of single-parent, female-headed families.

To address this issue, in December 2017, the federal Administration of Children and Families and National Conference of State Legislatures began piloting a Whole Family Approach to Jobs (WFAJ) Initiative in New England states.

Initiative Goals:

- To **identify program and policy alignment opportunities at the local, state, and federal level** that will improve employment equity and economic stability for low-income parents and that will move towards undoing intergenerational poverty for families.
- To help participating states **develop program, policy and system solutions that support low-income parents** in achieving greater **employment gains and economic stability**.
- To **identify policy opportunities, lessons learned, best practices, and challenges faced by states** seeking to implement whole-family approaches to economic opportunity.
- To collaborate across **Executive Branch, Legislative Branch, Community, Business, Philanthropic, and Family Partners**

The Whole Family Approach to Jobs Framework encourages that all programs and policies focus on the family unit, as opposed to focusing exclusively on children or on adults.



The Rhode Island WFAJ team includes a diversity of partners who have collaborated to surface areas for policy and program improvement in RI.

Partners

- Economic Progress Institute
- RI Kids Count
- Genesis Center
- Foster Forward
- Children's Friend and Services of Rhode Island
- HousingWorks at RWU
- Comprehensive Community Action
- Dunamis Initiative
- Newport Working Cities
- RI Children's Cabinet
- Department of Health
- RI Department of Education
- Department of Labor & Training
- Department of Children Youth & Families
- RI Office of Postsecondary Commissioner
- Senator Josh Miller
- Senator Gayle Goldin
- Many other community partners

Funders

- Rhode Island Foundation
- W.K. Kellogg Foundation
- National Conference of State Legislators
- Administration for Children and Families

Federal

- Health and Human Services, Health Resource Service Administration,
- Office of Civil Rights,
- Substance Abuse and Mental Health Administration and Office of the Assistant Secretary for Health.

The team identified one of RI's strengths is in creating pathways to well-paying jobs through the Real Jobs RI program.

It starts with employers....



...who develop workforce solutions....



...and connect Rhode Islanders with opportunities....



The team also identified three immediate areas for focus and has begun to implement action items to address gaps.

Young parent practice and policy

Challenge: Young parents who are still minors needing positive youth development and supports while also raising their young children.

- Developed vision
- Held focus group and interviews with parents and agencies
- Identified service gaps
- Cross coordination and training across agencies
- Partnership with Department of Health's Dunamis project ensure alignment of a new federal grant serving young parents.

Whole family budgeting

Challenge: Funding for discrete – rather than holistic – priorities creates barriers for serving whole families.

- Identified challenges through understanding non-profit budgeting at Foster Forward and Genesis Center
- Mapped budgeting processes across DHS, DLT, and RIDE

Early Childhood Education

Challenge: Available offerings and eligibility criteria often do not align with parents' needs, jeopardizing their ability to participate in workforce development or employment opportunities.

- Identified need for alignment with employer schedules and need for career pathways
- Pre-School Development grant awarded December 2018

Over the next few months, the group plans to move forward on the action items below.

Young Parents

- Create MOU between DHS/DCYF and DOH for cross training in young parent programs
- Review DHS Policies and Operational Changes
- Develop new service models (DHS, DOH, DLT)
- Gather more information through focus groups with young parents

Whole Family Budgeting

- Work to identify common budgeting process across DHS, RIDE, DLT
- Identify opportunities to braid TANF and JDF funding to support family economic progress

Early Childhood Education

- Support PDG planning grant

Addressing the Benefits Cliff

- DHS partnership with Working Cities Newport on the Cliff Effect as it relates to housing, employment and benefits cliff

As we continue this work, we see an opportunity to develop a broader initiative focused on Stable Families and Communities that connects with other family economic progress strategies.

For Discussion:

- What other areas do you see as needing a whole family approach?
- This work has escalated some ongoing challenges in achieving economic progress. How might the Children's Cabinet think about a targeted collaboration focused on economic progress for families?

Initial Ideas:

- Opportunity to define shared metrics and targets
- Collaboration among ongoing efforts to ensure alignment and identify gaps

Public Comment & Questions