

Summary Report Analysis of Early Years Health and Education Outcomes and Indicators with a Focus on Boys of Colorⁱ

Written By Urban Strategies Council Funded by Oakland Starting Smart and Strong

Boys of Color Have Greatest Early Disadvantages

Boys of color in Oakland begin life and school facing a set of health and education challenges much greater

than their female and White peers, according to an analysis by Urban Strategies Council of 19 early health and education indicatorsⁱⁱ. The greatest disparities are between boys of color and White boys, and begin in the earliest years of life.

Boys of color are more likely to have visited an emergency room for dental issues between the ages of 0-4, and to have developed asthmaⁱⁱⁱ by

Boys of color in Oakland are more likely than White boys to visit the ER for dental issues and to develop asthma by kindergarten. They are more likely to have no preschool experience and have less developed preliteracy skills by kindergarten. They are more likely to be enrolled in Special Education in kindergarten, and less likely to be reading proficiently in third grade.

kindergarten. Boys of color are much more likely than White boys to live in a low-income household and have had friends or family die by violence while they are still in elementary school.

As boys of color approach school age, they are more likely than White boys to have had no preschool experience, a factor strongly associated with a lack of school readiness^{iv}. If they did attend preschool, boys of color are more likely to be behind on developing pre-literacy skills. And as they progress through elementary school, boys of color are more likely than White boys to be enrolled in Special Education in kindergarten, and less likely to be reading proficiently by 3rd grade.

Among Boys of Color, African American and Latino Boys Fall Furthest Behind

Among boys of color in Oakland, African American and Latino boys are burdened with some of the highest disparities in early health and education outcomes.

Disparities for African American boys

African American boys are most prone to have health issues emerge before kindergarten. Infants born to African American mothers have the highest rates of low birth weight, which increases the risk of immediate life-threatening health problems as well as long-term complications and developmental delays. By kindergarten, African American boys are almost four times more likely to have been diagnosed with asthma than White boys.

In the early grades in OUSD, chronic absence and suspension weigh heavily on African American boys. They are absent at 3-4 times the rate of White boys and about twice the rate of Latino boys. African American and Latino boys are nearly three times less likely to be ready for kindergarten than White boys.



OUSD African American boys have the lowest rate of reading proficiency by third grade (11%); though Latino males' proficiency is only slightly higher (13%). Both African American and Latino boys are five times less likely to be reading proficiently in 3rd grade than White boys. African American boys are also the most likely to be suspended in the early grades: though none are suspended in kindergarten, by third grade, 9% are suspended.

African American boys represent the greatest number of homeless children in the early grades, followed closely by African American girls. There are nearly five times more African American boys reported homeless than Latino boys in grade TK-3rd. Nearly 60% of African American male 5th graders also reported they had one or more family members die by violence, nearly four times the rate reported by White boys.

Disparities for Latino Boys

Latino boys in OUSD face some of the greatest education disparities, particularly related to preschool participation, school readiness, and English language and literacy development. One in four Latino males entering OUSD kindergarten did not attend any preschool, and perhaps not surprisingly, only 29% are fully ready for kindergarten.

African American and Latino boys are nearly 3x less likely to be ready for kindergarten than White boys, and 5x less likely to be reading proficiently in 3rd grade.

Latino boys also have the lowest rates of early language and literacy development in preschool and early literacy vocabulary in transitional kindergarten. About half of Latino males are English Learners in kindergarten. In third grade, more than 75% of Latino boys and girls are English Learners.

Girls of Color also Face Poor Health and Education Outcomes

While the health and education outcomes for boys of color, particularly African American and Latino boys, are the poorest, other subpopulations are also experiencing dramatically disparate health and education outcomes.

For instance, nearly one in four Latina girls have no preschool experience, and they have very low rates of school readiness (29%). Latina girls also have low rates of pre-literacy skills development in preschool and transitional kindergarten. African American girls have very high rates of chronic absence in the early grades, approaching 25% in grades K-3. They also have the second highest rates of asthma diagnoses in kindergarten; and homelessness and chronic absence in TK-3rd grades.

All Oakland children should have a healthy start in life, and the opportunity to prepare for and be successful in school. But by these early health and education metrics, we are not serving all of our children equitably. Our boys of color, specifically African American and Latino boys, are struggling against greater health risks and lack of readiness for school than other subpopulations. While the universal improvement of health and education outcomes should be our goal, there is a clear need for agencies and sectors to work together on targeted strategies, policies and programs that will address the early disparities for boys of color, and to further explore and prioritize strategies for other populations with major outcome gaps. vi



ENDNOTES

ⁱ Boys of color is defined here as any boys who are not identified as White. The term encompasses all non-white peoples, emphasizing common experiences of systemic racism. From a research standpoint, it also reflects the parameters for collecting racial and ethnic data in the United States.

Data sourced from Oakland Unified School District, Alameda County Public Health Department, and First 5 Alameda County. Education data covers the 2015-16 school year (preschool data from 2016-17), and public health data are for 2012-2014.

Asthma is a leading chronic illness among children and also one of the leading causes of school absenteeism (Centers for Disease Control and Prevention, https://www.cdc.gov/healthyschools/asthma/)

Katherine A. Magnuson Marcia K. Meyers Christopher J. Ruhm, Jane Waldfogel, Inequality in Preschool Education and School Readiness, *American Education Research Journal*, January 2004.

V Child Health USA 2014, https://mchb.hrsa.gov/chusa14/health-status-behaviors/infants/preterm-birth-low-birth-weight.html

vi For more information and to view the entire equity analysis of early health and education outcomes for Oakland children, please visit: www.urbanstrategies.org